

Form 99	D
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** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Open to Public

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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.

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.

		Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.						
Α	For th	e 2023 calend	lar year, or tax year beginning					
	Check if applicat	C Name o	forganization			D Employer identifica	ation number	
_	Addr							
			ATE SOLUTIONS				_	
	chan	ge Doing b	usiness as			91-112330	2	
	returi	n Numbe	and street (or P.O. box if mail is not delivered to street addre		Room/suite	E Telephone number		
	Final returi termi	n_	THIRD AVENUE		1200	206-443-9		
_	ated Amer	City or	cown, state or province, country, and ZIP or foreign post	al code		G Gross receipts \$	4,121,354.	
	returi Appli	DEA1	TLE, WA 98101			H(a) Is this a group ret		
	tion pend		nd address of principal officer: GREGG SMALL			for subordinates?	····· = =	
_	T	empt status:	AS C ABOVE		an [] 507	H(b) Are all subordinates incl		
			X 501(c)(3) 501(c) () (insert no.) CLIMATESOLUTIONS.ORG	_ 4947(a)(1)	or 527	1	st. See instructions	
_	Webs			her	I Voor	H(c) Group exemption	State of legal domicile: WA	
	art I	<u> </u>					State of legal dominine. W21	
-	1		be the organization's mission or most significant activitie	s TO A	CCELER	ATE CLEAN EN	ERGY	
e	.		NS TO THE CLIMATE CRISIS.					
Governance	2	Check this bo		ons or dispos	sed of more	than 25% of its net asse	ts.	
ver	3			-		3	17	
			dependent voting members of the governing body (Part				17	
s S	5		of individuals employed in calendar year 2023 (Part V, li		31			
/itie	6		of volunteers (estimate if necessary)				20	
Activities &	7 a	Total unrelate	d business revenue from Part VIII, column (C), line 12		0.			
_	b		business taxable income from Form 990-T, Part I, line 1			7b	0.	
						Prior Year	Current Year	
đ	8	Contributions	and grants (Part VIII, line 1h)			5,759,205.	3,894,932.	
Revenue	9	•	ice revenue (Part VIII, line 2g)			0.	43,825.	
Sev.	10		come (Part VIII, column (A), lines 3, 4, and 7d)			8,715.	57,395.	
	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			18,208.	49,429.	
	12		- add lines 8 through 11 (must equal Part VIII, column (A			5,786,128.	4,045,581.	
	13		milar amounts paid (Part IX, column (A), lines 1-3)			449,210.	142,000.	
	14		to or for members (Part IX, column (A), line 4)			2,578,992.	0. 3,191,652.	
ses	15		r compensation, employee benefits (Part IX, column (A),			2,578,992.	<u> </u>	
Expenses	10a		undraising fees (Part IX, column (A), line 11e)	677,2	1 3	• •	0.	
ĔXG			ing expenses (Part IX, column (D), line 25)			1,630,826.	1,508,885.	
	1 "		es (Part IX, column (A), lines 11a-11d, 11f-24e) es. Add lines 13-17 (must equal Part IX, column (A), line 2			4,659,028.	4,842,537.	
			expenses. Subtract line 18 from line 12			1,127,100.	-796,956.	
L.		1.00011001033		<u></u>		ginning of Current Year	End of Year	
Net Assets or	20	Total assets (Part X, line 16)			5,421,751.	4,579,998.	
Ass	21		s (Part X, line 26)			881,607.	836,810.	
Net	22		fund balances. Subtract line 21 from line 20			4,540,144.	3,743,188.	
	art II				I			
Und	ler pen	alties of perjury,	I declare that I have examined this return, including accompany	ying schedule	s and stateme	nts, and to the best of my k	nowledge and belief, it is	

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer			Date						
Here	GREGG SMALL, EXECUTIVE DI	RECTOR								
	Type or print name and title									
	Print/Type preparer's name	Date								
Paid	ERIC L. KIMPTON	ERIC L. KIMPTON		self-employed P01970440						
Preparer	Firm's name GREENWOOD OHLUND ,	PS		Firm's EIN 91-0873571						
Use Only	Firm's address 4241 21ST AVE W S	UITE 400								
	SEATTLE, WA 98199 Phone no. (206) 782-17									
May the IF	May the IRS discuss this return with the preparer shown above? See instructions									
LHA For	HA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)									

Form	n 990 (2023) CLIMATE SOLUTIONS 91-1123302	Page 2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	CLIMATE SOLUTIONS WORKS TO ACCELERATE CLEAN ENERGY SOLUTIONS TO THE	2
	CLIMATE CRISIS TO CREATE A THRIVING, EQUITABLE NORTHWEST, POWERED E	
	CLEAN ENERGY, INSPIRING THE TRANSITION TO SUSTAINABLE PROSPERITY	-
	ACROSS THE NATION AND BEYOND.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	es 🔄 No
	If "Yes," describe these new services on Schedule O.	
3	5 5, 5 5 , <u>7</u> 7 5	es 🚺 No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expens	es.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses	, and
	revenue, if any, for each program service reported.	
4a	1 200 000 110 000)
	100% CLEAN WA: ADVOCATED FOR WASHINGTON TO ADOPT POLICIES TO GET TO	<u> </u>
	100% CLEAN ELECTRICITY. EXPANDED OUR WORK ON REDUCING POLLUTION FRO	
	THE TRANSPORTATION SECTOR WITH A PRIMARY FOCUS ON ELECTRIFYING OUR	
	AND BUSES.	CIII(D
	AND DODES.	
4b	(Code:) (Expenses \$907,859. including grants of \$) (Revenue \$))
	100% CLEAN OR: ADVOCATED FOR POLICIES TO REDUCE CLIMATE POLLUTION I	ÍN Í
	OREGON, INCLUDING POLICIES TO CAP POLLUTION AND INVEST IN CLEANER	
	SOURCES OF ENERGY. EXPANDED OUR WORK ON REDUCING POLLUTION FROM THE	2
	TRANSPORTATION SECTOR WITH A PRIMARY FOCUS ON ELECTRIFYING OUR CARS	
	BUSES.	
	• 67509	
4c	(Code:) (Expenses \$ 538,919. including grants of \$ 30,000.) (Revenue \$)
	COMMUNICATIONS: PROVIDED EDUCATION AND INFORMATION ABOUT CLIMATE AN	1D
	CLEAN ENERGY EFFORTS IN OUR REGION TO THE PUBLIC VIA BLOGS, SOCIAL	
	MEDIA, EMAIL AND OTHER EFFORTS.	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ 708,720. including grants of \$) (Revenue \$ 43,825.)	
4e	Total program service expenses 3, 483, 368.	
		m 990 (2023)

Form	990	(2023)

Form 990 (2023) CLIMATE SOLUTIONS
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			37
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		
-	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			v
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			v
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		v	
	Part VI	11a	Х	<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	441		x
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	44.		x
А	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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	11c		- 23
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		<u> </u>
•	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f		x
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
120	Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
~	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		L
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 (2023)

Form	990	(2023)
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Form 990 (2023) CLIMATE SOLUTIONS
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		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			37
	Schedule K. If "No," go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
d	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
		<u>24u</u>		
254	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		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	254		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
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		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
L.	"Yes," complete Schedule L, Part IV	28a		X X
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>	28b		
C	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			37
0 -	Part V, line 1	34		X X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
D	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 postion 512/b)(12)2 (revealed on the Device in the Dev	35b		
36	within the meaning of section 512(b)(13)? <i>If</i> "Yes," <i>complete Schedule R, Part V, line 2</i>	330		
00	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
1~	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 23		Yes	No
la b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable1a23Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable1b0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1		
2	(gambling) winnings to prize winners?	1c	Х	

(gambling) winnings to prize winners?

Form	990 (2023) CLIMATE SOLUTIONS 91-1123	302	Р	_{age} 5			
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)						
			Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						
	filed for the calendar year ending with or within the year covered by this return 2a 31						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	<u> </u>			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		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		<u> </u>			
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		X			
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			
b	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		<u> </u>			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			v			
	any contributions that were not tax deductible as charitable contributions?	6a		X			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	~		1			
-	were not tax deductible?	6b					
7	Organizations that may receive deductible contributions under section 170(c). Did the exemptation requires a summat in process of 0.77 mode partly as a contribution and partly for goods and contribution provided to the part 2	7-		x			
a L	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 7b		<u> </u>			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<u> </u>			
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		x			
Ь		70					
d e	Did the experimentian measure and funder dimential and in the new many many and a new and here fit and the	7e		x			
f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	76 7f		X			
g							
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		<u> </u>			
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					
9	Sponsoring organizations maintaining donor advised funds.	_					
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter:						
а	Initiation fees and capital contributions included on Part VIII, line 12 10a						
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b						
11	Section 501(c)(12) organizations. Enter:						
а	Gross income from members or shareholders						
b	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						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	Is the organization licensed to issue qualified health plans in more than one state?	13a					
	Note: See the instructions for additional information the organization must report on Schedule O.						
b	Enter the amount of reserves the organization is required to maintain by the states in which the						
	organization is licensed to issue qualified health plans 13b						
	Enter the amount of reserves on hand			77			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		x			
	If "Yes," has it filed a Form 720 to report these payments? <i>If</i> "No," <i>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	45		x			
	excess parachute payment(s) during the year?	15					
16	If "Yes," see the instructions and file Form 4720, Schedule N.	46		x			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16					
17	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					
	If "Yes," complete Form 6069.	17					
				-			

