Form C	990
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Return of Organization Exempt From Income Tax

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

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

Open to Public Inspection

OMB No. 1545-0047 2023

Depa Inter	artment o nal Reve	of the Treasury enue Service			Do no Go to w	t ent ww.i	er social secur rs.gov/Form99	ity numbers 0 for instr	on this form as i uctions and t	it may be ma he latest in	de public. formation			Inspecti				
A	For th	ne 2023 calen	ıdar y				-			, and endi		-		, 20				
		f applicable:	C		2					,		D Employ	/er ident	tification number				
	Ad	ldress change	PA	CIFIC I	NSTT	ידנזי	E FOR ST	TUDTES	TN			94-	3050	434				
		me change					IRONMENT					E Teleph		-				
		tial return		4 20TH					510-251-1600									
	Final return/terminated OAKLAND, CA 94612										510 251 1000							
		nended return										G Gross r	eceints	\$ 6.81	2,430.			
		plication pending	F	Name and add	ress of pri	ncina	I officer: JAS		DICON		H(a) Is this	a group retui		i	$x = X_{No}$			
		pricedion periong	SDI	ME AS C		7	JAS	ON MOR	RISON		H(b) Are all	subordinates	s include	d?	es No			
<u> </u>	Tax-	exempt status:		501(c)(3)	501(c)) (ii	isert no.)	4947(a)(1) o	r 527	lf "No,	" attach a list	. See ins	structions.				
J		1	_	PACINST	. ,	(/ ("	13011 110.7	4047 (u)(1) 0	027	H(c) Group	exemption n	umber					
ĸ	-	of organization:		Corporation	Trust		Association	Other	1	Year of forma				legal domicile: (מי			
Pa		Summa		oorporation	must		7.55061011011	Other				,			<i>//1</i>			
	1	Briefly descr	ibe th	he organiza	ation's n	nissi	on or most	sianificant	activities:TH	E PACTE	TC TNS	TTTUTE	CRE	ATES AND)			
									PRESSING									
nce			- <u>-</u> -															
Governance																		
оvе	2	Check this b							rations or disp				net as	sets.				
Ğ	-								ne 1a)				3		17			
s é			•		0		0	0	y (Part VI, lin	,			4		16			
vitie							-		Part V, line 2a	•			5 6		30			
Activities &					•				line 12				о 7а		<u>33</u> 0.			
4									t I, line 11				70 7b		0.			
	~								,		1	Prior Year		Current				
	8	Contributions	s and	l grants (Pa	art VIII.	line	1h)					2,055,4	116.		52,411.			
nue											3,193,0			2,767.				
Revenue												132.		57,252.				
Re	11	Other revenu	le (P	art VIII, col	umn (A), lir	nes 5, 6d, 8d	, 9c, 10c,	and 11e)			- /						
	12	Total revenu	e — a	add lines 8	through	n 11	(must equal	Part VIII,	column (A), l	line 12)		5,251,6	530.	6,81	2,430.			
	13	Grants and s	simila	ar amounts	paid (P	art I	X, column (A), lines 1	-3)									
	14	Benefits paid	d to c	or for memb	bers (Pa	art I)	K, column (A	A), line 4).										
s	15	Salaries, oth	er co	ompensatio	n, empl	oyee	e benefits (F	Part IX, col	umn (A), line	s 5-10)	2	2,818,5	551.	3,56	5,770.			
Expenses	16a	Professional	fund	Iraising fee	s (Part I	IX, c	column (A),	line 11e).						77,000.				
per	b	Total fundrai	sing	expenses (Part IX	, col	umn (D), lin	e 25)	2	21,692.								
Ĕ										,	-	2,171,9	25	2 66	8,769.			
									(A), line 25).			1,990,4			1,539.			
												261,1			0,891.			
or es			- ···									ng of Currei		End of				
ets - lanc	20	Total assets	(Par	t X, line 16)							3,661,3			3,674.			
Ass I Ba	21											L,334,6			8,634.			
Net Assets or Fund Balances	22	Net assets o	r fun	d balances	. Subtra	ict li	ne 21 from I	ine 20				2,326,	704.	2,83	35,040.			
	rt II	Signatu											011		0,0101			
Unde	er penalt	ties of perjury, I d	eclare	that I have exa	amined thi	s retu	Irn, including ac	companying s	chedules and state rer has any knowl	ements, and to	the best of n	ny knowledge	and bel	ief, it is true, cori	ect, and			
comp	olete. De	eclaration of prep	arer (o	other than office	er) is base	d on	all information o	f which prepa	rer has any knowl	edge.								
Sig	jn	Signature of	f office	r							Date							
He	re		-	RRISON]	PRESIDE	ENT						
		Type or prin																
		Print/Type	prepar	er's name			Preparer's sign	nature		Date		Check	if	PTIN				
Pa			FREY	DE LYSEF	R, CPA		K. JEFFRI	EY DE LY	SER, CPA			self-employ	ed	P00022269				
Pre	epare	Firm's nam	e	PROPP (CHRISTE	ENSE	EN CANIGLI	A LLP										
Us	e On	Iy Firm's addr	ress	9261 SI	ERRA (COLI	LEGE BOULE	VARD				Firm's EIN	26-	-2363334				
				ROSEVII								Phone no.	916-	751-2900				
Мау	/ the I	RS discuss th	his re	eturn with tl	he prepa	arer	shown abov	ve? See in	structions		<u></u>			X Yes	No			

