Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

<u> </u>	ror tile	e ZUZZ Calelli	uar year, or tax year begi	ming		, 2022	, and endin	y			20	
В	Check if	applicable:	C						D Employ	er identif	ication number	
	Add	ress change	PACIFIC INSTITUT	re eor	STUDIES	TN			94-	30504	134	
	\vdash	ne change	DEVELOPMENT, EN							ne numbe		
	\vdash	-	344 20TH STREET	VIRONIII	NI & DEC	OKITI						
	Initia	al return	OAKLAND, CA 946	12					510	-251-	-1600	
	Final	return/terminated	omenius, en 940.									
	Ame	ended return							G Gross r	eceipts \$	5,251	,630.
	App	lication pending	F Name and address of princip	oal officer: T	ASON MOR	DICOM		H(a) Is this	a group retur			X No
	Ш	, 3	SAME AS C ABOVE	U1	AOM MOR	KISON		H(b) Are al	I subordinates	included		No
_	Taylay	romant ototicos	'		(incort no)	1047(0)(1) 00		If "No,	," attach a list	See inst	ructions.	ш
÷		kempt status:			(insert no.)	4947(a)(1) or	527					
J	Webs	site: WW	W.PACINST.ORG					H(c) Group	exemption nu			
K	Form o	of organization:	X Corporation Trust	Association	Other	L	Year of formati	ion: 198	87 M s	state of le	gal domicile: CA	L
Pa	rt I	Summar	ν									
	1 E		be the organization's miss	sion or mo	st significant	activities: THI	E PACIF	IC INS	TITUTE	CRE <i>P</i>	ATES AND	
			SOLUTIONS TO TH									
)Ce	=	112 1111020	_ 5020110115 10 111									
nar	-											
/eri	2	Check this bo	ox if the organization	on disconti	nuad ita ana	rations or disn	ocod of me	oro thon	DE 0/ of ito	not occ		
õ			oting members of the gove								eis.	1.0
»			dependent voting membe							3		16
Se				_	-		•					15
jţ.			of individuals employed in of volunteers (estimate in							5		32
Activities & Governance			-	-	•					6		20
Ă			ed business revenue from							7a		0.
	b N	Net unrelated	d business taxable income	trom Forn	n 990-1, Pari	I, line II				7b		0.
									Prior Year		Current Y	
ø)			and grants (Part VIII, line						1,552,4	49.	2,055	,416.
Ď	9 F	Program serv	vice revenue (Part VIII, lin	ıe 2g)					3,162,3	70.	3,193	,082.
Revenue	10 l	nvestment in	ncome (Part VIII, column	(A), lines 3	, 4, and 7d)				2,1	.08.	3	,132.
æ	11 (Other revenue	e (Part VIII, column (A), I	ines 5, 6d,	8c, 9c, 10c,	and 11e)			•			
	12 T	Total revenue	e - add lines 8 through 1	1 (must eq	ual Part VIII,	column (A), I	ine 12)	. 4	4,716,9	27.	5,251	,630.
	13	Grants and si	imilar amounts paid (Part	IX. column	(A), lines 1	-3)			, , , , ,		- , -	
			to or for members (Part			-						
		•	•						2 2 2 2 2	7.0	0 010	
S			er compensation, employe						2,381,3	70.	2,818	<u>,551.</u>
Expenses	16a F	Professional	fundraising fees (Part IX,	column (A), line 11e)							
be	b T	Γotal fundrais	sing expenses (Part IX, co	olumn (D),	line 25)	2	17,302.					
Ğ			ses (Part IX, column (A), I						2,130,9	0.5	2,171	025
			es. Add lines 13-17 (must						4,512,3		4,990	
	19 F	Revenue less	expenses. Subtract line	18 from lin	e 12				204,5	72.		<u>,154.</u>
or Ces									ing of Curren		End of Ye	
Net Assets Fund Baland	20 T	Γotal assets ((Part X, line 16)					. 2	2,810,5	06.	3,661	,355.
As A B	21 T	Γotal liabilitie	es (Part X, line 26)						738,4	02.	1,334	,651.
Net E	22 N	Net assets or	fund balances. Subtract	line 21 fror	m line 20				2,072,1	Λ4	2,326	704
	rt II	Signatur							2,012,1	.01.	2,520	, 101.
comp	er penaltie olete. Dec	es of perjury, I de claration of prepa	eclare that I have examined this re arer (other than officer) is based or	turn, including all information	accompanying s n of which prepa	chedules and state rer has any knowle	ments, and to edge.	the best of n	ny knowledge	and belie	f, it is true, correct	., and
		<u> </u>				-						
		Signature of	officer									
Sig	jn	Signature of	Jason W	Lassins	7 M .	PRESII	DENT		Au	gust	4, 2023	
He	re		1	~ ~ ~ ~ ~ ~	70	1 KLSII				0		
		Type or print	t name and title									
		Print/Type p	preparer's name	Preparer's	signature		Date		Check	if F	PTIN	
D-	: A	K IEEE	REY DE LYSER, CPA	ע זבינו	DEA DE IA	SEB CDA			self-employe	_	200022269	
Pai			· · · · · · · · · · · · · · · · · · ·	•	FREY DE LY	JLIN, CFM			Jon Simploy	<u> [</u>	. 00022203	
rre	pare								<u> </u>			
US	e Only	y Firm's addre	ess <u>9261 SIERRA COI</u>	LEGE BOU	LEVARD				Firm's EIN	26-2	2363334	
			ROSEVILLE, CA 9						Phone no.	916-7	51-2900	
May	the IR	RS discuss th	nis return with the prepare	r shown at	ove? See in	structions					X Yes	No