	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.									
b	Enter the number of voting members included on line 1a, above, who are independent	1b	17	<u>'</u>						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	iny other			X				
	officer, director, trustee, or key employee?									
3	Did the organization delegate control over management duties customarily performed by or under the									
	of officers, directors, trustees, or key employees to a management company or other person?			3		X				
4	Did the organization make any significant changes to its governing documents since the prior Form 99	90 was	s filed?	4		X				
5	Did the organization become aware during the year of a significant diversion of the organization's asse	ets?		5		X				
6	Did the organization have members or stockholders?			6		X				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point o	one or							
	more members of the governing body?			7a	_	X				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, ste	ockhol	ders, or							
	persons other than the governing body?			7b		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	-	-							
а	The governing body?			8a	X					
b	Each committee with authority to act on behalf of the governing body?			8b		X				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read									
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	/enue	Code.)		1					
					Yes	No				
	Did the organization have local chapters, branches, or affiliates?			10a		X				
b	If "Yes," did the organization have written policies and procedures governing the activities of such cha	apters	affiliates,							
				10b		37				
	Has the organization provided a complete copy of this Form 990 to all members of its governing body	befor	e filing the form?	11a		X				
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.				37					
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	X					
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	,			77					
	on Schedule O how this was done			12c	_					
13	Did the organization have a written whistleblower policy?			13	X					
14	Did the organization have a written document retention and destruction policy?			14	X					
15	Did the process for determining compensation of the following persons include a review and approval	by inc	lependent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			45	v					
	The organization's CEO, Executive Director, or top management official			15a		v				
b	Other officers or key employees of the organization			15b		X				
40	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 arrangem			10-		x				
	taxable entity during the year?			16a						
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat	-	-							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic			10						
Sec	exempt status with respect to such arrangements?			16b						
	A7									
17 18	List the states with which a copy of this Form 990 is required to be filed	4 000	T (soction 501(c)(3)	e only	availa	blo				
10	for public inspection. Indicate how you made these available. Check all that apply.	ia 990.		s only	avalia					
	Image: The public inspection. Indicate now you made these available. Check all that apply. Image: The public inspection. Indicate now you made these available. Check all that apply. Image: The public inspection. Indicate now you made these available. Check all that apply. Image: The public inspection. Indicate now you made these available. Check all that apply. Image: The public inspection. Indicate now you made these available. Check all that apply. Image: The public inspection. Indicate now you made these available. Check all that apply. Image: The public inspection. Indicate now you made these available. Check all that apply. Image: The public inspection. Indicate now you made these available. Check all that apply. Image: The public inspection. Indicate now you made these available. Check all that apply. Image: The public inspection. Indicate now you made these available. Check all that apply. Image: The public inspection. Indicate now you made these available. Check all that apply. Image: The public inspection. Indicate now you made these available. Check all that apply. Image: The public inspection. Image: The public inspection. The public inspectins inspection. The public inspection. The pub									
19										
19	statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	l records							
20	CONNER SHARPE - 206-443-9570	no anc								
	1402 THIRD AVENUE, 1200, SEATTLE, WA 98101									
				Ген		/0000				

Form 990 (2023)

Section A. Governing Body and Management

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17

1a

X

Yes No

CLIMATE SOLUTIONS

1a Enter the number of voting members of the governing body at the end of the tax year

If there are material differences in voting rights among members of the governing body, or if the governing

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

Form 990 (2023) CLIMATE SOLUTIONS	91-1123302	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest C	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 List all of the organization's current officers, directors, trustees (whether individuals or organizations), r 	5 5	,

 List all of the organization's current officers, directors, trustees (whether in 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.

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

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

(A)	(B)	(C)					(D)	(E)	(F)		
Name and title	Average	(do		Pos	ition		ne	Reportable	Reportable	Estimated	
	hours per	box			unless person is both an		n an	compensation	compensation	amount of	
	week		officer and a		officer and a director		ctor/trustee)		from	from related	other
	(list any	ector						the	organizations	compensation	
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the	
	related	ustee	trustee		ee	bens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related	
	organizations below	ual tr	tional		n ploye	t com /ee	~	1099-NEC)		organizations	
	line)	ndividual trustee or director	Institutional t	Officer	Key employee	Highest compensated employee	Former			organizations	
(1) GREGG SMALL	40.00				-		4				
EXECUTIVE DIRECTOR		1		X				180,461.	0.	21,107.	
(2) SAVITHA REDDY PATHI	40.00										
DEPUTY DIRECTOR		1				x		131,308.	0.	16,673.	
(3) CONNER-BENNETT SHARPE	40.00										
OPERATIONS DIRECTOR		1				X		124,919.	0.	18,461.	
(4) KIMBERLY LARSON	40.00										
DIRECTOR OF COMMUNICATIONS AND ENGAG		1				X		119,061.	0.	17,272.	
(5) MEREDITH CONNOLLY	40.00										
OREGON DIRECTOR		1				X		119,062.	0.	14,429.	
(6) KELLY HALL	40.00										
WASHINGTON STATE DIRECTOR						Х		116,931.	0.	14,312.	
(7) CLARK BROCKMAN	1.00										
DIRECTOR		Х						1,350.	0.	0.	
(8) JACKIE DINGFELDER	4.00										
PRESIDENT		Х		Х				0.	0.	0.	
(9) ASH AWAD	2.00										
VICE PRESIDENT		Х		Х				0.	0.	0.	
(10) DEBORAH JENSEN	3.00										
TREASURER		Х		Х				0.	0.	0.	
(11) ML VIDAS	2.00										
SECRETARY		Х		Х				0.	0.	0.	
(12) HELEN KILBER	2.00										
SECRETARY UNTIL AUGUST		Х		X				0.	0.	0.	
(13) AISLING KERINS	1.00										
DIRECTOR		Х						0.	0.	0.	
(14) ANNIKA BERMAN	1.00										
DIRECTOR		Х						0.	0.	0.	
(15) BRANDON MIDDAUGH	1.00										
DIRECTOR		Х						0.	0.	0.	
(16) CHRIS CHEN	1.00										
DIRECTOR		Х						0.	0.	0.	
(17) EMIKO ATHERTON	1.00										
DIRECTOR		Х						0.	0.	0.	
000007 40 04 00										Form 990 (0000)	

Form	990	(2023)
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CLIMATE SOLUTIONS

91-1123302 Page 8

	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A) (B) (C) (D) (E)										(F)			
	Name and title	Average	(do not check more than one					one	Reportable	Reportable		Estima	ted	
		hours per	box	, unles	ss per	rson i	is both pr/trus	an	compensation	compensation		amoun		
		week (list any							from the	from related		othe		
		hours for	ndividual trustee or director				-		organization	organizations (W-2/1099-MISC	2/	compens from t		
		related	ee or	stee			Highest compensated employee		(W-2/1099-MISC/	1099-NEC)	.,	organiza		
		organizations	trust	nstitutional trustee		Key employee	ompe		1099-NEC)			and rela	ated	
		below	vidua	itutio	Officer	em pl	hest c	Former				organiza	tions	
		line)	Indi	Inst	Offi	Key	Emi	For						
) EMEKA ANYANWU	1.00									•		•	
	ECTOR	1 00	Х				-		0.		0.		0.	
) GAURAB BANSAL	1.00									_		•	
	ECTOR	1 0 0	Х						0.		0.		0.	
) GWEN MIGITA	1.00							0		<u> </u>		0	
	ECTOR	1 00	Х				-		0.		0.		0.	
) JAMES PUERINI	1.00	v						0		^		0	
	ECTOR) KATHY WASHIENKO	1.00	Х				-		0.		0.		0.	
		1.00	x						0		^		0	
	ECTOR) RUWAN JAYAWEERA	1.00	^				-		0.		0.		0.	
	ECTOR	1.00	x						0.		ο.		٥	
) TIM MILLER	1.00	^				-		0.		••		0.	
	ECTOR	1.00	x						0.		ο.		0.	
	ECTOR		^						0.		••		0.	
			•											
			1											
1h	Subtotal								793,092.		0.	102,2	254.	
10	Subtotal Total from continuation sheets to Part V	/II Section A							0.		0.	10271	0.	
	Total (add lines 1b and 1c)								793,092.		0.			
2	Total number of individuals (including but								· · · ·			/ _		
-	compensation from the organization		000	noco	u un		,	010					6	
												Yes		
3	Did the organization list any former office	r. director. trust	ee. k	(ev e	Iame	ove	e. or	hia	hest compensated empl	ovee on				
	line 1a? If "Yes," complete Schedule J for			-	•	-		Ŭ	· · ·	5		3	X	
4	For any individual listed on line 1a, is the s									ne organization				
	and related organizations greater than \$15											4 X		
5	Did any person listed on line 1a receive or													
	rendered to the organization? If "Yes." col	mplete Schedule	e J fo	or su	ich i	bers	on .		-			5	X	
Sec	ction B. Independent Contractors	-												
1	Complete this table for your five highest c	ompensated inc	lepe	nder	nt co	ontra	actor	s th	at received more than \$	100,000 of compe	nsat	tion from		
	the organization. Report compensation for	the calendar ye	ear e	endin	ıg w	rith c	or wi	thin	the organization's tax ye	ear.				
	(A)								(B)		_	(C)		
	Name and busines	s address	NC	ONE	3			_	Description of se	ervices	C	ompensati	on	
								_						
								+						
								+						
								\dashv						
<u></u>	Total number of independent contractors	(including but -	ot 1:	nites	1 + ~ -	the		tod	abova) who received	are then				
2	\$100,000 of compensation from the organ		J. 111	mec	10	(105	-	eu						