BAA For Paperwork Reduction Act Notice, see the separate instructions.

	990 (2023) PACIFIC INSTITUTE FOR STUDIES IN	94-3050434	Page 2
Par			37
-	Check if Schedule O contains a response or note to any line in this Part III		Х
1	Briefly describe the organization's mission:	יסדט ארכיי	CINC
	THE PACIFIC INSTITUTE CREATES AND ADVANCES SOLUTIONS TO THE WO	RLD'S MUSI PRES	SING
	WATER CHALLENGES.		
2	Did the organization undertake any significant program services during the year which were not listed on th	e prior	
	Form 990 or 990-EZ?	Υε	s X No
	If "Yes," describe these new services on Schedule O.		_
3	Did the organization cease conducting, or make significant changes in how it conducts, any program	n services? Ye	es X No
_	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and alloc and revenue, if any, for each program service reported.	services, as measured bations to others, the tota	y expenses. I expenses,
4a	(Code:) (Expenses \$3,287,860. including grants of \$) (Revenue \$ 4,	282,767.)
	SEE SCHEDULE O		
4b	(Code:) (Expenses \$ <u>1,110,241.</u> including grants of \$ INTEGRATED WATER MANAGEMENT) (Revenue \$)
	IN 2023, WE ADVANCED INTEGRATED WATER MANAGEMENT AT MULTIPLE S ADVANCE INTEGRATION OF CO-BENEFITS INTO WATER INVESTMENT DECIS WATER EFFICIENCY AND REUSE AND NATURE-BASED SOLUTIONS. WE QUAN AND IDENTIFIED BARRIERS FOR STORMWATER CAPTURE AND WATER EFFIC EFFICIENCY SOLUTIONS TARGETING MULTI-FAMILY HOUSEHOLDS. WE EVA PROGRAMS FOR A MAJOR WATER SUPPLIER AND PROVIDED RECOMMENDATION PROGRAMS. FINALLY, WE COLLABORATED WITH NGO PARTNERS AND STATE ROBUST WATER-EFFICIENCY STANDARDS AND SUPPORT PROTECTION OF TH	IONS, INCLUDING TIFIED THE POTE IENCY. WE PILOT LUATED EFFICIEN NS FOR ENHANCIN AGENCIES TO DE	FOR NTIAL ED WATER CY G THEIR
4c	(Code:) (Expenses \$598,954, including grants of \$) (Revenue \$)
	WATER ACCESS, SANITATION, AND HYGIENE		
	IN 2023, WE EXAMINED OPPORTUNITIES TO IMPROVE WATER CUSTOMER A LOW-INCOME CUSTOMERS. WE COLLABORATED WITH NGOS AND COMMUNITY CLIMATE VULNERABILITY TO WATER ACCESS, SANITATION, AND HYGIENE COMMUNITIES IN THE UNITED STATES. WE EVALUATED THE CO-BENEFITS WATER, SANITATION, AND HYGIENE AND ADVANCED INITIATIVES AMONG TO EXPAND WASH IN THE WORKPLACE AND THE COMMUNITY.	PARTNERS TO ASS AND TO RURAL OF IMPROVED AC	ESS CESS_TO
4d	I Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue	Ś)
4e	Total program service expenses 4,997,055.	<u>т</u>)
BAA		Fo	orm 990 (2023)