Par	t III	Statement of Program Service Accomplishments		
		Check if Schedule O contains a response or note to any line in this Part III		X
1	-	ly describe the organization's mission:		
	THE	PACIFIC INSTITUTE CREATES AND ADVANCES SOLUTIONS TO THE WORLD'S MOST PROPERTY.	RESSING	
	WAT]	ER CHALLENGES.		
2		ne organization undertake any significant program services during the year which were not listed on the prior		
		n 990 or 990-EZ?	Yes X N	lo
		es," describe these new services on Schedule O.	_	
3		he organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X N	lo
	If "Yes	es," describe these changes on Schedule O.		
4	Descr	ribe the organization's program service accomplishments for each of its three largest program services, as measur	ed by expense	s.
	Section and re	ion 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the revenue, if any, for each program service reported.	total expenses	5,
	aria r	overlad, if drift, for each program sorvice reported.		
10	(Code	o: \(\((Evnopses \(\delta\) 2.252.422\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	2 102 002	` `
4 a	•			
	SEE_	SCHEDULE O		
4b	(Code	e:) (Expenses \$1,178,568. including grants of \$) (Revenue \$)
	INT	EGRATED WATER MANAGEMENT		
	IN 2	2022, WE ADVANCED INTEGRATED WATER MANAGEMENT AT MULTIPLE SCALES. WE COI	NTINUED TO)
	ADV	VANCE INTEGRATION OF CO-BENEFITS INTO WATER INVESTMENT DECISIONS, INCLUDE	ING FOR _	
	WAT	ER EFFICIENCY AND REUSE AND NATURE-BASED SOLUTIONS. WE UPDATED MODELS TO) ESTIMATE	Ξ
	THE	E EMBEDDED ENERGY SAVINGS OF WATER EFFICIENCY PROGRAMS. WE QUANTIFIED TH	E POTENTIA	ΑL
	AND	DIDENTIFIED BARRIERS FOR WATER EFFICIENCY, WATER REUSE, AND STORMWATER (CAPTURE. V	ΝE
		OTED EFFICIENCY SOLUTIONS TARGETING MULTI-FAMILY HOUSEHOLDS. FINALLY, WI		
		LABORATED WITH NGO PARTNERS AND STATE AGENCIES TO DEVELOP ROBUST WATER-I		Y
		NDARDS.		
	<u> </u>			
10	(Code	e:) (Expenses \$393,899. including grants of \$) (Revenue \$		``
40				_′
	WAII	ER ACCESS, SANITATION, AND HYGIENE		. — —
		2022 ME EVANTAED ODDODMINIMEES MO IMPROVE MAMER SUSMONED ASSISTANCE DR		
		2022, WE EXAMINED OPPORTUNITIES TO IMPROVE WATER CUSTOMER ASSISTANCE PRO		Χ
		V-INCOME CUSTOMERS. WE DEVELOPED AND LAUNCHED A WATER AND CLIMATE EQUITY		. — —
		SUPPORT EXPANDED PROGRAMMATIC WORK IN THIS AREA. WE COLLABORATED WITH NO		
		MUNITY PARTNERS TO ASSESS CLIMATE VULNERABILITY TO WATER ACCESS, SANITA		
		GIENE AND TO RURAL COMMUNITIES IN THE UNITED STATES. WE EVALUATED THE CO-		
		<u>IMPROVED ACCESS TO WATER, SANITATION, AND HYGIENE AND ADVANCED INITIATIV</u>	<u> JES_AMONG</u>	
	PRI	VATE SECTOR PARTNERS TO EXPAND WASH IN THE WORKPLACE AND THE COMMUNITY.		
			_	
4d		r program services (Describe on Schedule O.)		
		enses \$ including grants of \$) (Revenue \$)	
4e	Total	program service expenses 3,924,899.		

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

Form 990 (2022) PACIFIC INSTITUTE FOR STUDIES IN Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If a "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		Х
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		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		Х
	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>	33		Х
	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>	37		Х
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V		Vaa	. L
12	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
ВΛΛ	TFFA01041 09/01/22	_	990 ((0000)

Form 990 (2022) PACIFIC INSTITUTE FOR STUDIES IN

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

			res	NO
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 32			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Χ
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Χ
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Χ
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		Х
	If "Yes," indicate the number of Forms 8282 filed during the year	_		37
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Λ
Ĭ	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring	7h		
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	-		
	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			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.).			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.	12-		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
h	Enter the amount of reserves the organization is required to maintain by the states in			
	which the organization is licensed to issue qualified health plans			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O.</i>	14a		
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	i-iD		
	excess parachute payment(s) during the year?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		Х
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		
	ii res, complete i offit 0005.			

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

NAREEYA NALIVKA 344 20TH STREET OAKLAND CA 94612-1241 510-251-1600

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

					(C))					
	(A) Name and title	(B) Average hours per	thar	one both dire	box, an o ector/	unles fficer truste	,	son	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
		week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(1)	JASON MORRISON	_ 40 _								_	
	PRESIDENT	0	X		Χ				195,372.	0.	37,715.
(2)	PETE_STANGA COO	$-\frac{40}{0}$			Χ				156,278.	0.	13,110.
(3)	HEATHER COOLEY	40									
	PROGRAM DIRECTOR	0					Χ		149,308.	0.	13,024.
(4)	AMANDA BIELAWSKI	_ 40 _								_	
	DIRECTOR OF COMM	0					Χ		125,202.	0.	20,512.
(5)	MAI-LAN HA	$-\frac{40}{9}$.,		106 560		00 184
-(0)	DEPUTY DIRECTOR	0					Χ		106,562.	0.	28,174.
(6)	TONY_STAYNER	2	.,						•		•
(7)	VICE CHAIR	0	Χ		Χ				0.	0.	0.
(/)	SALLY LIU	2	37		37				0	0	0
(0)	CHAIR MADIELLE VILLAD MADEINEY	0	X		Χ				0.	0.	0.
(0)	MARIELLE_VILLAR_MARTINEYSECRETARY	2	v		v				0.	0	0
(9)	KATE GASNER	2	X		X				0.	0.	0.
(3)	DIRECTOR	0	Х						0.	0.	0.
(10)	FADUMA ALI	2	Λ						0.	0.	0.
<u>\'.'</u>	DIRECTOR	0	Х						0.	0.	0.
(11)	MICHELLE MCGILL	2	21						0.	•	
<u>`</u>	DIRECTOR	0	Х						0.	0.	0.
(12)	DRUMMOND PIKE	2								<u>- · · · · · · · · · · · · · · · · · · ·</u>	
	DIRECTOR	0	Χ						0.	0.	0.
(13)	PAUL TRAINA	2									
	DIRECTOR	0	Χ						0.	0.	0.
(14)	FELICIA MARCUS	2									
	DIRECTOR	0	Χ						0.	0.	0.