Form	1 990) (2	2023) CLI	MA	TE SOLU	JT:	IONS			91-1123	302 Page 9
Pa	rt VI		Statement of Re	ven	ue						
			Check if Schedule O o	conta	ains a respon	se c	or note to any lin	e in this Part VIII			
								(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
S S	1 :	a	Federated campaigns		1a						
Contributions, Gifts, Grants and Other Similar Amounts	I		Membership dues								
, Mo	(Fundraising events				191,121.				
àifts ar A	(Related organizations								
s, G		е	Government grants (contri	ibuti	ons) 1e		20,475.				
rion	1	f	All other contributions, gifts,	grant							
the			similar amounts not included	abov	/e 1f		683,336.				
d tr	9	g	Noncash contributions included in	lines 1	a-1f 1g \$		470,929.				
<u> </u>	ł	h	Total. Add lines 1a-1f					3,894,932.			
							Business Code	42.005	42.005		
ice	2 8		SERVICE FEES		_	900099	43,825.	43,825.			
er v ue	1	b				_					
n S Veni	0	C									
Program Service Revenue		d				-					
o d	4	e f	All other program service	rovo	2110	_					
_			Total. Add lines 2a-2f					43,825.			
	3		Investment income (includ					10,0100			
	-		other similar amounts)					57,395.			57,395.
	4		Income from investment of tax-exempt bond p							-	
	5		Royalties	. <u></u>							
					(i) Real		(ii) Personal				
	6 a	а	Gross rents	6a							
	l	b	Less: rental expenses	6b							
	(С	Rental income or (loss)	6c							
			Net rental income or (loss))							
	7 a	а	Gross amount from sales of		(i) Securitie	es	(ii) Other				
			assets other than inventory	7a							
	1		Less: cost or other basis								
evenue			and sales expenses	7b 7c							
leve			Gain or (loss)								
er Re			Gross income from fundraisin		ſ						
Other	0.			-	21. of						
Ŭ			contributions reported on								
			Part IV, line 18			8a	75,773.				
	I		Less: direct expenses			8b	75,773.				
	C	с	Net income or (loss) from	fund	raising event	s		0.			
	9 a	а	Gross income from gamin	ig ac	tivities. See						
			Part IV, line 19			9a					
			Less: direct expenses		•••••••••••••••••••••••••••••••••••••••	9b					
			Net income or (loss) from								
	10 a	а	Gross sales of inventory, I								
	-		and allowances			10a					
			Less: cost of goods sold		•••••••••••••••••••••••••••••••••••••••	10b					
	(С	Net income or (loss) from	sales	s of inventory	′	Business Code				
sn	44	_	REBATES AND R	ਸ਼ਾਹ	MBIIDCTN	r	900099	29,429.			29,429.
Miscellaneous Revenue	11 å		ACTION FUND R			<u> </u>	900099	29,429.			29,429.
∍llar ven		D C	TOTION FOND K	<u>v .</u>		-	200022	20,000.			20,000.
isce Be			All other revenue			-					
Σ			Total. Add lines 11a-11d					49,429.			
			Total revenue. See instruction					4,045,581.	43,825.	0.	106,824.

Page **9**

Check here

16

17

18

19 20

21

22

23

24

а

b

С d

е

25

26

Interest

Insurance

Occupancy

Travel Payments of travel or entertainment expenses

for any federal, state, or local public officials Conferences, conventions, and meetings

Payments to affiliates

Depreciation, depletion, and amortization

Other expenses. Itemize expenses not covered

STAFF SUPPORT

All other expenses

EVENT SUPPLIES

GOVERNMENT FEES

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 0.)

Total functional expenses. Add lines 1 through 24e

reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

Joint costs. Complete this line only if the organization

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

	990 (2023) CLIMATE SOLU			91-1									
	on 501(c)(3) and 501(c)(4) organizations must comp		r organizationa must oor	malata aalumn (A)									
Secu				inplete column (A).									
	Check if Schedule O contains a response or note to any line in this Part IX Do not include amounts reported on lines 6b, Total exponses (A) (B) (C) (C) (C) (A) (C) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C												
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses									
1	Grants and other assistance to domestic organizations												
	and domestic governments. See Part IV, line 21	142,000.	142,000.										
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	202,918.	163,545.	19,687.									
6	Compensation not included above to disqualified												
	persons (as defined under section $4958(f)(1)$) and												
	persons described in section 4958(c)(3)(B)												
7	Other salaries and wages	2,386,572.	1,567,042.	385,836.									
8	Pension plan accruals and contributions (include												
	section 401(k) and 403(b) employer contributions)	114,118.	78,332.	17,893.									
9	Other employee benefits	262,023.	167,796.	45,571.									
10	Payroll taxes	226,021.	144,740.	39,310.									
11	Fees for services (nonemployees):												
а	Management	0.0.1											
	Legal	891.	274.	547.									
	Accounting	18,559.	000 400	18,559.									
	Lobbying	222,439.	222,439.										
е	Professional fundraising services. See Part IV, line 17												
f	Investment management fees												
g	Other. (If line 11g amount exceeds 10% of line 25,		644 000	40 470									
	column (A), amount, list line 11g expenses on Sch 0.)	709,945.	644,027.	49,478.									
12	Advertising and promotion	150 040	62 140										
13	Office expenses	150,040.	63,146.	62,585.									
14	Information technology	143,199.	103,703.	17,504.									
15	Royalties	126 505	104 486	15 /10									

136,595.

45,484.

54,769.

24,973.

4,842,537.

1,991.

104,486.

34,694.

47,080.

3,483,368.

64.

15,410.

4,720.

2,944.

1,912.

(D) Fundraising expenses

19,686.

433,694.

17,893.

48,656.

41,971.

16,440.

24,309.

21,992.

16,699.

6,070.

4,745.

15.

24,973.

70.

X

681,956.	677,213.

CLIMATE SOLUTIONS	
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		Check if Schedule O contains a response or no	te to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			2,483,525.	1	1,794,359.
	2	Savings and temporary cash investments			747,407.	2	1,131,766.
	3	Pledges and grants receivable, net		L	1,710,884.	3	1,190,414.
	4	Accounts receivable, net				4	111,801.
	5	Loans and other receivables from any current of	r former o	officer, director,			
		trustee, key employee, creator or founder, subs	tantial co	ontributor, or 35%			
		controlled entity or family member of any of the	se persor	ns		5	
	6	Loans and other receivables from other disqual	ified pers	ons (as defined			
		under section 4958(f)(1)), and persons describe	d in secti	on 4958(c)(3)(B)		6	
ŝ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
As	9	_			16,755.	9	57,734.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	91,456.			
	b	Less: accumulated depreciation	10b	84,969.	18,960.	10c	6,487.
	11	Investments - publicly traded securities				11	
	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		444,220.	15	287,437.	
	16	Total assets. Add lines 1 through 15 (must equ			5,421,751.	16	4,579,998.
	17	Accounts payable and accrued expenses			424,291.	17	560,115.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
ş	22	Loans and other payables to any current or form	ner office	r, director,			
Liabilities		trustee, key employee, creator or founder, subs	tantial co	ontributor, or 35%			
abil		controlled entity or family member of any of the	se persor	าร		22	
Ë	23	Secured mortgages and notes payable to unrel	ated third	l parties		23	
	24	Unsecured notes and loans payable to unrelate	d third pa	arties		24	
	25	Other liabilities (including federal income tax, page	ayables to	o related third			
		parties, and other liabilities not included on line	s 17-24).	Complete Part X			
		of Schedule D			457,316.	25	276,695.
	26	Total liabilities. Add lines 17 through 25			881,607.	26	836,810.
		Organizations that follow FASB ASC 958, ch	eck here	X			
Ses		and complete lines 27, 28, 32, and 33.					
anc	27	Net assets without donor restrictions			3,025,144.	27	2,155,188.
Bal	28	Net assets with donor restrictions			1,515,000.	28	1,588,000.
pu		Organizations that do not follow FASB ASC 9	958, chec	k here			
μ		and complete lines 29 through 33.					
s or	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or e				30	
As	31	Retained earnings, endowment, accumulated in	ncome, or	r other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances			4,540,144.	32	3,743,188.
_	33	Total liabilities and net assets/fund balances			5,421,751.	33	4,579,998.

<u>, 579, 998.</u> Form **990** (2023)

Form 990 (2023) Part X Balance Sheet

Form	990 (2023) CLIMATE SOLUTIONS	91-1123	302	Pag	_{je} 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)		,045		
2	Total expenses (must equal Part IX, column (A), line 25)	2 4	,842	2,53	37.
3	Revenue less expenses. Subtract line 2 from line 1	3	-796	5,9!	56.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4 4	,54(),14	44.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
	Investment expenses	7			
	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10 3	,743	3,18	88.
	t 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: \square Cash $[X]$ Accrual $[\square]$ Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	

Form **990** (2023)

Department of the Treasury Internal Revenue Service

(Form 990)

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
2023
Open to Public Inspection