 Form 990 (2023)
 PACIFIC INSTITUTE FOR STUDIES IN

 Part IV
 Checklist of Required Schedules

_			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	X	no
2	Is the organization required to complete Schedule B. Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	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? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II.</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>	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? <i>If "Yes," complete Schedule D, Part V</i>	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.			
	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? <i>If "Yes," complete Schedule D, Part VII</i>	11b		Х
С	Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
	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
	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		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		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? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		Х

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Form 990 (2023)

Form 990 (2023) PACIFIC INSTITUTE FOR STUDIES IN

Par	t 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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>	25a		Х
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes,"			
	complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <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		Х
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		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
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			· 🗋
_			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	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		
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Form	990 (2023) PACIFIC INSTITUTE FOR STUDIES IN 94-3050434	Į	F	Page 5								
Par	art V Statements Regarding Other IRS Filings and Tax Compliance (continued)											
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return 2a 30											
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х									
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х								
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule 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).											
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X								
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х								
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>								
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х								
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b										
	Organizations that may receive deductible contributions under section 170(c).											
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								
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b										
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	75 7c		X								
d	If "Yes," indicate the number of Forms 8282 filed during the year											
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х								
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х								
g	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?	7h										
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8										
9	Sponsoring organizations maintaining donor advised funds.											
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a										
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b										
	Section 501(c)(7) organizations. Enter:											
	Initiation fees and capital contributions included on Part VIII, line 12 10a											
	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											
12-	against amounts due or received from them.)	12a										
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12d										
	Section 501(c)(29) qualified nonprofit health insurance issuers.											
	Is the organization licensed to issue qualified health plans in more than one state?	13a		—								
	Note: See the instructions for additional information the organization must report on Schedule O.											
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans											
с	Enter the amount of reserves on hand											
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х								
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b										
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Х								
10	If "Yes," see the instructions and file Form 4720, Schedule N.	-		X								
	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		^								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would	17										
	result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.	17										

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Part VI	Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below	, and	for
	a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes	on	
	Schedule O. See instructions.		_
	Check if Schedule O contains a response or note to any line in this Part VI.		. Х
Section	A. Governing Body and Management		
		Yes	No

			res	NO								
1	a Enter the number of voting members of the governing body at the end of the tax year 1a 17 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. 1a											
	b Enter the number of voting members included on line 1a, above, who are independent 1b 16											
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?											
3												
4												
	since the prior Form 990 was filed?	4		X X								
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?											
6	6 Did the organization have members or stockholders?											
7	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		Х								
	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Х								
8	the following: SEE SCHEDULE O											
	a The governing body?	8a	Х	37								
	b Each committee with authority to act on behalf of the governing body?	8b		X								
9	organization's mailing address? If "Yes," provide the names and addresses on Schedule O.	9		X								
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Re	event		<u> </u>								
10	a Did the organization have local chapters, branches, or affiliates?	10a	Yes	No X								
	b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their	TUa		Λ								
	operations are consistent with the organization's exempt purposes?	10b										
11	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х								
	b Describe on Schedule O the process, if any, used by the organization to review this Form 990.											
	a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х									
	b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х									
	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done SEE. SCHEDULE . Q.	12c	Х									
	Did the organization have a written whistleblower policy?	13	Х	L								
	Did the organization have a written document retention and destruction policy?	14	Х									
	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?											
	a The organization's CEO, Executive Director, or top management official. SEE SCHEDULE. O.	15a	Х	v								
	b Other officers or key employees of the organization.	15b		Х								
16	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.											
	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		Х								
	b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b										
Se	ction C. Disclosure			L								
17												
18		01(c)(3	3)s on	ly)								
19		ble to										
20	State the name address and telephone number of the person who possesses the organization's books and records											