Part VI	Section A. Officers, Directors, Tru		Key	Em	_		es, a	and	d Highest Com	pensated Empl	oyees	5 (cont	inued)
		(B)			(0	•							
	(A)	Average hours	(do	not c	heck	more	than	one h an	(D) Reportable	(E) Reportable		(F)	
	Name and title	per week					or/trus	tee)	compensation from	compensation from related organizations		ated am	
		(list any hours	or d	İnsti	Officer	Key	High emp	Former	the organization (W-2/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	the c	ensation organiza	ation
		for related	dividual	utio	<u>e</u>	emp	Highest co employee	ner	micorress NEO	MICCITOSS NEO,		id relate anizatio	
		organiza - tions	ar ta	na t		Key employee	comp						
		below dotted	ndividual trustee or director	nstitutional trustee		ð	Highest compensated employee						
		line)		ਲ			ated						
(15) CA	VIN POWER	2											
	RECTOR	0	Х						0.	0.			0.
	NNIFER SCHORSCH	2							3,1				
	RECTOR	0	Х						0.	0.			0.
(17) JE	NNIFER MCFARLANE	2											
TR	EASURER	0	Х		Χ				0.	0.			0.
	TER GLEICK	2											
	RECTOR	0	X						0.	0.			0.
	HN_THACHER	2								•			_
	RECTOR	0	Х						0.	0.			0.
	<u>NJEEV CHADHA</u> CE CHAIR	$-\frac{2}{0}$	Х		Х				0.	0.			0.
(21)	CE CHAIR	0	Λ		Λ				0.	0.			<u> </u>
<u> </u>													
(22)													
(23)													
(24)			-										
(25)													
(23)			-										
1b Sub	ototal								732,722.	0.	1	12,	535.
c Tota	al from continuation sheets to Part VII, Section	on A							0.	0.			0.
	al (add lines 1b and 1c)								732,722.	0.			535.
	al number of individuals (including but not limited	to those I	isted	abov	ve) v	who	recei	ved	more than \$100,00	0 of reportable comp	ensatio	n	
fron	n the organization 5											T	T
												Yes	No
3 Did	the organization list any former officer, direction 1a? If "Yes, "complete Schedule J for such	tor, truste	e, ke	ey er	mplo	oyee	e, or	high	nest compensated	employee	3		X
	,												A
the	any individual listed on line 1a, is the sum of organization and related organizations greate	r than \$1	50,0	00?	If "\	Yes,	" con	nple	ete Schedule J for				
	h individual										. 4	Х	
5 Did	any person listed on line 1a receive or accrue services rendered to the organization? If "Yes	e comper	satio	n fro	om :	any	unre	late	ed organization or	individual	5		X
	B. Independent Contractors	o, compre		Cricc	aure	3 /6	<i>31 34</i>	C11 F	5015011		. -	<u> </u>	
1 Con	nplete this table for your five highest compens	sated inde	epen	dent	cor	ntrad	ctors	tha	t received more th	nan \$100,000 of			
com	pensation from the organization. Report compens		tne c	alend	dar <u>y</u>	year	enaii	ng v					
	(A) Name and business addr	ess							(B) Description of	of services	Compe	C) ensatio	on
	al number of independent contractors (including b		ited to	o tho	se I	isted	d abo	ve)	who received more	than			
\$10	0,000 of compensation from the organization	0											

PACIFIC INSTITUTE FOR STUDIES IN Form 990 (2022) 94-3050434 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII..... (B) Related or (A) Total revenue (D) Unrelated Revenue excluded from tax exempt business under sections 512-514 function revenue revenue E, Grants, Amounts 1a Federated campaigns **b** Membership dues..... 1b c Fundraising events..... 1c Gifts, d Related organizations 1d e Government grants (contributions) 1e Contributions, Other Sin All other contributions, gifts, grants, and similar amounts not included above . . . 1f 2,055,416. Noncash contributions included in 14,739 h Total. Add lines 1a-1f 2,055,416 **Business Code** Program Service Revenue 2a CONTRACT REVENUE 541700 3,111,963. 3,111,963 b FISCAL FEE REVENUE 900099 59,164. 59,164 c REIMBURSEMENT_INCOME 900099 20,219 20,219 d 900099 **PUBLICATIONS** 1,586 1,586 900099 150 150 e HONORARIUMS f All other program service revenue. . . g Total. Add lines 2a-2f 3,193,082 Investment income (including dividends, interest, and <u>3,</u>132 3,132. Income from investment of tax-exempt bond proceeds Royalties..... (i) Real (ii) Personal 6a Gross rents 6a **b** Less: rental expenses 6b c Rental income or (loss) 6c d Net rental income or (loss) (i) Securities (ii) Other **7a** Gross amount from sales of assets other than inventory **b** Less: cost or other basis 7a 7b and sales expenses c Gain or (loss). 7c **d** Net gain or (loss)..... 8a Gross income from fundraising events Revenue (not including \$ of contributions reported on line 1c). 8a Other 8b **b** Less: direct expenses..... 9a Gross income from gaming activities. See Part IV, line 19...... 9a **b** Less: direct expenses..... 9b c Net income or (loss) from gaming activities..... **10a** Gross sales of inventory, less..... returns and allowances. 0a **b** Less: cost of goods sold.... 10b c Net income or (loss) from sales of inventory..... **Business Code** Miscellaneous Revenue

,630

3,193,082

0

All other revenue... Total. Add lines 11a-11d.

12

Total revenue. See instructions.....

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a re	esponse or note to any			
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21			3 1	
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	402,475.	120,742.	201,238.	80,495.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	1,760,830.	1,397,845.	313,320.	49,665.
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,700,030.	1,337,043.	313,320.	49,000.
9	Other employee benefits	481,734.	346,293.	106,567.	28,874.
10	Payroll taxes	173,512.	121,181.	42,112.	10,219.
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
_	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0\$CH. Q. Advertising and promotion	1,529,169.	1,421,222.	95,663.	12,284.
13	Office expenses	18,460.	9,743.	8,717.	
14	Information technology	10,400.	3,143.	0,111.	
15	Royalties.				
16	Occupancy	111,040.	111,040.		
17	Travel	120,238.	112,581.	5,618.	2,039.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	10070001	112,001.	3,610.	2,003.
	Conferences, conventions, and meetings	70,662.	70,662.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23 24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.).	6,889.		6,889.	
а	MISCELLANEOUS EXPENSE	158,430.	122,367.	4,632.	31,431.
b	PRINTING AND PUBLICATIONS	68,395.	66,022.	1,924.	449.
С		45,027.		44,927.	100.
d	,	39,544.	24,961.	12,837.	1,746.
e	All other expenses	4,071.	240.	3,831.	
25	Total functional expenses. Add lines 1 through 24e	4,990,476.	3,924,899.	848,275.	217,302.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)		-		

Part X Balance Sheet

		Check if Schedule O contains a response or note to	any li	ne in this Part X	<u></u>	<u></u>	· · · · · · · · · · · · · · · · · · ·
					(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing			1,788,055.	1	2,147,899.
	2	Savings and temporary cash investments			172,331.	2	189,325.
	3	Pledges and grants receivable, net			36,184.	3	298,913.
	4	Accounts receivable, net			690,904.	4	874,776.
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these per	er offic contri	er, director, outor, or 35%		5	
	6	Loans and other receivables from other disqualified posection 4958(f)(1)), and persons described in section				6	
	7	Notes and loans receivable, net	•			7	
Ø	8	Inventories for sale or use		L		8	
set	9	Prepaid expenses and deferred charges		-	42,295.	9	E0 010
Assets	-	· · · · · i	<u>.</u>		42,293.	9	58,010.
2		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	43,571.			
	b	Less: accumulated depreciation		43,571.		10c	
	11	Investments — publicly traded securities		<u> </u>	36,397.	11	27,588.
	12	Investments — other securities. See Part IV, line 11		-		12	
	13	Investments – program-related. See Part IV, line 11.		<u> -</u>		13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			44,340.	15	64,844.
	16	Total assets. Add lines 1 through 15 (must equal line	33)		2,810,506.	16	3,661,355.
	17	Accounts payable and accrued expenses			292,808.	17	382,236.
	18	Grants payable				18	
	19	Deferred revenue			408,994.	19	910,517.
	20	Tax-exempt bond liabilities		=		20	
ies	21	Escrow or custodial account liability. Complete Part I		L		21	
Liabilities	22	Loans and other payables to any current or former off key employee, creator or founder, substantial contribu- controlled entity or family member of any of these per	utor, or	35%		22	
	23	Secured mortgages and notes payable to unrelated th		_		23	
	24	Unsecured notes and loans payable to unrelated third	partie	S		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	es to re plete F	lated third parties, Part X of Schedule D.	36,600.	25	41,898.
	26	Total liabilities. Add lines 17 through 25			738,402.	26	1,334,651.
ces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	;	X			
aŭ	27	· · · · · · · · · · · · · · · · · · ·			1,681,610.	27	2,049,456.
Bal	28	Net assets with donor restrictions		=	390,494.	28	277,248.
귤	20	Organizations that do not follow FASB ASC 958, che			390,494.	20	211,240.
Net Assets or Fund Balance		and complete lines 29 through 33.					
Ö	29	Capital stock or trust principal, or current funds		<u>L</u>		29	
ķ	30	Paid-in or capital surplus, or land, building, or equipm		<u> </u>		30	
Asi	31	Retained earnings, endowment, accumulated income,		<u> </u>		31	
et.	32	Total net assets or fund balances		<u> </u>	2,072,104.	32	2,326,704.
Z	33	Total liabilities and net assets/fund balances			2,810,506.	33	3,661,355.