Nan	ne or t	ine organization		0110					Identification number			
De			ATE SOLUTIO						1-1123302			
	nrt I	Reason for Public (ee instructions	6.				
	organ	ization is not a private found	·	0,	,	,						
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).										
2		A school described in section										
3		A hospital or a cooperative					•					
4		A medical research organization	ation operated in cor	njunction with a hospital	described	in sectio	on 170(b)(1)(A)((iii). Enter	the hospital's name,			
		city, and state:										
5		An organization operated for		llege or university owned	l or operate	ed by a go	overnmental un	it describe	ed in			
		section 170(b)(1)(A)(iv). (C	Complete Part II.)									
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	′0(b)(1)(A)	(v).					
7	X	An organization that norma	lly receives a substar	ntial part of its support fr	rom a gove	ernmental	unit or from the	e general p	oublic described in			
		section 170(b)(1)(A)(vi). (C										
8		A community trust describe	ed in section 170(b)((1)(A)(vi). (Complete Par	t II.)							
9		An agricultural research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	unction with a la	and-grant	college			
		or university or a non-land-g	rant college of agricu	ulture (see instructions).	Enter the I	name, city	, and state of t	he college	or			
		university:										
10		An organization that norma	lly receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membership	o fees, and	d gross receipts from			
		activities related to its exem										
		income and unrelated busir	ness taxable income	(less section 511 tax) fro	om busines	ses acqui	red by the orga	anization a	fter June 30, 1975.			
		See section 509(a)(2). (Cor	mplete Part III.)									
11		An organization organized a	•									
12		An organization organized a		•	-			-				
		more publicly supported or							Check the box on			
		lines 12a through 12d that						-				
а		Type I. A supporting orga	-		• • •	-						
		the supported organization			majority o	of the direc	ctors or trustees	s of the su	ipporting			
		organization. You must o	-									
b		Type II. A supporting org	-				•		-			
		control or management o			ame perso	ns that co	ntrol or manage	e the supp	orted			
_		organization(s). You mus						. :	ما د			
C		J Type III functionally inte					-	y integrate	a with,			
		its supported organization Type III non-functionally						ad argani-	votion(o)			
c		that is not functionally int	•					•				
		requirement (see instructi			-		-		61655			
е		-										
U	· L			ization received a written determination from the IRS that it is a Type I, Type II, Ty ype III non-functionally integrated supporting organization.								
f	Ente	er the number of supported of										
ç		vide the following information	•									
	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	inization listed	(v) Amount of r	monetary	(vi) Amount of other			
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ins	structions)	support (see instructions)			
									<u> </u>			
Tota	al											

CLIMATE SOLUTIONS

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	3455162.	4463383.	5345292.	5759205.	3894932.	22917974.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	3455162.	4463383.	5345292.	5759205.	3894932.	22917974.
	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)						7096639.
6	Public support. Subtract line 5 from line 4.						15821335.
	ction B. Total Support				I	I	
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	3455162.	4463383.	5345292.	5759205.		22917974.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	5,428.	6,086.	4,366.	8,715.	57,395.	81,990.
9	Net income from unrelated business		-	-	-		-
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)				18,208.	49,429.	67,637.
11	Total support. Add lines 7 through 10						23067601.
	Gross receipts from related activities,	etc. (see instructio	ins)			12	43,825.
	First 5 years. If the Form 990 is for th						
	organization, check this box and stor	-		· · ·			
Sec	ction C. Computation of Publi						
	Public support percentage for 2023 (I			olumn (f))		14	68.59 %
15	Public support percentage from 2022		-			15	68.29 %
16a	33 1/3% support test - 2023. If the o					ore, check this bo	x and
	stop here. The organization qualifies						
b	33 1/3% support test - 2022. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	-					
	meets the facts-and-circumstances te			•			
b	10% -facts-and-circumstances test	•	•	,	•		
~	more, and if the organization meets th	-					
	organization meets the facts-and-circu						
18	Private foundation. If the organizatio						
				.,,,	,		/Eorm 990) 2023

Schedule A (Form 990) 2023

Schedule A	(Form 990)	2023

CLIMATE SOLUTIONS

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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 20	023 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disgualified persons						
t	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						
	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 20)23 (f) Total
	Amounts from line 6	(a) 2013	(b) 2020	(0) 2021	(u) 2022	(e) 20	
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
t	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						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	First 5 years. If the Form 990 is for th	e organization's fi	rst second third :	fourth or fifth tay	vear as a section 5	1 01(c)(3) org	ı vanization
	check this box and stop here	-			-		
Se	ction C. Computation of Publi						
	Public support percentage for 2023 (I		¥	column (f))		15	%
	Public support percentage from 2022	, (),	,			16	%
	ction D. Computation of Inves						
	Investment income percentage for 20		•	ne 13. column (f))		17	%
	Investment income percentage from					18	%
	33 1/3% support tests - 2023. If the			on line 14 and line		<u> </u>	
136	more than 33 1/3%, check this box ar						
k	33 1/3% support tests - 2022. If the						∟ 1/3%, and
	line 18 is not more than 33 1/3%, che	ck this box and st	op here. The orga	nization qualifies	as a publicly suppo	orted organi	ization
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check tl	his box and see ins	tructions .	

Yes

No

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

	(Form 990) 2023	-	SOLUTIONS
Part IV	Supporting Organi	izations (contin	nued)

2

			1 1	
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> Part VI <i>how the supported organization(s)</i> effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported	
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1
2	Did the organization operate for the benefit of any supported organization other than the supported	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

superviseu	or controlled the suc	porting organization.
Section C. Ty	pe II Supporting	organizations

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

Section D.	. All Type III	Supporting	Organizations

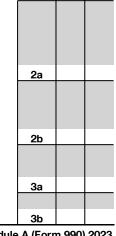
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently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

Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1
- The organization satisfied the Activities Test. Complete line 2 below. а
- The organization is the parent of each of its supported organizations. Complete line 3 below. b

с		The organization supported a g	governmental entity.	Describe in Part VI how	vou supported a governmenta	l entitv (see instructions).
---	--	--------------------------------	----------------------	-------------------------	-----------------------------	------------------------------

- Activities Test. Answer lines 2a and 2b below. 2
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.



Yes No

1	Check here if the organization satisfied the Integral Part Test as a qualify	ring trust on N	ov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	ist complete S	Sections A through E.	Γ
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function		Type III supporting orga	nization (see

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) 2023

 Schedule A (Form 990) 2023
 CLIMATE
 SOLUTIONS

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

and 4c. 8 Breakdown of line 7: a Excess from 2019 b Excess from 2020 c Excess from 2021 d Excess from 2022 e Excess from 2023

7 Excess distributions carryover to 2024. Add lines 3j

Sche Par	dule A (Form 990) 2023 CLIMATE SOLUT: t V Type III Non-Functionally Integrated 509(LONS (a)(3) Supporting Orga	nizatione / ···	92	1-1123302 _F
	ion D - Distributions	allo Supporting Orga	inizations (continu	ued)	Current Year
	Amounts paid to supported organizations to accomplish exer	mot purposes		1	Guitent Tear
	Amounts paid to supported organizations to accomption excit			<u> </u>	
2	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	s of supported organization		3	
	Amounts paid to acquire exempt-use assets	o or supported organizations	5	4	
	Qualified set-aside amounts (prior IRS approval required - pro	vide details in Part VI)		5	
	Other distributions (<i>describe in</i> Part VI). See instructions.			6	
	Total annual distributions. Add lines 1 through 6.			7	
	Distributions to attentive supported organizations to which th	e organization is responsive			
-	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C. line 6			9	
	Line 8 amount divided by line 9 amount			10	
	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023		(iii) Distributable Amount for 202
1	Distributable amount for 2023 from Section C, line 6				
	Underdistributions, if any, for years prior to 2023 (reason-				
-	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
	From 2018				
	From 2019				
	From 2020				
	From 2021				
	From 2022				
	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				

Schedule A (Form 990) 2023

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

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

MISCELLANEOUS

REBATES AND REIMBURSEMENTS

ACTION FUND REVENUE

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2023

Employer identification number

91-1123302

Schedule	В
(Form 990)	

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

CLIMATE	SOLUTIONS

Filers of:	Section:
Form 990 or 990-EZ	\fbox 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X 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 for an *exclusively* set of the parts unless to the set of the parts unless the set of the parts unless to the set of the parts unless the set of the parts u

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

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

Schedule	B (Form 9	90) (2023)
	- (ee) (2020)

Name of organization

Employer identification number

Schedule B (Form 990) (2023)

91-1123302

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.					
(a)	(b)	(c)	(d)			
<u>No.</u>	Name, address, and ZIP + 4	Total contributions \$940,807.	Type of contribution Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
2		\$350,000.	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		\$263,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			
(a)	(b)	(c)	(d)			
<u>No.</u>	Name, address, and ZIP + 4	Total contributions \$250,000.	Type of contribution Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
5		\$250,000.	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			
6		\$195,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			

CLIMATE SOLUTIONS

LIMA	TE SOLUTIONS	91	-1123302
Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$\$	Person X Payroll I Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$102,700.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$101,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$101,000.	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
11		\$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
12		\$85,050.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

01 1100000

from Part I	Description of noncash property given	(See instructions.)	Date received
		\$	
(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
		\$	
(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
23453 12-26-23] ·	Schedule B (Form 990) (2023)

CLIMATE SOLUTIONS

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

(b)

Description of noncash property given

Name of organization

(a)

No.

from

Employer identification number

(d)

Date received

91-1123302

(c)

FMV (or estimate)

Name of or	rganization			Employer identification number		
CLIMAT	TE SOLUTIONS			91-1123302		
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, co Use duplicate copies of Part III if additional s	through (e) and the following line entr haritable, etc., contributions of \$1,000 or le	v. For organizations			
(a) No. from Part I	om (b) Purpose of gift (c) Use of gift			cription of how gift is held		
-		(e) Transfer of gift	I			
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of tra	nsferor to transferee		
(a) No.						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Dese	cription of how gift is held		
-		(e) Transfer of gift	:			
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held		
-		(a) Transfer of sitt				
	Transferee's name, address, ar	(e) Transfer of gift		insferor to transferee		
-						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Dese	cription of how gift is held		
-		(e) Transfer of gift				
	Transferee's name, address, ar			insferor to transferee		
F	,,, _,, _,,,,					

S	С	Η	E	D	U	L	Ε	С

Department of the Treasury

Internal Revenue Service

(Form 990)

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

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

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

• Section 527 organizations: Complete Part I-A only.