20 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

Form 990 (2023) PACIFIC INSTITUTE FOR STUDIES IN	94-3050434	Page 7								
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highes Independent Contractors	t Compensated Employe	es, and								
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 organization's tax year.	g with or within the									

• 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)	(do	l not che unless	Posit	ition more	than or	ne	(D) Reportable	(E) Reportable	(F)
	Average hours	offic	er and	a di	irooto	/tructo	\sim	compensation from	compensation from related organizations	Estimated amount of other compensation from
	per week (list any	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	om	the organization (W-2/1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	the organization and related
	hours for related organiza-	lividual t director	ution	4	Idua	est c	ę			organizations
	tions	r trus	ial tr		oyee	qmo				
	dotted line)	stee	uste		10	ensa				
			ă			ated				
(1) JASON MORRISON	40									
PRESIDENT	0	Х		Х				219,136.	0.	38,685.
(2) PETE STANGA	40									
C00	0			Х				173,170.	0.	13,458.
(3) HEATHER COOLEY	40									
PROGRAM DIRECTOR	0					Х		165,455.	0.	13,106.
(4) AMANDA BIELAWSKI	40									
DIRECTOR OF COMM	0					Х		140,321.	0.	20,717.
(5) TONY STAYNER	2									
CO VICE CHAIR	0	Х		Х				0.	0.	0.
_(6)_SALLY_LIU	2									
CHAIR	0	Х		Х				0.	0.	0.
(7) MARIELLE_VILLAR_MARTINEY	2							0	0	0
DIRECTOR	0	Х						0.	0.	0.
(8) KATE GASNER	2							0	0	0
DIRECTOR	0	Х						0.	0.	0.
(9) FADUMA ALI	2	v						0	0	0
DIRECTOR (10) MICHELLE MCGILL	0	Х						0.	0.	0.
(10) MICHELLE MCGILL SECRETARY	<u>2</u> 0	х		Х				0.	0.	0.
(11) OLIVIER MARIE	2	Λ	· ·	Λ				0.	0.	0.
DIRECTOR	0	Х						0.	0.	0.
(12) PAUL TRAINA	2	Λ						0.	0.	0.
DIRECTOR	0	Х						0.	0.	0.
(13) FELICIA MARCUS	2	- 73						0.	0.	0.
DIRECTOR	0	Х						0.	0.	0.
(14) GAVIN POWER	2							0.	0.	<u> </u>
DIRECTOR	0	Х						0.	0.	0.
BAA	TEEA0		08/23/	23						Form 990 (2023)
										. ,

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					(C)							
(A) Name and title			box,	unles	ss pe	more rson i	than o s both r/truste	an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations		(F) nated amo	
		per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W.271099- (W.271099- MISC/1099-NEC)	(W-2/1099- (W-2/1099-NEC)	the ar	ensation organizat nd related ganizatior	ion 1
(15)	JENNIFER SCHORSCH	2		(D			ted						
<u>(13)</u>	DIRECTOR	<u>_</u>	Х						0.	0.			0.
(16)	MOHSEN MORTADA	2							0	0			0
(17)	DIRECTOR PETER GLEICK	0	Х						0.	0.			0.
<u>`_'</u> _	DIRECTOR	0	X						0.	0.			0.
(18)	JOHN_THACHER	2			17					0			0
(19)	TREASURER SANJEEV CHADHA	0	Х		Х				0.	0.			0.
<u> </u>	CO VICE CHAIR	0	Х		Х				0.	0.			0.
(20)													
(21)			•										
(22)													
(23)													
(24)			•										
(25)			•										
1b	Subtotal								698,082.	0.		85,9	966.
	Total from continuation sheets to Part VII, Section								0.	0.			0.
	Total (add lines 1b and 1c) Total number of individuals (including but not limited								698,082.	0. 0 of reportable comm	ensatio	85,9	966.
-	from the organization 7		10100	0.00	,		10001	, ou			Jonioutic		
												Yes	No
3	Did the organization list any former officer, direct on line 1a? If "Yes, "complete Schedule J for such	tor, truste h <i>individu</i>	ee, ke <i>ial</i>	ey er	mplo	oyee	e, or l	high	nest compensated	employee	. 3		Х
4	For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual.	reportab r than \$1	le co 50,0	mpe 00?	ensa If "	ition Yes,	and " <i>con</i>	oth nple	er compensation f	rom	4	X	
5	Did any person listed on line 1a receive or accruit for services rendered to the organization? If "Yes												X
	tion B. Independent Contractors												
1	Complete this table for your five highest compension from the organization. Report compen	sated ind sation for	epen the c	dent alen	t coi dar j	ntra year	ctors endir	tha ng v	t received more the with or within the org	nan \$100,000 of ganization's tax year			
	(A) Name and business add	ress							(B) Description o	of services	Comp	(C) ensatio	n
2	Total number of independent contractors (including b \$100,000 of compensation from the organization	ut not lim	ited t	o thc	ose l	isteo	d abov	ve)	who received more	than			