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)	5,2	51,	630.
2	Total expenses (must equal Part IX, column (A), line 25)			476.
3	Revenue less expenses. Subtract line 2 from line 1			154.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	2,0	72,	104.
5	Net unrealized gains (losses) on investments		-6,	554.
6	Donated services and use of facilities			
7	Investment expenses			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain on Schedule O)			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	0 0	06	704
Day	column (B)) 10 Table 1 Table 2 Table 2	2,3	26,	704.
rar				
	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:	_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. SEE SCHEDULE O			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R Part 200, Subpart F?	За		Х
b	o If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b		
ЗАА	TEEA0112L 09/01/22	Form	9 90	(2022)

SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization Employer identification number PACIFIC INSTITUTE FOR STUDIES IN DEVELOPMENT, ENVIRONMENT & SECURITY 94-3050434 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations **g** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E) Total

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	tion A. Public Support						
begi	ndar year (or fiscal year nning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	912,379.	1,120,503.	1,691,981.	1,156,988.	2,055,416.	6,937,267.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	912,379.	1,120,503.	1,691,981.	1,156,988.	2,055,416.	6,937,267.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						317,010.
6	Public support. Subtract line 5 from line 4						6,620,257.
Sec	tion B. Total Support						· · · · · · · · · · · · · · · · · · ·
	ndar year (or fiscal year nning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	912,379.	1,120,503.	1,691,981.	1,156,988.	2,055,416.	6,937,267.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	761.	2,184.	2,584.	2,108.	3,132.	10,769.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		=,000	2,200	, , , ,	0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI	60.	1,658.				1,718.
11	Total support. Add lines 7 through 10						6,949,754.
12	Gross receipts from related activ	rities, etc. (see ins	structions)			12	13,162,987.
13	First 5 years. If the Form 990 is organization, check this box and						
Sec	tion C. Computation of Pul						
	Public support percentage for 20						95.26%
15	Public support percentage from 2	2021 Schedule A,	Part II, line 14			15	93.14 %
16a	33-1/3% support test—2022. If the and stop here. The organization	he organization di qualifies as a pul	d not check the bolicly supported o	oox on line 13, an rganization	d line 14 is 33-1/3	3% or more, check	k this box
b	33-1/3% support test—2021. If the and stop here. The organization	e organization did qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a	a, and line 15 is 3	3-1/3% or more, o	check this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	test, check this I	box and stop here	Explain in Part	VI how
	10%-facts-and-circumstances te or more, and if the organization organization meets the facts-and	meets the facts-a I-circumstances to	nd-circumstances est. The organiza	test, check this l tion qualifies as a	pox and stop here publicly supporte	Explain in Part do organization	VI how the
18	Private foundation. If the organiz	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see in	structions

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

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

Sec	tion A. Public Support	,					
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.").						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
С	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						T-
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						
	Total support. (Add lines 9, 10c, 11, and 12.)					501()	
	First 5 years. If the Form 990 is organization, check this box and	stop here		third, fourth, or f	fifth tax year as a	section 501(c)	(3)
	tion C. Computation of Pul			10		- I -	- 1 ^
	Public support percentage for 20	•			•		
	Public support percentage from 2					1	6 %
	tion D. Computation of Inv				(0)	1 -	, 0
	Investment income percentage for	•	• • •	-			
	Investment income percentage for						
19a	33-1/3% support tests—2022. If t is not more than 33-1/3%, check	the organization of this box and sto	ald not check the t p here. The organ	ization qualifies	nd line 15 is more as a publicly supp	e tnan 33-1/3%, oorted organiza	ion
b	33-1/3% support tests—2021. If t line 18 is not more than 33-1/3%		lid not check a bo		ne 19a, and line 1	6 is more than	

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was			
	accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
c	: Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9с		
l0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations)? If "Yes," answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

BAA TEEA0404L 09/09/22 Schedule A (Form 990) 2022

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

Sch	edule A (Form 990) 2022 PACTFIC INSTITUTE FOR STUDIES 1	.N	94-30	50434 Pag	e 6
Pa	₹ V Type III Non-Functionally Integrated 509(a)(3) Supporting Organization † V Type III Non-Functionally Integrated 509(a)(3) Supporting Organization † V Type III Non-Functionally Integrated 509(a)(3) Supporting Organization † Description of the Properties	aniza	tions		
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organization	t on N ns mu	ov. 20, 1970 (explain in st complete Sections A	Part VI). See through E.	
Sec	tion 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			
Sec	tion 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):				
á	Average monthly value of securities	1a			
t	Average monthly cash balances	1b			
	Fair market value of other non-exempt-use assets	1c			
(I Total (add lines 1a, 1b, and 1c)	1d			
•	e Discount claimed for blockage or other factors (explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sec	tion C — Distributable Amount			Current Year	
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6			

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

BAA Schedule A (Form 990) 2022

Pai	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)					
Sec	Section D — Distributions					
1	Amounts paid to supported organizations to accomplish exempt purposes	1				
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2				
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3				
4	Amounts paid to acquire exempt-use assets	4				
5	Qualified set-aside amounts (prior IRS approval required – provide details in Part VI)	5				
6	Other distributions (describe in Part VI). See instructions.	6				
_ 7	Total annual distributions. Add lines 1 through 6.	7				
8	Distributions to attentive supported organizations to which the organization is responsive (provide details					
	in Part VI). See instructions.	8				
9	Distributable amount for 2022 from Section C, line 6	9				
10	Line 8 amount divided by line 9 amount	10				

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

BAA Schedule A (Form 990) 2022

94-3050434

Page 8

Part VI

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

PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE		2022	2021	2020	2019	2018
OTHER INCOME	TOTAL \$	0.	\$ 0.	\$ 0.	\$ 1,658. \$ 1,658.	\$ 60. \$ 60.