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

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

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

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

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Nar	ne of organization				Employ	yer identificatio	
		SOLUTIONS				91-11233	302
Pa	art I-A Complete if the org	anization is exempt unde	r section 501(c) o	r is a section 52	?7 orga	anization.	
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures					
Pa	art I-B Complete if the org	anization is exempt unde	r section 501(c)(3).			
1	Enter the amount of any excise tax	incurred by the organization unde	r section 4955		\$		
	Enter the amount of any excise tax						
3	If the organization incurred a section	n 4955 tax, did it file Form 4720 fo	or this year?			Yes	No
4a	a Was a correction made?					Yes	🗌 No
	o If "Yes," describe in Part IV.						
Pa	art I-C Complete if the org	anization is exempt unde	r section 501(c), e	except section 5	501(c)((3).	
1	Enter the amount directly expended	l by the filing organization for sect	ion 527 exempt function	on activities	\$_		
2	Enter the amount of the filing organ	ization's funds contributed to othe	er organizations for sec	ction 527			
	exempt function activities				\$_		
3	Total exempt function expenditures	. Add lines 1 and 2. Enter here an	d on Form 1120-POL,				
	line 17b				\$_		
4	Did the filing organization file Form	1120-POL for this year?				Yes	No No
5	Enter the names, addresses, and er	nployer identification number (EIN	l) of all section 527 pol	itical organizations to	which	the filing organiz	zation
	made payments. For each organization	•					
	contributions received that were pro				eparate	segregated fund	l or a
	political action committee (PAC). If	additional space is needed, provid	le information in Part IV	V.			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid f filing organizatio funds. If none, ente	n's	(e) Amount of contributions re promptly and delivered to a political orga If none, ent	ceived and directly separate nization.

OMB No. 1545-0047

2023 Open to Public Inspection

	CLIMATE SOL				123302 Page 2
Part II-A Complete if the org section 501(h)).	anization is exen	npt under section	501(c)(3) and file	d Form 5768 (ele	ction under
	ation belongs to an affil	iated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,
	re of excess lobbying e	• • •			
B Check if the filing organiza	ation checked box A ar	d "limited control" pro	visions apply.		
	ts on Lobbying Exper ditures" means amou			(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influ	uence public opinion (<u>c</u>	arassroots lobbying)		27,965.	
b Total lobbying expenditures to infl	uence a legislative bod	y (direct lobbying)		194,474.	
c Total lobbying expenditures (add li				222,439.	
d Other exempt purpose expenditure				4,620,098.	
e Total exempt purpose expenditure	es (add lines 1c and 1d))		4,842,537.	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.				392,127.	
If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is:					
not over \$500,000, 20% of the amount on line 1e.					
over \$500,000 but not over \$1,000,000, \$100,000 plus 15% of the excess over \$500,000.					
over \$1,000,000 but not over \$1,5	00,000, \$175,00	0 plus 10% of the exce	ess over \$1,000,000.		
over \$1,500,000 but not over \$17,	000,000, \$225,00	0 plus 5% of the exces	s over \$1,500,000.		
over \$17,000,000,	\$1,000,0	000.			
g Grassroots nontaxable amount (er	ter 25% of line 1f)			98,032.	
h Subtract line 1g from line 1a. If zer	o or less, enter -0-			0.	
i Subtract line 1f from line 1c. If zero	,			0.	
j If there is an amount other than ze	ro on either line 1h or l	ine 1i, did the organiza	tion file Form 4720	_	
reporting section 4911 tax for this					Yes No
(Some organizations t	hat made a section 50	eraging Period Under D1(h) election do not l ate instructions for lin	nave to complete all o	f the five columns be	low.
	Lobbying Exper	nditures During 4-Yea	r Averaging Period		r
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount	343,379.	348,817.	385,075.	392,127.	1,469,398.
 b Lobbying ceiling amount (150% of line 2a, column(e)) 					2,204,097.
c Total lobbying expenditures	280,881.	396,468.	259,918.	222,439.	1,159,706.

87,204.

142,675.

96,269.

42,474.

98,032.

27,965.

367,350.

551,025.

330,667.

Schedule C (Form 990) 2023

85,845.

117,553.

332042 11-06-23

d Grassroots nontaxable amount e Grassroots ceiling amount

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990) 2023

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

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	ı)	(b)
	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)? Media advertisements?				
d	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	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?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5	ō), or sec	tion	
	501(c)(6).				
				Yes	Νο
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered ' answered "Yes."				3, is
1	Dues, assessments and similar amounts from members				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic				
	expenses for which the section 527(f) tax was paid).				
а	Current year		2a		
b	Carryover from last year		2b		
	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical			
	expenditures next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions				
Par	t IV Supplemental Information				
Provi	de 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 a	nd 2 (see	

instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included on line 2a d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 3 Number of states where property subject to conservation easement is located 4 Number of states where property subject to conservation easement is located					-			
Part IV, line 6, 7, 6, 9, 10, 11a, 11b, 11c, 11d, 11b, 11a, or 12b. <u>Automate of the transity</u> <u>Book of the organization</u> Cold to www.irs.gov/Form990 for instructions and the latest information. Departor Dublic <u>Imployer identification numbers</u> Name of the organization CLIMATE SOLUTIONS Employer identification numbers <u>Solution</u> Solutions Solutio	SC	HEDULE D					OMB No. 1545	<u>-0047</u>
Description Attach to For 990. Open to Public Impaction Contoxet, ago/Form990 or instructions and the latest information. Impaction number 31-1123302 Part I Organizations Mainfaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Yes' on Form 900, Part IV, line 8. (a) Donor advised funds (b) Funds and other accounts. 1 Total number at end of year (a) Donor advised funds (b) Funds and other accounts. 2 Aggregate value of contributions to (during year) (a) Donor advised funds (b) Funds and other accounts. 3 Aggregate value of agrants from (during year) (a) Donor advised funds (b) Funds and other accounts. 4 Aggregate value of agrants from (during year) (a) Donor advised funds (b) Funds and other accounts. 5 Dot the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization accounts. (b) Funds and the agrant and agrantes, donors, and donor advisors in writing that the assets inform 900, Part IV, line 7. 9 Purpose(b) organization accounts. (c) Particle (c) Conservation assements held by the organization accounts. (c) Particle (c) P	(For	n 990)					202	3
Name of the organization Employer identification numbe 91-1123302 Part1 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered 'Ves' on Form 990, Part IV, line 6. 1 Otat number at end of year (a) Donor advised funds (b) Funds and other accounts 2 Aggregate value of grants from (during year) (a) Donor advised funds (b) Funds and other accounts 3 Aggregate value of grants from (during year) (a) Aggregate value of grants from (during year) (b) Funds and other accounts 4 Aggregate value of grants from (during year) (b) Funds and other accounts (b) Funds and other accounts 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantese, 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 impormissible purvate benefit? Yes Nu Percention of nation inform public use (for example, recreation or education) Preservation of a historically important land area protection of a nistorically important land area protection of a nistorically important land area dig of the tax year. Held at the End of the Tax Yea 2a 2 Complete files 2a through 2d if the organization inform or education in the form of a con	Depart	ment of the Treasury	A	ttach to Form 990.				
CLIMATE SOLUTIONS 91-1123302 Part1 Organizations Maintaining Donr Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year (a) Donor advised funds (b) Funds and other accounts 2 Aggregate value of contributions to (during year) (a) (a) Donor advised funds (b) Funds and other accounts 3 Aggregate value at end of year (b) Funds and other accounts (c) Donor advised funds (c) Funds and other accounts 4 Aggregate value at end of year (c) Donor advised funds (c) Funds and other accounts 5 Did the organization's property, subject to the organization's exclusive legal control? Yes Nu 6 Did the organization's property, subject to the organization answered "Yes" on Form 990, Part IV, line 7. Yes Nu 9 Purpose(s) or conservation easements held by the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) or conservation easements held a qualified conservation contribution in the form of a contributing hat area Protection of alund the public term (precisiter and public term (precisiter and public term (precisiter and public term)) Preservation of a contributing held a the fat the fat at the fat a the fat the fat the fat the fat the fat a the fat the fat				0 for instructions an	d the latest information.	T _		
organization answered "Yes" on Form 990, Part IV, line 6. I Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of contributions to (during year) 4 Aggregate value of ants from (during year) 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only Yes Nu 6 Did the organization inform all grantees, donors, and donor advisor, in writing that grant funds can be used only Yes Nu 9 Part III Conservation Easements. Complete if the organization inform 990, Part IV, line 7. Yes Nu 9 Prosecy(s) of conservation easements held by the organization (check all that apply). Prosecy(s) of conservation easements held by the organization in prosecy Prosecy on Form 990, Part IV, line 7. Yes Nu 1 Prosecy(s) of conservation easements held by the organization (check all that apply). Prosecyation of a conservation easements included on line 2a Ze Ze <th>Nam</th> <th>e of the organizati</th> <th></th> <th></th> <th></th> <th>Emp</th> <th></th> <th></th>	Nam	e of the organizati				Emp		
I Total number at end of year (a) Donor advised funds (b) Funds and other accounts I Total number at end of year (a) Donor advised funds (b) Funds and other accounts I Aggregate value of ornibutions to (during year) (a) Aggregate value of grants from (during year) (a) Donor advised funds I Dot the organization inform all donors and donor advisors in writing that the assets held in donor advisor property, subject to the organization's exclusive legal control? (vest (b) Funds and other accounts ID of the organization inform all grantes, dhores, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes Nu Part II Conservation Easements. Complete if the organization (check all that apply). Preservation of and for public use (for example, recreation or education) Preservation of and for public use (for example, recreation contribution in the form of a conservation easements. 20 Complete lines 24 through 24 if the organization held a qualified conservation contribution in the form of a conservation easements. 20 I Number of conservation easements. 20 20 20 I Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization inform and writem property subject to conservation easements during the year <td>Pa</td> <td></td> <td>-</td> <td></td> <td>r Similar Funds or A</td> <td>ccoun</td> <td>Its. Complete if the</td> <td></td>	Pa		-		r Similar Funds or A	ccoun	Its. Complete if the	
1 Total number at end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of contributions to (during year) 4 Aggregate value of contributions to (during year) 3 Did the organization inform all donors advisors in writing that the assets held in donor advised funds are the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for chartistic purposes and not for the benefit of the donor of donor advisor, or for any other purpose conferring impermiseble private benefit? Part III Conservation Easements. Complete if the organization nawwered Yeas' on Form 990, Part IV, line 7. Part III Conservation Easements. Complete if the organization check all that apply. Preservation of land for public use (for example, recreation or education) Preservation of a conservation easements Did the tax year. Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements. Did tata regare restricted by conservation easements Did tata graph and the based on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register. Aumber of conservation easements modified, transferred, released, extinguished, or terminated by the organization in the loar of states where property subject to conservation easements is located. Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements in locis? Aumount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements advisor's on Form 900, Part V, (HG)(0) and section 770(h)(4)(B)(0) and		organizatio	n answered "Yes" on Form 990, Part IV, lin					
2 Aggregate value of contributions to (during yea)				(a) Donor ad	vised funds	(b) Fun	ds and other accounts	5
3 Aggregate value of grants from (during year)	1	Total number at er	nd of year					
4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advisor in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor of donor advisor, or for any other purpose conferring impermisable private benefit? Yes No 6 Did the organization inform all grantees, donors, and donor advisor, in writing that grant funds can be used only for charitable purposes and not for the benefit? Yes No PartDecis(o) of conservation easements held by the organization (answered 'Yes' on Form 990, Part IV, line 7. Perservation of and for public use (for example, recreation or education) Preservation of a historically important land area Preservation of a haitor for bublic use (for example, recreation or education) Preservation of a conservation easements the day the organization held a qualified conservation contribution in the form of a conservation easements on the last day of the tax year. 2a 2 Complete lines 2.a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements 2a 1 Total anceage restricted by conservation easements 2a 2 Complete lines 2.a through 2d if the organization in the 2a outpited after July 25, 2006, and not on a historic structure listed in the National Register 2a 3 Number of conservation easements modified, thansferred, released, extinguished, or terminated by the organization during the tax year								
5 Did the organization inform all denors and donor advisors in writing that the assets held in donor advised funds are the organization inform all grantese, donors advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisors or you writing that grant funds can be used only for charitable purposes and not for the benefit of the organization inform all grantese, donors advisors or writing that grant funds can be used only for charitable purposes and not for the benefit of the organization check all that apply). Part II Conservation Easements. Complete if 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 open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easements b Total acreage restricted by conservation easements b Total acreage restricted by conservation easements c Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register 2 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 3 Number of conservation easements included on line 2c acquired after July 25, 2006, and not or alkitoris of tructure listed in the National Register 4 Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure induced on projecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of v								
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b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of		of art, historical tre	easures, or other similar assets held for put	olic exhibition, educat	ion, or research in furthera	nce of p	public	
		service, provide in	Part XIII the text of the footnote to its finar	ncial statements that	describes these items.			
art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,	b	-						
			· · · · ·	exhibition, education	n, or research in furtherance	e of pub	olic 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 \$	S	.,					Φ	
2 It the organization received or held worke of art, historical traceuroe, or other similar assorts for financial cain, provide	2				C .	Provide	5	
2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide	-		unts required to be reported under FASB A		C .	12. 21100		