Form 990 (2023) PACIFIC INSTITUTE FOR STUDIES IN

Part VIII Statement of Revenue

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

]	
		- -	(D)	 			

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					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ເຊັ ຊ	1a	Federated campaigns	1a					
Grants, mounts	b	Membership dues	1b					
Ω Mπ	С	Fundraising events	1c					
sifts lar /	d	Related organizations	1d					
imi		Government grants (contributions)	1e					
er S	f	All other contributions, gifts, grants, and similar amounts not included above	1f	2 462 411				
oth	a	Noncash contributions included in		2,462,411.				
Contributions, Gifts, Grants and Other Similar Amounts	-	lines 1a-1f	1g	9,933.				
•	h	Total. Add lines 1a-1f		Business Code	2,462,411.			
anue	2a	CONTRACT REVENUE		541700	4,194,956.	4,194,956.		
leve		FISCAL FEE REVENUE		900099	4,194,956.	4,194,938. 75,030.		
се Е		HONORARIUMS		900099	11,624.	11,624.		
eni		PUBLICATIONS		900099	764.	764.		
m S		REIMBURSEMENT INCOME		900099	393.	393.		
Program Service Revenue		All other program service revenu						
Pro	g	Total. Add lines 2a-2f			4,282,767.			
	3	Investment income (including divide	ends,	interest, and				
		other similar amounts) Income from investment of tax-e			67,252.			67,252.
	4 5	Royalties	•	•				
	J	(i) Re		(ii) Personal				
	6a	Gross rents 6a			•			
	b	Less: rental expenses 6b						
	с	Rental income or (loss) 6c						
	d	Net rental income or (loss)						
	7a	Gross amount from (i) Secu	rities	(ii) Other				
		sales of assets other than inventory 7a						
	b	Less: cost or other basis						
		and sales expenses 7b Gain or (loss) 7c						
		Net gain or (loss)						
e	-	Gross income from fundraising events	Γ					
enue		(not including \$						
eve		of contributions reported on line 1c).						
гB	_	See Part IV, line 18		a				
Other Reve		Less: direct expenses	-	b				
0		Net income or (loss) from fundra	ISING					
	9a	Gross income from gaming activities. See Part IV, line 19	9	a				
	b	Less: direct expenses		b				
	С	Net income or (loss) from gaming	g acti	vities				
		Gross sales of inventory, less						
		returns and allowances	10					
		Less: cost of goods sold	10					
	С	Net income or (loss) from sales of	or inv	Business Code				
Miscellaneous Revenue	11a			Business oode				
ne	11a b c d			<u> </u>				
ella vei	С							
Re Re	d	All other revenue	- <u>-</u> -					
Σ	е	Total. Add lines 11a-11d						
RAA	12	Total revenue. See instructions.			6,812,430.	4,282,767.	0.	67,252.