BAA TEEA0408L 09/09/22 Schedule A (Form 990) 2022

SCHEDULE D (Form 990)

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection
Employer identification number

	IFIC INSTITUTE FOR STUDIES IN ELOPMENT, ENVIRONMENT & SECU			94-3050434				
Pai	t I Organizations Maintaining Do	nor Advised Funds or Othe	r Similar Funds or A	ccounts.				
	Complete if the organization answered "Yes" on Form 990, Part IV, line 6.							
		(a) Donor advised fund	ds (b) F	unds and other accounts				
1	Total number at end of year							
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year)							
4	Aggregate value at end of year							
5	Did the organization inform all donors and do are the organization's property, subject to the							
6	Did the organization inform all grantees, done for charitable purposes and not for the benef	t of the donor or donor advisor, or	for any other purpose cor	nferring				
_	impermissible private benefit?			Yes No				
Pai	Complete if the organization answered							
1	Purpose(s) of conservation easements held by		apply).					
	Preservation of land for public use (for exam	ple, recreation or education)	Preservation of a histo	rically important land area				
	Protection of natural habitat		Preservation of a certif	fied historic structure				
	Preservation of open space							
2	Complete lines 2a through 2d if the organization	held a qualified conservation contribu	tion in the form of a conser	vation easement on the				
	last day of the tax year.			Held at the End of the Tax Year				
	Total number of conservation easements			leid at the End of the Tax Year				
	Total number of conservation easements							
	Number of conservation easements on a cert							
			· ·					
(Number of conservation easements included historic structure listed in the National Regist	in (c) acquired after July 25, 2006	and not on a					
3	Number of conservation easements modified, tra			on during the				
J	tax year	instatroa, ratouscu, extinguisticu, er k	on mater by the organization	arming the				
4	Number of states where property subject to c	onservation easement is located						
5	Does the organization have a written policy re		nspection, handling of viol	ations,				
	and enforcement of the conservation easeme							
6	Staff and volunteer hours devoted to monitoring,	inspecting, handling of violations, and	d enforcing conservation ea	sements during the year				
7	Amount of expenses incurred in monitoring, insp	ecting, handling of violations, and ent	forcing conservation easeme	ents during the year				
8	Does each conservation easement reported cand section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requir	ements of section 170(h)((4)(B)(i) Yes No				
9	In Part XIII, describe how the organization re include, if applicable, the text of the footnote conservation easements.	ports conservation easements in its to the organization's financial state	s revenue and expense st ements that describes the	atement and balance sheet, and organization's accounting for				
Pai	Organizations Maintaining Co Complete if the organization answered	llections of Art, Historical T "Yes" on Form 990, Part IV, line 8.	reasures, or Other S	imilar Assets.				
1 a	If the organization elected, as permitted under historical treasures, or other similar assets he Part XIII the text of the footnote to its financial	eld for public exhibition, education,	or research in furtherance	balance sheet works of art, e of public service, provide in				
ŀ	If the organization elected, as permitted under historical treasures, or other similar assets held following amounts relating to these items:	or public exhibition, education, or res	earch in furtherance of publ	ic service, provide the				
	(i) Revenue included on Form 990, Part VIII(ii) Assets included in Form 990, Part X	line 1		\$				
	(ii) Assets included in Form 990, Part X			\$				
2	If the organization received or held works of art, amounts required to be reported under FASB	historical treasures, or other similar a ASC 958 relating to these items:	ssets for financial gain, pro	vide the following				
á	Revenue included on Form 990, Part VIII, line	9 1		\$				
	Revenue included on Form 990, Part VIII, line Assets included in Form 990, Part X			\$				