b Assets included in Form 990, Part X
 LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.
 332051 09-28-23

a Revenue included on Form 990, Part VIII, line 1

Schedule D (Form 990) 2023

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Sche		SOLUTIONS					91-11		Pa	ige 2
Par	t III Organizations Maintaining Co	ollections of Ar	t, Historical	Treasures, or	r Other	Similar	Assets	(continu	ıed)	
3	Using the organization's acquisition, accessio	n, and other records	s, check any of	the following that	: make sig	gnificant u	ise of its			
	collection items (check all that apply).									
а	Public exhibition	d	Loan o	r exchange progra	am					
b	Scholarly research	е	Other_							
с	Preservation for future generations									
4	Provide a description of the organization's col	lections and explair	how they furth	ner the organizatio	n's exem	npt purpos	se in Part	XIII.		
5	During the year, did the organization solicit or	receive donations of	of art, historical	treasures, or othe	er similar :	assets		_		
	to be sold to raise funds rather than to be mai							Yes		No
Par	t IV Escrow and Custodial Arrang		te if the organiz	ation answered "	Yes" on F	orm 990,	Part IV, li	ne 9, or		
	reported an amount on Form 990, Part	X, line 21.								
1a	Is the organization an agent, trustee, custodia	n, or other intermed	liary for contrib	utions or other as	sets not i	included		-		
	on Form 990, Part X?						L	Yes		No
b	If "Yes," explain the arrangement in Part XIII a	nd complete the fol	lowing table:							
								Amount		
	Beginning balance									
	Additions during the year									
е	Distributions during the year					1e				
f	Ending balance					1f		7		. <u></u>
	Did the organization include an amount on Fo					ty?		Yes		No
	If "Yes," explain the arrangement in Part XIII.						<u></u>			
Par	t V Endowment Funds Complete if t						aara baak	(a) [aur	iooro k	
		(a) Current year	(b) Prior yea	ar (c) Two year	IS DACK	(a) Three y	ears back	(e) Four	years t	Jack
1a	Beginning of year balance									
b	Contributions									
с	Net investment earnings, gains, and losses									
	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
т	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curre	,	(U ,	nn (a)) neid as:						
a L	Board designated or quasi-endowment		_%							
D	Permanent endowment	%								
С	,	-								
20	The percentages on lines 2a, 2b, and 2c shou		tion that are be	d and administar	od for th	2				
Ja	Are there endowment funds not in the posses organization by:	SIGH OF THE OFGATILZA	liton that are ne			5			Yes	No
	(i) Unrelated organizations?							3a(i)		
								3a(ii)		
h	If "Yes" on line 3a(ii), are the related organizat							3b		
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipme									
	Complete if the organization answered	"Yes" on Form 990	, Part IV, line 1	1a. See Form 990	, Part X, I	line 10.				
	Description of property	(a) Cost or o	ther (b)	Cost or other	(c) Ac	ccumulate	d	(d) Book	value	,
	· · ·	basis (investn		asis (other)	• •	preciation				
1a	Land									
	Buildings									
	Leasehold improvements									
	Equipment			91,456.		84,96	59.	6	,48	37.
	Other									
Tota	. Add lines 1a through 1e. (Column (d) must eq	ual Form 990. Part	X, line 10c, col	umn (B))					,48	
							Cabadula	D /F	000	~~~~

Schedule D (Form 990) 2023

	(Form 990) 2023		SOLUTIONS
Part VII	Investments	- Other Securitie	es

(a) Description of security or category (including name of security)

(c) Method of valuation: Cost or end-of-year market value

(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)	<u> </u>		
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B)	<i>i</i>)		
Part VIII Investments - Program Related			
Complete if the organization answered "			
(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)	<u> </u>		
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B)			
Part IX Other Assets			
Complete if the organization answered "	Yes" on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
	(a) Description		(b) Book value
(1) RIGHT OF USE ASSET			287,437.
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 1	5, col. (B))		287,437.
Part X Other Liabilities			
Complete if the organization answered ""	Yes" on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25	i.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) RIGHT OF USE LIABILITY			276,695.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total (Column (b) must equal Form 990, Part X line 2			276,695.

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

(b) Book value

Iotal. (Column (b) must equal Form 990, Part X, line 25, col. (B))

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

Schedule D (Form 990) 2023

Sche	dule D (Form 990) 2023 CLIMATE SOLUTIONS		91-1	123302 Page 4
	t XI Reconciliation of Revenue per Audited Financial Staten	nents With Reven	ue per Return	<u> </u>
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1			
1	Total revenue, gains, and other support per audited financial statements			4,045,581.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
а	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
с	Recoveries of prior year grants			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1			4,045,581.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines 4a and 4b		4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			4,045,581.
Pa	t XII Reconciliation of Expenses per Audited Financial State	ments With Expe	nses per Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 1	2a.	· · · · ·	
1	Total expenses and losses per audited financial statements		1	4,842,537.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
а	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
с	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1			4,842,537.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
с	Add lines 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	4,842,537.
Pa	t XIII Supplemental Information			