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 response or note to any line in this Part IX

000	tion 501(c)(3) and 501(c)(4) organizations must con Check if Schedule O contains a		0	, , , ,	Χ
Do 1 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and general expenses	(D) Fundraising
1	Grants and other assistance to domestic organizations and domestic governments.		expenses	general expenses	expenses
_	Grants and other assistance to domestic				
2	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and for- eign 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	444,449.	321,971.	108,606.	13,872.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described				· · · · · · · · · · · · · · · · · · ·
7	in section 4958(c)(3)(B)	0.	0.	0.	0.
-	Pension plan accruals and contributions	2,303,498.	1,668,718.	562,883.	71,897.
8	(include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	573,972.	418,472.	127,459.	28,041.
10	Payroll taxes	243,851.	183,470.	53,160.	7,221.
11	Fees for services (nonemployees):				
	Management				
	Accounting				
	Professional fundraising services. See Part IV, line 17	77,000.			77,000.
	Investment management fees	77,000.			77,000.
	Other. (If line 11g amount exceeds 10% of line 25, column				
12	(A), amount, list line 11g expenses on Schedule OSCH. (Advertising and promotion) 1,822,582.	1,707,350.	100,182.	15,050.
13	Office expenses	27,899.	17,885.	10,014.	
14	Information technology	21,099.	17,005.	10,014.	
15	Royalties				
16	Occupancy	114,599.	114,599.		
17	Travel	182,515.	174,353.	6,042.	2,120.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials		,		,
19	Conferences, conventions, and meetings	257,596.	192,716.	64,880.	
20	Interest				
21	Payments to affiliates.				
22	Depreciation, depletion, and amortization				
23 24	Insurance 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	7,251.		7,251.	
	expenses on Schedule O.).				
а	TELEPHONE_AND_COMMUNICATIONS	110,158.	86,422.	23,736.	
b		68,979.	68,075.	904.	
c		50,678.	37,746.	6,441.	6,491.
d		22,343.	5,123.	17,220.	
	All other expenses.	4,169.	155.	4,014.	
25	Total functional expenses. Add lines 1 through 24e	6,311,539.	4,997,055.	1,092,792.	221,692.
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)				

TEEA0110L 08/23/23

Form 990 (2023) PACIFIC INSTITUTE FOR STUDIES IN Part X Balance Sheet

Part X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year	· · · · · · · · ·	(B) End of year
1	Cash – non-interest-bearing	2,147,899.	1	1,280,109.
2	Savings and temporary cash investments.	189,325.	2	1,248,830.
3	Pledges and grants receivable, net	298,913.	3	389,963.
4	Accounts receivable, net	874,776.	4	1,859,589.
5	Loans and other receivables from 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		5	
6	Loans and other receivables from other disqualified persons (as defined under			
-	section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
7	Notes and loans receivable, net.		7	
8	Inventories for sale or use.		8	
8	Prepaid expenses and deferred charges	58,010.	9	63,731
10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 43,571.	0070101	-	0071011
	Less: accumulated depreciation10b43,571.		10c	
11	Investments – publicly traded securities.	27,588.	11	36,803.
12	Investments – other securities. See Part IV, line 11	27,500.	12	
13	Investments – program-related. See Part IV, line 11		13	
14	Intangible assets.		14	
15	Other assets. See Part IV, line 11	64,844.	15	94,649
16	Total assets. Add lines 1 through 15 (must equal line 33)	3,661,355.	16	4,973,674
		3,001,000.		4,575,074
17	Accounts payable and accrued expenses	382,236.	17	414,770
18	Grants payable	·	18	
19	Deferred revenue	910,517.	19	1,685,681
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
21 22	Loans and other 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		22	
23			23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.	41,898.	25	38,183
26	Total liabilities. Add lines 17 through 25.	1,334,651.	26	2,138,634
27 28 29 30 31 32 33	Organizations that follow FASB ASC 958, check here X and complete lines 27, 28, 32, and 33.	1,001,0011		
27	Net assets without donor restrictions	2,049,456.	27	2,512,373.
28		277,248.	28	322,667.
	Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
29	Capital stock or trust principal, or current funds		29	
30	Paid-in or capital surplus, or land, building, or equipment fund		30	
31	Retained earnings, endowment, accumulated income, or other funds		31	
	Total net assets or fund balances	2,326,704.	32	2,835,040.
32			1	_, ,