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection terms. Scheck all that apply): a Public exhibition d Loan or exchange program b Scholarly research c Preservation for future generations c Preservation for future generation's collections and explain how they further the organization's exempt purpose in Part XIII. 4 Provide a description of the organization solicit or receive donations of art, historical treasures, or other similar assets Ves No PartIV Excerve and Custodial Arrangements. Complete if the organization answered Yes' on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a is the organization an agent, usuate, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. 1b if "Yes No b if "Yes Yes No c if the participation include an amount on Form 990, Part X, line 10, In years back c if the participation include an amount on Form 990, Part X, line 10, In years back c if the participation include an amount on Form 990, Part X, line 10, In years back c if the participation include an include an includ	Part III Organizations Maintaining C	ollections of Art, His	toricai Treasures, o	r Other Similar As	ssets (contii	iuea)	
b Scholarly research c Other	3 Using the organization's acquisition, accession, items (check all that apply):	and other records, check ar	ny of the following that make	ke significant use of its	collectio	n		
c Preservation for future generations	a Public exhibition	d Loan o	or exchange program					
4 Poyute a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of air, historical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization's collection?	b Scholarly research	e Other						
Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?. Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1 a Is the organization an apent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990. Part X? in Part XIII and complete the following table:								
Part V Endownent Funds complete if the organization answered "Yes" on Form 990, Part IV, line 10. Part V Endownent Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Part V Endownent Funds. Complete if the organization and seem of the organization of the organization and seem of the organization and seem of the organization and seem organi		ctions and explain how they	further the organization's	exempt purpose in				
Tall Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, I and complete the following table: Amount	to be sold to raise funds rather than to be m	aintained as part of the o	rganization's collection?.				No	
on Form'990, Part X?.	Escrow and Custodial Arrang reported an amount on Form 990, Par	gements. Complete if the t X, line 21.	e organization answered "	Yes" on Form 990, Par	t IV, line	e 9, or		
b If "Yes," explain the arrangement in Part XIII and complete the following table: C Beginning balance.	1 a Is the organization an agent, trustee, custod	ian or other intermediary	for contributions or other	assets not included			-	
c Beginning balance. d Additions during the year. e Distributions during the year. 1	·				Yes	L	No	
c Beginning balance. d Additions during the year. e Distributions during the year. f Ending balance. 1 e f Ending balance. 1 t 2 a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	b it "Yes," explain the arrangement in Part XIII ar	d complete the following tal	oie:		A mount			
d Additions during the year. e Distributions during the year. f Ending balance. 11 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	- Paginning balance				Amount			
e Distributions during the year. f Ending balance. 1	• •							
## Ending balance. 2 a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?								
2 a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?								
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1 a Beginning of year balance	•				Voc		TNo.	
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. 1 a Beginning of year balance				-		_	- NO	
1 a Beginning of year balance	bili res, explain the arrangement in ratt XII	i. Officer fiere if the explai	iation has been provided	TOTT alt XIII			_	
1 a Beginning of year balance	Part V Endowment Funds, Complete if	the organization answered	l "Yes" on Form 990 Part	IV line 10				
1 a Beginning of year balance. b Contributions. c Net investment earnings, gains, and losses. d Grants or scholarships. e Other expenditures for facilities and programs. f Administrative expenses. g End of year balance. 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment b Permanent endowment The percentages on lines 2a, 2b, and 2c should equal 100%. 3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations. (ii) Related organizations. 3a(i) b If "Yes" on line 3a(i), are the related organizations listed as required on Schedule R?. 3b 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (other) b Buildings. c Leasehold improvements. d Equipment. e Other				<u> </u>	(e) F	our vears	s back	
b Contributions. c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment b Permanent endowment The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations. 3a(i) 3a(ii) b If "Yes" on line 3a(ii), are the related organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other depreciation b Buildings. c Leasehold improvements. d Equipment. c Cleasehold improvements. d Equipment. e Other 43,571. 43,571. 0.		(a) i i i i i i i i i i i i i i i i i i i	(0) 1110 your 2 22011	(u) mee jeure zuen	(6).	ou. your.		
c Net investment earnings, gains, and losses d Grants or scholarships								
and losses	C Nick investment counings mains							
d Grants or scholarships								
and programs. f Administrative expenses								
and programs. f Administrative expenses	e Other expenditures for facilities							
g End of year balance	and programs							
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment	· · · · · · · · · · · · · · · · · · ·							
a Board designated or quasi-endowment b Permanent endowment c Term endowment The percentages on lines 2a, 2b, and 2c should equal 100%. 3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (cinvestment) b Buildings. c Leasehold improvements. d Equipment e Other 43,571. 43,571. 0.	3							
b Permanent endowment c Term endowment The percentages on lines 2a, 2b, and 2c should equal 100%. 3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations 3a(i) b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other depreciation (c) Accumulated depreciation 1 a Land b Buildings. c Leasehold improvements. d Equipment e Other Other 43,571. 43,571. 0.		•	e 1g, column (a)) held as	S:				
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The percentages on lines 2a, 2b, and 2c should equal 100%. 3 a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations (ii) Related organizations (iii) Related organizations (iii) Related organizations (iii) Related organizations (iv) In a 3a(iv) · · · · · · · · · · · · · · · · · · ·	*							
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(ii) Related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?. 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) b Buildings. c Leasehold improvements. d Equipment e Other 43,571. 43,571. O.	9					Yes	No	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?. 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (other) (c) Accumulated depreciation (investment) (investment) (b) Buildings. c Leasehold improvements. d Equipment. e Other. 43,571. 0.	•				- ``			
A Describe in Part XIII the intended uses of the organization's endowment funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (other) (c) Accumulated depreciation	• •							
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value (d) Book value depreciation (d) Book value (d) Book va					. 3b			
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (b) Cost or other basis (other) 1 a Land b Buildings c Leasehold improvements d Equipment e Other 1 a Land 4 3, 571. 0 .			nt funds.					
Description of property (a) Cost or other basis (investment) 1 a Land. b Buildings. c Leasehold improvements. d Equipment. e Other. (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 43,571. 43,571.								
(investment) basis (other) depreciation 1 a Land. basis (other) depreciation b Buildings. c Leasehold improvements. description d Equipment description description description e Other description description description description	Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.							
1a Land. b Buildings. b Buildings. c Leasehold improvements. d Equipment. d Equipment. e Other. 43,571. 43,571.	Description of property		(b) Cost or other		(d) E	Book va	lue	
b Buildings c Leasehold improvements c Leasehold improvements d Equipment e Other 43,571. 43,571. 0.	1.a.l. and	` ′	pasis (other)	depreciation				
c Leasehold improvements. d Equipment d Equipment 43,571. 43,571. 0.								
d Equipment	9							
e Other 43,571. 43,571. 0.	•							
			A2 E71	42 E71				
							<u> </u>	

BAA Schedule D (Form 990) 2022

(a) Doccri	Investments -	:	Faure 000 David IV 1:44	N/A	
		ganization answered "Yes" o ory (including name of security)	(b) Book value	e 11b. See Form 990, Part X, line 12. (c) Method of valuation: Cost or en	d of year market value
	• •		(b) book value	(C) Method of Valuation. Cost of em	u-or-year market value
` '		S			
(3) Other	neid equity interest	3			
<u>(A)</u> (B)					
(C)			_		
			-		
(D) (E)			_		
			_		
(F) (C)			-		
(G) (H)			-		
			_		
(l) Tatal (0a/ana		0. Don't V. column (D) line 10.)	_		
		0, Part X, column (B) line 12.)		27 / 2	
Part VIII	Complete if the or	- Program Related.	n Form 990 Part IV line	N/A e 11c. See Form 990, Part X, line 13.	
	(a) Description of i	nvestment	(b) Book value	(c) Method of valuation: Cost or e	nd-of-vear market value
(1)	(a) Bescription of	TIVO GETTOTIC	(b) Book Value	(c) method of valuation, cost of of	ia or your market value
(2)					
(4)					
(5)					
(6)					
(7)			1		
(8)					
(9)					
(10)					
	Other Assets.	0, Part X, column (B) line 13.)	N/A		
Part IX				e 11d. See Form 990, Part X, line 15.	
	Complete if the of	gamzanon anoworda 100 0	11 1 01111 000, 1 alt 11, 1111		
		(a) De	escription	, , ,	(b) Book value
(1)		(a) De	escription	,	(b) Book value
(1)		(a) De	escription		(b) Book value
		(a) Do	escription		(b) Book value
(2) (3) (4)		(a) De	escription		(b) Book value
(2) (3) (4) (5)		(a) De	escription		(b) Book value
(2) (3) (4) (5) (6)		(a) De	escription		(b) Book value
(2) (3) (4) (5) (6) (7)		(a) De	escription		(b) Book value
(2) (3) (4) (5) (6) (7) (8)		(a) De	escription		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9)		(a) De	escription		(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (10)					(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Cold		Form 990, Part X, column			(b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Liabiliti	Form 990, Part X, column	(B) line 15.)		
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Cold	Other Liabiliti	Form 990, Part X, column es. ganization answered "Yes" o	(B) line 15.)		e 25.
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Cold	Other Liabiliti Complete if the or	Form 990, Part X, column es. ganization answered "Yes" o	(B) line 15.)		
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(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Cold Part X 1. (1) Feder (2) SPON	Other Liabiliti Complete if the or	Form 990, Part X, column es. ganization answered "Yes" o (a) Desc	(B) line 15.)		e 25. (b) Book value
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(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Cold Part X 1. (1) Feder (2) SPON (3) (4)	Other Liabiliti Complete if the or al income taxes	Form 990, Part X, column es. ganization answered "Yes" o (a) Desc	(B) line 15.)		e 25. (b) Book value
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Color Part X 1. (1) Feder (2) SPON (3) (4) (5)	Other Liabiliti Complete if the or al income taxes	Form 990, Part X, column es. ganization answered "Yes" o (a) Desc	(B) line 15.)		e 25. (b) Book value
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Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn.	•
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	5,245,076.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments		
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2 e	-6,554.
3 Subtract line 2e from line 1	3	5,251,630.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	5,251,630.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retu	rn.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	Retu	rn.
· · ·	Retui	4,990,476.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	1	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	1	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	1	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements	1	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. 2 a 2 b	1	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities. b Prior year adjustments. c Other losses. 2 Donated Services and Use of Facilities. 1		
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	1	4,990,476.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	1 2e	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	1 2e	4,990,476.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements. 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities.	1 2e	4,990,476.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	1 2e	4,990,476.