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

(Form 990) Complete if the organization entered more form 990. Part IV, line 17, 18, or 19, or if the organization entered more form 990-EZ, line 6a. 2023 Description for the freaxy memory developed for instructions and the latest information. Employer identification number 91-112330.2 Open identification number 91-112330.2 Description for the freaxy memory developed for instructions and the latest information. Employer identification number 91-112330.2 Imployer identification number 91-112330.2 Part Fundralising Activities. Complete if the organization naised through any of the following activities. Check all that apply. Employer identification number 91-112330.2 2 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Employer identification of non-government grants 0 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Employer identification of non-government grants 2 Dot do organization was awriten or onal agreement with any individual (ncluding officers, directors, trustees, or key employees listed in Employer 100 the organization. More officers, directors, trustees, or key employees listed in Employer 100 the organization. (i) Name and address of individual or entities (fundralisers) pursuant to agreements under which the fundraliser is to be compresented at least 85,000 by the organization. (m) Activity (m) Activity (m) Activity (m) Activity (m) Acti	SCHEDULE G	Suppleme	ntal Information Regarding	g Func	Iraisi	ng or Gaming A	ctiv	ities	OMB No. 1545-00)47		
Interview Go to www.irs.gov/Form990 for instructions and the latest information. Image client Name of the organization Employer identification number 91-1123302 91-1123302 Part of the organization CLIMATE SOLUTIONS 91-1123302 Part of the organization raised funds through any of the following activities. Check all that apply. Image client is part. Image client is part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Image client is part. 2 Indicate whether the organization raised funds through any of the following activities. Check all that apply. Image client is part. 3 Indicate whether the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundratising services? Yes No 4 In Appendic not comparization. Iff in Date organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundratising services? Yes No 5 Iff 'Appe client by 'App	(Form 990)						r 19,	or if the	2023	}		
Name of the organization Employer identification number 91-1123302 Part Fundraising Activities. Complete this part. Employer identification number 91-1123302 1 Indicate whether the organization asked unds through any of the following activities. Check all that apply. Bolicitation of government grants C Phone solicitations G Solicitation of government grants C Phone solicitations G Special fundraising events G Incluse whether the organization ask written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990. Part VII) or entity in connection with processional fundraising services? Ves If 'Yes,'' list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (ii) Activity (iii) Activity (iv) Gross receipts for matcivity (v) Amount paid (or retained by organization) (i) Name and address of individuals or entities (fundraiser) (iv) Activity (vi) Gross receipts for matcivity (vi) Amount paid (or retained by organization) (ii) Name and address of individual or entity (fundraiser) (iii) Activity (vi) Gross receipts for matcivity (vi) Amount paid (or retained by organization) Ves No										ic		
CLIMATE SOLUTIONS 91-1123302 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations e b Internet and email solicitations f 2 Did none solicitations f 3 Did none solicitations g Special fundraising events d Indicate whether the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (ii) Activity (iii) Activity (iii) Activity (iii) Activity (iv) Arount paid fundraiser is to be completed by organization (i) Name and address of individual or entities (Indraisers) pursuant to agreements under which the fundraiser is to be completed by organization (iv) Arount paid fundraiser is to be completed by organization (iv) Arount paid fundraiser is to be completed by organization (ii) Name and address of individual or entitis (Indraiser			o www.irs.gov/Form990 for instru	uctions	and th	ne latest information	า.	Employer	-	mbor		
Purt Fundraising Activities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 17. Form 990/EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations e b Internet and email solicitations f c Phone solicitations g d Indicate we awriten or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If the organization as a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed at least \$5,000 by the organization. Yes No (i) Name and address of individual or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Yes No Yes No (ii) Activity Yes No Yes No Yes No Yes No Yes No Image: disc in col. (i) Yes No Image: disc in col. (i) </td <td>Name of the organization</td> <td></td> <td>SOLUTIONS</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>nber</td>	Name of the organization		SOLUTIONS							nber		
required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations e Solicitation of non-government grants b Internet and email solicitations f Solicitation of government grants c Done solicitations g Special fundraising events d In-person solicitation or al agreement with any individual (including officers, tirstees, or key employees listed in from 900, Part Vill or entity in concetion with professional fundraising services? No (i) Name and address of individual or entity is concerving in the concer	Part I Fundrais			vered "Y	es" or	Form 990 Part IV li	ine 1					
A Mail solicitations e Solicitation of non-government grants b Internet and email solicitations f Solicitation of government grants g Special fundraising events g Special fundraiser in the fundraiser is to be compensated at least \$5,000 by the organization. (ii) Name and address of individual or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (ii) Armount paid (iii) Activity (iii) Activity (iii) Activity (iv) Gross receipts (v) Armount paid (00 01	i i oni oco, i arriv, i						
compensated at least \$5,000 by the organization. (i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Activity (iv) Gross receipts from activity (v) Amount paid to (or retained by) organization Yes No Image: State of the	 a Mail solicitat b Internet and c Phone solicitat d In-person so 2 a Did the organization key employees list 	 a Mail solicitations b Internet and email solicitations c Phone solicitations d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? 										
(i) Name and address of individual or entity (fundraiser) (ii) Activity Image and address of individual from activity (iv) Arranded by organization vertication by organization Yes No Vertication by organization Vertication by organization Yes No Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization Vertication by organization		•	· /·		agreei	nents under which ti	ie iui		0.06			
Image:	(i) Name and address of individual		(ii) Activity		aiser ustody trol of	(iv) Gross receipts to from activity		or retained b fundraiser	y) to (or retained	d by)		
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration				Yes	No							
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration												
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration												
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration												
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration												
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration												
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration												
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration												
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration												
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration												
	Total											
		ich the organizatio	n is registered or licensed to solicit	contrib	utions	or has been notified	it is (exempt fron	registration			

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

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			SMALL	NONE	(add col. (a) through
		2023 GALA	CULTIVATIONS		
		(event type)	(event type)	(total number)	col. (c))
1	Gross receipts	220,411.	46,483.		266,894
	Less: Contributions	144,638.	46,483.		191,121
3	Gross income (line 1 minus line 2)	75,773.			75,773
4	Cash prizes				
	Noncash prizes				
6	Rent/facility costs	3,680.			3,680
6	Food and beverages	66,469.		66,469	
	Entertainment				
9					5,624
10			•		75,773
11	Net income summary. Subtract line 10 from I III Gaming. Complete if the organization	ine 3, column (d)			[(
	Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.	-			
1			(b) Pull tabs/instant		(d) Total gaming (ad
		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	
1	Gross revenue	(a) Bingo		(c) Other gaming	
1	Gross revenue	(a) Bingo		(c) Other gaming	
2		(a) Bingo		(c) Other gaming	
2	Cash prizes			(c) Other gaming	
1 2 3 4	Cash prizes			(c) Other gaming	(d) Total gaming (ad col. (a) through col. (a
1 2 3 4 5	Cash prizes Noncash prizes Rent/facility costs Other direct expenses	%	bingo/progressive bingo	%	
1 2 3 4 5	Cash prizes Noncash prizes Rent/facility costs		bingo/progressive bingo		
2 3 4 5 6	Cash prizes Noncash prizes Rent/facility costs Other direct expenses	Yes%	bingo/progressive bingo	Yes %	
2 3 4 5 7	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor	Yes%	bingo/progressive bingo	Yes%	
1 2 3 4 5 6 7 8	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7	Yes% No 15 in column (d)	bingo/progressive bingo	Yes%	
1 2 3 4 5 6 7 8 Er	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7	Yes% No for 5 in column (d) from line 1, column (d) ucts gaming activities:	bingo/progressive bingo	Yes%	col. (a) through col. (
1 2 3 4 5 6 7 8 Er	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7	Yes% No S in column (d) from line 1, column (d) ucts gaming activities:	bingo/progressive bingo	Yes%	col. (a) through col. (
2 3 4 5 6 7 8 Er	Cash prizes Noncash prizes Rent/facility costs Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 neter the state(s) in which the organization conduct the organization licensed to conduct gaming and	Yes% No S in column (d) from line 1, column (d) ucts gaming activities:	bingo/progressive bingo	Yes%	col. (a) through col. (

332082 09-13-23

Schedule G (Form 990) 2023

Scl	nedule G (Form 990) 2023	CLIMATE SOLU	TIONS	91-1	123302	Page 3
11	Does the organization conduct ga	aming activities with nonm	embers?		Yes	No
			st, or a member of a partnership or of			
	to administer charitable gaming?				Yes	No
13	Indicate the percentage of gaming					
i	a The organization's facility				13a	%
					13b	%
14	Enter the name and address of th	e person who prepares th	e organization's gaming/special ever	nts books and records:		
	Name					
	Address					
15	a Does the organization have a con	tract with a third party fro.	m whom the organization receives g	aming revenue?	. Yes	🗌 No
	b If "Yes," enter the amount of gam	ing revenue received by t	he organization \$	and the amount		
	of gaming revenue retained by the					
	c If "Yes," enter name and address					
	Name					
	Address					
16	Gaming manager information:					
	Name					
		•				
	Gaming manager compensation	\$	-			
	Description of convises provided					
	Description of services provided					
	Director/officer	Employee	Independent contractor			
17	Mandatory distributions:					
	•	r state law to make charit:	able distributions from the gaming pr	oceeds to		
					Yes	No
			to be distributed to other exempt org			
	organization's own exempt activit	ies during the tax year	\$			
Pa	art IV Supplemental Infor	mation. Provide the ex	planations required by Part I, line 2b	, columns (iii) and (v); and Par	t III, lines 9, 9	9b, 10b,
	15b, 15c, 16, and 17b, as	applicable. Also provide	any additional information. See instru	uctions.		