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Form	990 (2023) PACIFIC INSTITUTE FOR STUDIES IN 94	-3050	434		Pa	ige 12
Par	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI.					
1	Total revenue (must equal Part VIII, column (A), line 12)	1	6	, 8	12,4	130.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6	, 3	11,5	539.
3	Revenue less expenses. Subtract line 2 from line 1	3				391.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).	4	2			704.
5	Net unrealized gains (losses) on investments.	5		1 -		145.
6	Donated services and use of facilities	6			,	
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	2	, 83	35,0)40.
Par	t XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					. X
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain		_			
	on Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or revie	wed on	а			
	separate basis, consolidated basis, or both.					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a sepa	irate				
	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 aud	lit,		~	v	
	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					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th	e Unifor	m			
	Guidance, 2 C.F.R. Part 200, Subpart F?			3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required a	udit		Τ		-
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u> .		3b		L
BAA	TEEA0112L 08/23/23		F	orm	990 ((2023)

		Public Chari	ty Status and P	ublic	Supr	oort	OMB No. 1545-0047
SCHEDULE A (Form 990)	Corr	plete if the organizat	tion is a section 501(c) (1) nonexempt charita	(3) orga	nization		2023
		Attac	h to Form 990 or Form	99 0-EZ			Open to Public
Department of the Treasury Internal Revenue Service	Go	o to www.irs.gov/Fori	m990 for instructions a	nd the	latest in	formation.	Inspection
Name of the organization P		STITUTE FOR ST C, ENVIRONMENT				Employer identifica 94-305043	
		•		compl	ete this	s part.) See instruc	
The organization is not	a private found	lation because it is: (For lines 1 through 12,	check c	nly one	box.)	
			nurches described in sec		(b)(1)(A)	(i).	
2 A school desc	ribed in sectio	n 170(b)(1)(A)(ii). (Att	ach Schedule E (Form	990).)			
		• •	ization described in sec				
4 A medical res		tion operated in conju	unction with a hospital	describe	ed in sec	tion 170(b)(1)(A)(iii). E	nter the hospital's
5 An organization section 170(b	on operated for •)(1)(A)(iv). (Co	the benefit of a colle mplete Part II.)	ge or university owned	or oper	ated by	a governmental unit de	escribed in
	te, or local gov	ernment or governme	ntal unit described in s	ection 1	1 70(b)(1))(A)(v).	
7 X An organizatio in section 170	n that normally r)(b)(1)(A)(vi). (eceives a substantial p Complete Part II.)	art of its support from a	governm	iental un	it or from the general put	olic described
8 A community	trust described	in section 170(b)(1)(A)(vi). (Complete Part	l.)			
						on with a land-grant colle and state of the college o	
from activities investment in	s related to its e come and unre	exempt functions, sub	ject to certain exception e income (less section	ns; and	(2) no r	putions, membership fea more than 33-1/3% of it usinesses acquired by t	ts support from gross
			ly to test for public safe	ety. See	section	n 509(a)(4).	
or more publi	cly supported o	rganizations describe	d in section 509(a)(1) d	or sectic	on 509(a	nctions of, or to carry ou)(2). See section 509(a)	ut the purposes of one)(3). Check the box on
	-		upporting organization		•	÷	the supported
organization(s)	the power to re t IV, Sections A	gularly appoint or elect	a, or controlled by its sup a majority of the directo	rs or trus	stees of	ion(s), typically by giving the supporting organization	on. You must
management o	porting organiz of the supporting te Part IV, Secti	organization vested in	ontrolled in connection the same persons that c	with its ontrol or	support manage	ted organization(s), by the supported organization	having control or ion(s). You
-						onally integrated with, its	
functionally in	itegrated. The c	organization generally	anization operated in con must satisfy a distribu s A and D, and Part V.	tion rea	with its s uiremen	supported organization(s) t and an attentiveness) that is not requirement (see
e Check this bo integrated, or	x if the organiz Type III non-fu	ation received a written nctionally integrated	en determination from supporting organization	the IRS 1.		s a Type I, Type II, Type	-
		organizations n about the supported					
(i) Name of supported o	-	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organiza in your o	ls the tion listed joverning	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					ment?		
				Yes	No		
(A)							
(B)							
(C)							
<u>(</u> D)							
(E)							
Total							

OMB No. 1545-0047

PACIFIC INSTITUTE FOR STUDIES IN

94-3050434

Page 2

Dout II	Support Schedule for	Organizations	Described in Sections	170/h)/1)/A)/h) and	1170/6//1//////
rartii	Support Scheuule for	Organizations	Described in Sections	170(D)(1)(A)(IV) all(1 / U(D)()(A)(VI