Part XIII Supplemental Information.

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

BAA Schedule D (Form 990) 2022

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

PACIFIC INSTITUTE FOR STUDIES IN DEVELOPMENT, ENVIRONMENT & SECURITY

Employer identification number

94-3050434

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance,	_	
	the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	Yes	No

? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

CORPORATE MATER 148,675.	3 Activities per Region. (The	tollowing Part I, I	ine 3 table can b	e duplicated if additional space	e is needed.)	
10 SOUTH AFRICA 1 PROGRAM SERVICES STEWARDSHIP 18,683. 22 PROGRAM SERVICES CORPORATE WATER CORPORATE WATER 33 UNITED KINGDOM 1 PROGRAM SERVICES STEWARDSHIP 39,506. 40 MEXICO 1 PROGRAM SERVICES STEWARDSHIP 39,506. 40 MEXICO 1 PROGRAM SERVICES STEWARDSHIP 39,506. 50 CANADA 1 PROGRAM SERVICES STEWARDSHIP 100,016. 50 CANADA 1 PROGRAM SERVICES STEWARDSHIP 100,016. 50 SWITZERLAND 1 PROGRAM SERVICES STEWARDSHIP 157,545. 70	(a) Region	offices in the	employees, agents, and independent contractors	the region (by type) (such as, fundraising, program services, investments, grants to recipients	(d) is a program service, describe specific type of service(s) in	expenditures for and investments
CORPORATE MATER STEWARDSHIP 148,675.					CORPORATE WATER	
22 PROGRAM SERVICES STEMARDSHIP 148,675.	(1) SOUTH AFRICA		1	PROGRAM SERVICES		18,683.
CORPORATE WATER 39,506. CORPORATE WATER 39,506. CORPORATE WATER CORP. CORP						
3 UNITED KINGDOM	(2) BRAZIL		2	PROGRAM SERVICES		148,675.
(4) MEXICO 1 PROGRAM SERVICES STDSHP/OUTREACH 66,599. (5) CANADA 1 PROGRAM SERVICES STEWARDSHIP 100,016. (6) SWITZERLAND 1 PROGRAM SERVICES STEWARDSHIP 157,545. (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) 3a Subtotal	400					
Canada	(3) UNITED KINGDOM		1	PROGRAM SERVICES		39,506.
(5) CANADA 1 PROGRAM SERVICES STEWARDSHIP 100,016. (6) SWITZERLAND 1 PROGRAM SERVICES STEWARDSHIP 157,545. (7) (8) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) 3a Subtotal	(4)					
Transfer (4) MEXICO		1	PROGRAM SERVICES		66,599.	
(6) SWITZERLAND 1 PROGRAM SERVICES STEWARDSHIP 157,545. (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) 3a Subtotal 7 531,024. b Total from continuation sheets to Part I	(5)		_			
Column 1	(5) CANADA		1	PROGRAM SERVICES		100,016.
(7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) 3a Subtotal	(6)		_			
(8) (9) (10) (11) (12) (13) (14) (15) (16) (17) 3a Subtotal	(6) SWITZERLAND		1	PROGRAM SERVICES	STEWARDSHIP	157,545.
(9) (10) (11) (12) (13) (14) (15) (16) (17) 3a Subtotal	(7)					
(10) (11) (12) (13) (14) (15) (16) (17) 3a Subtotal	(8)					
(11) (12) (13) (14) (15) (16) (17) 3a Subtotal	(9)					
(12) (13) (14) (15) (16) (17) 3a Subtotal	(10)					
(13) (14) (15) (16) (17) 3a Subtotal	(11)					
(14) (15) (16) (17) 3a Subtotal	(12)					
(15) (16) (17) 3a Subtotal	<u>(13)</u>					
(16) (17) 3a Subtotal	<u>(14)</u>					
(17) 3a Subtotal	<u>(</u> 15)					
3a Subtotal	(16)					
b Total from continuation sheets to Part I	· ·					
sheets to Part I	3a Subtotal		7			531,024.
						531,024.

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

Schedule F (Form 990) 2022

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

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

BAA Schedule F (Form 990) 2022

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18) BAA							
BAA						Schedule F	(Form 990) 2022

IV Foreign Forms		
Nas the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the programization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
Nas the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621).	Yes	X No
Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865).	Yes	X No
Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No
	Nas the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926). Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Downer (see Instructions for Forms 3520 and 3520-A; don't file with Form 990). Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471). Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8861). Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865).	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)

 BAA
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 08/18/22
 Schedule F (Form 990) 2022

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

BAA TEEA3504L 08/18/22 Schedule F (Form 990) 2022

SCHEDULE J (Form 990)

Compensation Information

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

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

PACIFIC INSTITUTE FOR STUDIES IN DEVELOPMENT, ENVIRONMENT & SECURITY

Employer identification number

94-3050434

Part I Questions Regarding Compensation

				Yes	No
1a	Check the appropriate box(es) if the organization provided any of t VII, Section A, line 1a. Complete Part III to provide any relevant	the following to or for a person listed on Form 990, Part ant information regarding these items.			
	First-class or charter travel	Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (such as maid, chauffeur, chef)			
	If any of the bound on the 1- and absoluted with the conveniention fol	University of the second line of			
b	If any of the boxes on line 1a are checked, did the organization fol reimbursement or provision of all of the expenses described a		1b		
	·	, , ,			
2	Did the organization require substantiation prior to reimbursin trustees, and officers, including the CEO/Executive Director, r		2		
3	Indicate which, if any, of the following the organization used to est Executive Director. Check all that apply. Do not check any bo establish compensation of the CEO/Executive Director, but ex	tablish the compensation of the organization's CEO/ oxes for methods used by a related organization to oxplain in Part III.			
	X Compensation committee	X Written employment contract			
	Independent compensation consultant	Compensation survey or study			
	Form 990 of other organizations	$\overline{\overline{X}}$ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, organization or a related organization:	Section A, line 1a, with respect to the filing			
а	Receive a severance payment or change-of-control payment?	·	4a		Χ
	Participate in or receive payment from a supplemental nonqu	•	4b		Χ
C	Participate in or receive payment from an equity-based composition	-	4c		Χ
	If "Yes" to any of lines 4a-c, list the persons and provide the application	icable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations	s must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the contingent on the revenues of:	ne organization pay or accrue any compensation			
а	The organization?		5a		Х
b	Any related organization?		5b		Χ
	If "Yes" on line 5a or 5b, describe in Part III.				
6	For persons listed on Form 990, Part VII, Section A, line 1a, did th contingent on the net earnings of:	ne organization pay or accrue any compensation			
а	The organization?		6a		Χ
b	Any related organization?		6b		Χ
	If "Yes" on line 6a or 6b, describe in Part III.				
7	For persons listed on Form 990, Part VII, Section A, line 1a, of payments not described on lines 5 and 6? If "Yes," describe in		7		Х
8	Were any amounts reported on Form 990, Part VII, paid or ac	ccrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations secti- If "Yes," describe in Part III.	ion 53.4958-4(a)(3)?	8		v
	ii res, describe iii i dit iii		O		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presenting 53,4958,6(c)?	resumption procedure described in Regulations	۵		