Part IV	Supplemental Informa	(continued)		

SCHEDULE I (Form 990)	(Form 990) Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.											
Department of the Treasury Internal Revenue Service		_	Attach to Form	n 990.			Open to Public Inspection					
Name of the organization		Go to www.irs	s.gov/Form990 for	the latest informa	ation.		Employer identification number					
CLIMATE S	OLUTIONS						91-1123302					
Part I General Information on Grants a												
 Does the organization maintain records t criteria used to award the grants or assis Describe in Part IV the organization's pro- 	tance?											
Part II Grants and Other Assistance to I recipient that received more than \$	Domestic Organiz	ations and Domestic	Governments. C	complete if the org	anization answered "Y	es" on Form 990, Part	IV, line 21, for any					
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance					
NW ENERGY COALITION 811 1ST AVE #305 SEATTLE, WA 98104	91-1144122	501(C)(3)	12,000.	0.			TO ADVOCATE FOR STRONG POLICIES ON BUILDINGS IN THE 2023 SESSION					
THE NATURE CONSERVANCY 4245 NORTH FAIRFAX DRIVE ARLINGTON, VA 22203	53-0242652	501(C)(3)	15,000.	0.			FOR WA COMMUNICATIONS					
WASHINGTON MARITIME BLUE 1900 W NICKERSON STREET, SUITE 301 SEATTLE, WA 98119	83-1638344	501(C)(6)	100,000.	0.			FOR WORK ON THE MARITIME POLICY PROGRAM					
WASHINGTON CONSERVATION ACTION EDUCATION FUND - 1402 THIRD AVENUE, SUITE 1400 - SEATTLE, WA 98101	91-0839385	501(C)(3)	15,000.	0.			FOR WA COMMUNICATIONS					
 2 Enter total number of section 501(c)(3) and 3 Enter total number of other organizations 			e line 1 table				<u> </u>					

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2023

CLIMATE SOLUTIONS

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

PART I, LINE 2:

Schedule I (Form 990) 2023

THE ORGANIZATION RESTRICTS GRANT FUNDS TO THEIR INTENDED PROGRAM IN THE

BOOKS AND THEN CHARGES PROGRAM EXPENSES TO THAT PROGRAM.

Page 2

SC	HEDULE J	OMB No. 1545-0047				
(Fo	rm 990)		ation Information s, Trustees, Key Employees, and Highest	20	22)
		Compe	nsated Employees	20	Z J	
Denar	tment of the Treasury		swered "Yes" on Form 990, Part IV, line 23. ch to Form 990.	Open to Public		
	al Revenue Service		r instructions and the latest information.		ection	
Nam	e of the organizatior			Employer identificat		nber
		CLIMATE SOLUTIONS		91-112330	2	
Pa	rt I Question	Regarding Compensation				
					Yes	No
1a			the following to or for a person listed on Form	990,		
		ine 1a. Complete Part III to provide any releva				
	First-class or charter travel Housing allowance or residence for personal us Travel for companions Payments for business use of personal residence					
			Payments for business use of personal re-			
		ation and gross-up payments	Health or social club dues or initiation fee			
		pending account	Personal services (such as maid, chauffe			
h	If any of the boyce	on line 1a are checked, did the organization fo	llow a written policy regarding payment or			
b	•	·	e? If "No," complete Part III to explain	1b		
2		require substantiation prior to reimbursing or				
2			rding the items checked on line 1a?	2		
	trustees, and onloc					
3	Indicate which, if ar	v. of the following the organization used to es	tablish the compensation of the organization's	;		
			oxes for methods used by a related organization			
		tion of the CEO/Executive Director, but explai				
	Compensation	· · ·	Written employment contract			
		ompensation consultant	X Compensation survey or study			
		r	X Approval by the board or compensation c	ommittee		
4	During the year, did	any person listed on Form 990, Part VII, Sect	ion A, line 1a, with respect to the filing			
	organization or a re	ated organization:				
а	Receive a severanc	e payment or change-of-control payment?		4a		X
b	Participate in or rec	eive payment from a supplemental nonqualifie	d retirement plan?	4b		X
с	Participate in or rec	eive payment from an equity-based compensa	ation arrangement?			X
	If "Yes" to any of lin	es 4a-c, list the persons and provide the appli	cable amounts for each item in Part III.			
_		(3), 501(c)(4), and 501(c)(29) organizations (5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	•			
5			e organization pay or accrue any compensatio	n		
-	contingent on the re			F -		х
					+	X
U		r 5b, describe in Part III.		<u>5b</u>		
6			e organization pay or accrue any compensatio	n		
U	contingent on the n		o organization pay or accrue any competibatio			
а				6a		Х
h	Any related organiz	ation?		6b		X
~		r 6b, describe in Part III.				
7			e organization provide any nonfixed payments	;		
-	-					х
8	 not described on lines 5 and 6? If "Yes," describe in Part III 8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the 					
-		ption described in Regulations section 53.495		8		х
9		d the organization also follow the rebuttable p				
			······································			
For	Paperwork Reducti	Schedule J (For	m 990)	2023		

LHA 332111 11-06-23

91-1123302

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) GREGG SMALL	(i)	180,461.	0.	0.	8,388.	12,719.	201,568.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii) (i)							
	(i) (ii)							
	(i)							
	(i) (ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J (Form 990) 2023

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Employer identification number

91-1123302

2023	
Open to Public	
Inspection	

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

Department of the Treasury Internal Revenue Service Name of the organization

CLIMATE SOLUTIONS

Pa	rt I Types of Property				·			
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu	termin		s
4	Art Works of art		items contributed	Torri 990, Fart VIII, IIIe Tg				
1 2	Art - Works of art Art - Historical treasures							
2	Art - Fractional interests							
4	Books and publications							
4 5	Clothing and household goods							
6	Cars and other vehicles							
7								
8	Boats and planes							
9	Intellectual property	X	6	470 929	FMV DONATIO		ልጥፑ	
	Securities - Publicly traded Securities - Closely held stock			10,525.	INV DOMATIO			
10 11	Securities - Partnership, LLC, or							
12	•							
13	Securities - Miscellaneous Qualified conservation contribution -							
13								
14	Historic structures Qualified conservation contribution - Other							
15	Real estate - Residential							
15 16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (
26	Other ()							
27	Other ()							
 28	Other ()							
29	Number of Forms 8283 received by the organiz	zation during	the tax vear for co	ontributions				
	for which the organization completed Form 828							
	3	, ,	0				Yes	No
30a	During the year, did the organization receive by	/ contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least 3 years from the date of t							
	exempt purposes for the entire holding period?			·		30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	olicy that re	quires the review of	of any nonstandard contribut	ions?	31	Х	
32a	Does the organization hire or use third parties of	or related or	ganizations to solid	cit, process, or sell noncash				
			-	,, ,		32a		x
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	olumn (c) foi	a type of property	for which column (a) is chec	ked,			
	describe in Part II							

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

Schedule M (Form 990) 2023

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

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization 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.



Employer identification number 91-1123302

CLIMATE SOLUTIONS

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

WE ADDED THE CLIMATE CHAMPIONS PROGRAM.

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

LOBBYING: IN SUPPORT OF THE 100% CLEAN WA AND 100% CLEAN OR PROGRAMS,

CLIMATE SOLUTIONS USED DIRECT AND GRASSROOTS LOBBYING TO GET OUR

POLICIES ADOPTED IN THE TWO STATES AND VARIOUS CITIES AND COUNTIES

WITHIN THOSE STATES.

CLIMATE CHAMPIONS: ENGAGE POTENTIAL LEADERS ON THE ISSUE OF CLIMATE

AND PROVIDE EDUCATION AND RESOURCES TO INCREASE THE VOICE OF SOLUTIONS

TO THE CLIMATE CRISIS.

BREAKING BARRIERS COLLABORATIVE: PROVIDE CLEAN FLEET AND OTHER CLIMATE

EDUCATION AND ASSISTANCE TO BUSINESSES, STATE AGENCIES, COUNTIES, AND

CITIES.

EXPENSES \$ 708,720. INCLUDING GRANTS OF \$ 0. REVENUE \$ 43,825.

FORM 990, PART VI, SECTION A, LINE 8B:

NO COMMITTEES WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

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

THE GOVERNING BOARD WILL NOT REVIEW THE 990 BEFORE FILING THIS YEAR.

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

THE OPERATIONS DIRECTOR MONITORS THE COMPLIANCE WITH THE POLICY. EACH BOARD

Name of the organization CLIMATE SOLUTIONS	Employer identification numbe 91-1123302
MEMBER IS REQUIRED TO SELF-DISCLOSE CONFLICTS.	
FORM 990, PART VI, SECTION B, LINE 15A:	
A THIRD PARTY WAS HIRED TO REVIEW ALL SALARIES. THE EXECU	TIVE DIRECTOR'S
SALARY IN 2023 FOR 2024. THE BOARD VOTES ON THE ED SALARY	Y EVERY YEAR.
FORM 990, PART VI, SECTION C, LINE 19:	
UPON REQUEST	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
RESEARCH, CONSULTING, AND WORK ON VARIOUS PROGRAMS:	
PROGRAM SERVICE EXPENSES	469,503.
MANAGEMENT AND GENERAL EXPENSES	65.
FUNDRAISING EXPENSES	348.
TOTAL EXPENSES	469,916.
EDI CONSULTING & EXECUTIVE COACHING:	
PROGRAM SERVICE EXPENSES	64,221.
MANAGEMENT AND GENERAL EXPENSES	49,413.
FUNDRAISING EXPENSES	16,092.
TOTAL EXPENSES	129,726.
COMMUNICATIONS STRATEGY, MESSAGE DEVELOPMENT, MARKETING, N	MATERIALS CREATION
PROGRAM SERVICE EXPENSES	97,695.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	97,695.

Schedule O (Form 990) 2023	Page 2
Name of the organization CLIMATE SOLUTIONS	Employer identification number 91-1123302
WEBSITE MAINTENANCE & DATABASE CONSULTING:	
PROGRAM SERVICE EXPENSES	12,608.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	12,608.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	709,945.