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

Schedule J (Form 990) 2022

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

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

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

	((B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation				(D) Nontaxable	(E) Total of columns(B)(i)-(D)	(F) Compensation	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	benefits	columns(B)(i)-(D)	in column (B) reported as deferred on prior Form 990	
JASON MORRISON	(i)	195,372.	0.	0.	0.	37,715.	233,087.	0.	
	(ii)	0.	$\frac{1}{0}$.	<u>0</u> .	$\frac{1}{0}$	0.	233,007.	0.	
	(i)	156,278.	0.	0.	0.	13,110.	169,388.	0.	
	(ii)	0.	0.	0.	$\frac{1}{0}$.	0.	0.	0.	
	(i)	149,308.	0.	0.	0.	13,024.	162,332.	0.	
	(ii)	0.	0.	0.	$\frac{1}{0}$.	0.	0.	0.	
	(i)								
4	(ii)								
	(i)								
5	(ii)						T		
	(i)								
	(ii)								
	(i)				L				
	(ii)								
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	(ii)								
	(i)		<u></u>				 		
16	(ii)							17	

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TEEA4102L 07/25/22

Schedule J (Form 990) 2022

Page 3

Part III Supplemental Information

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

TEEA4103L 07/25/22

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization T

PACIFIC INSTITUTE FOR STUDIES IN DEVELOPMENT, ENVIRONMENT & SECURITY

Employer identification number

94-3050434

FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

CORPORATE WATER STEWARDSHIP

- IN 2022, CEO WATER MANDATE GREW TO 234 ENDORSING COMPANIES WITH THE WRC GROWING TO 32 MEMBER COMPANIES.
- WRC FACILITATED 21 COLLECTIVE ACTIONS IN 15 BASINS ACROSS 6 COUNTRIES, MAPPED 100 PRIORITY BASINS FOR FUTURE COLLECTIVE ACTION.
- LAUNCHED THE WRC 2030 ROADMAP TO ACHIEVE POSITIVE WATER IMPACT IN 100 BASINS AND PROVIDE WASH TO 300 MILLION PEOPLE BY 2030.
- LAUNCHED WRAF CORPORATE GUIDANCE, NBS STAKEHOLDER ENGAGEMENT GUIDANCE, WATER ACTION HUB CORPORATE WATER BENCHMARK TOOL.
- -PARTNERED WITH ESA TO LAUNCH A CALL FOR PROPOSALS TO USE SPACE TECHNOLOGIES TO DIGITIZE WATER RESILIENCE MONITORING AROUND THE WORLD.
- ADVANCED THOUGHT LEADERSHIP IN WASH4WORK WORKING GROUPS ON CLIMATE RESILIENT WASH, WASH IN THE SUPPLY CHAIN, AND WASH CO-BENEFITS.
- HOSTED OVER 2 DOZEN WEBINARS AND CONFERENCE SESSIONS TO ELEVATE WATER STEWARDSHIP, WITH PROGRAMMING AT COP27, SWWW, UNGA, WEF.

FORM 990, PART VI, LINE 8 - EXPLANATION OF NO CONTEMPORANEOUSLY DOCUMENTATION OF MEETINGS

THE ORGANIZATION DOES NOT HAVE A COMMITTEE WITH AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

FORM 990 IS PREPARED BY AN OUTSIDE TAX PROFESSIONAL. THE FORM IS THEN REVIEWED BY THE ORGANIZATION'S MANAGEMENT AND THE EXECUTIVE DIRECTOR SIGNED AND SUMBITTED. A COPY OF THE FORM IS PROVIDED TO THE MEMBERS OF THE BOARD OF DIRECTORS AFTER IT HAS BEEN FILED.

Employer identification number 94-3050434

Page 2

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

A COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS ALL POTENTIAL CONFLICTS OF INTEREST AT LEAST ANNUALLY. ALL PERSONNEL AND BOARD MEMBERS ARE REQUIRED TO DISCLOSE POTENTIAL CONFLICTS AND ANY RELATED PARTY AFFILIATIONS. LOANS BETWEEN THE ORGANIZATION AND MEMBERS OF MANAGEMENT AND THE BOARD ARE STRICTLY PROHIBITED. THE ORGANIZATION SEEKS FULL TRANSPARENCY ON ALL RELATIONSHIPS. ANY POTENTIAL CONFLICTS (IN FACT OR APPEARANCE) ARE DISCUSSED OPENLY AND RESOLVED IN ACCORDANCE WITH THE ORGANIZATION'S POLICIES AND PROCEDURES.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT
THE BOARD OF DIRECTORS REVIEWS THE COMPENSATION OF ALL HIGH LEVEL PERSONNEL ANNUALLY
IN ACCORDANCE WITH IRS RULES AND REGULATIONS. EFFORTS ARE MADE TO SECURE
COMPENSATION DATA FROM INDUSTRY SOURCES IN ORDER TO DETERMINE COMPETITIVENESS AND
APPROPRIATENESS OF SALARIES.EVERY EFFORT IS MADE TO ENSURE THAT THE PROCESS IS
THOROUGH AND TRANSPARENT IN ACCORDANCE WITH IRS GUIDELINES AND THE ORGANIZATION'S
POLICIES AND PROCEDURES.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART IX, LINE 11G OTHER FEES FOR SERVICES

		(A)	(B)	(C)	(D)
			PROGRAM	MANAGEMENT	FUND-
		TOTAL	SERVICES	& GENERAL	RAISING
PROFESSIONAL FEES	TOTAL	1,529,169. \$ 1,529,169.	1,421,222. \$ 1,421,222.	95,663. \$ 95,663.	12,284. \$ 12,284.

FORM 990, PART XII, LINE 2 - CHANGE OF OVERSIGHT OR SELECTION PROCESS

THE AUDIT COMMITTEE SELECTS AND OVERSEES AN INDEPENDENT ACCOUNTING FIRM TO CONDUCT THE AUDIT. NO CHANGE IN THE SELECTION METHOD OCCURED THIS YEAR.

BAA Schedule O (Form 990) 2022