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

Section A. Public Support

							0
Cale begi	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,120,503.	1,691,981.	1,156,988.	2,055,416.	2,462,411.	8,487,299.
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	1,120,503.	1,691,981.	1,156,988.	2,055,416.	2,462,411.	8,487,299.
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)						264,028.
6	Public support. Subtract line 5 from line 4						8,223,271.
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	1,120,503.	1,691,981.	1,156,988.	2,055,416.	2,462,411.	8,487,299.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2,184.	2,584.	2,108.	3,132.	67,252.	77,260.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE FART VI	1,658.					1,658.
11	Total support. Add lines 7 through 10						8,566,217.
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	15,684,333.
13	First 5 years. If the Form 990 is organization, check this box and	for the organization stop here	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)	
	tion C. Computation of Pu						
	Public support percentage for 20						96.00%
	Public support percentage from						95.26%
16a	33-1/3% support test—2023. If t and stop here. The organization	he organization di qualifies as a pul	id not check the b plicly supported o	ox on line 13, and rganization	d line 14 is 33-1/3	3% or more, check	k this box
b	33-1/3% support test–2022. 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, c	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	s 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 d-circumstances te	nd-circumstances est. The organizat	test, check this l tion qualifies as a	box and stop here publicly supporte	e. Explain in Part	VI how the
18	Private foundation. If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see ins	structions

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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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include						
2	any "unusual grants.") 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						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1,						
	2, and 3 received from disgualified persons.						
h	Amounts included on lines 2						
5	and 3 received from other than						
	disqualified persons that exceed the greater of \$5,000 or						
	1% of the amount on line 13						
	for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line						
<u> </u>	7c from line 6.)						
-	tion B. Total Support	() 0010	4 \ 0000	() 0001	()) 0000	() 0000	(0 T
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
-	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from						
h	similar sources Unrelated business taxable						
5	income (less section 511						
	taxes) from businesses acquired after June 30, 1975						
~	Add lines 10a and 10b						
11	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					<u> </u>	
	gain or loss from the sale of						
	capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9,						
	10c, 11, and 12.)						
14	First 5 years. If the Form 990 is organization, check this box and	for the organizati I stop here	on's first, second,	third, fourth, or	hifth tax year as a	section 501(c)(3)	
Sec	tion C. Computation of Pu						
15	Public support percentage for 20)23 (line 8, colum	n (f), divided by li	ne 13, column (f))	15	010
16	Public support percentage from	2022 Schedule A	Part III, line 15.				010
Sec	tion D. Computation of Inv					II	
-	Investment income percentage f				umn (f))	17	0/0
18	Investment income percentage f	-		-			0/0
	33-1/3% support tests-2023. If						
1.50	is not more than 33-1/3%, check	this box and sto	p here. The organ	nization qualifies	as a publicly supp	orted organization	
b	33-1/3% support tests-2022. If t	the organization o	lid not check a bo	x on line 14 or li	ne 19a, and line 1	6 is more than 33-	1/3%, and 🛛
• -	line 18 is not more than 33-1/3%		•	- '			
20	Private foundation. If the organi	zation did not che	eck a box on line	14, 19a, or 19b, o	check this box and	see instructions.	

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 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		
		-		
3a	a 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		
Ł	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	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		
4 a	a 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		
t	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	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	a 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	5.		
	accomplished (such as by amendment to the organizing document).	5a		
t	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	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? <i>If "Yes," complete Part I of Schedule L (Form 990)</i> .	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes,"			
Ũ	complete Part I of Schedule L (Form 990).	8		
9a	a 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		
t	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	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? <i>If "Yes," provide detail in Part VI.</i>	9с		
10a	a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		
Ł	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	1 0 b		

- 11 Has the organization accepted a gift or contribution from any of the following persons?
 - a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?
 - **b** A family member of a person described on line 11a above?

c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

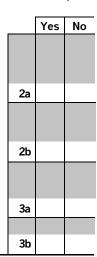
- Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed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

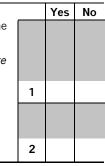
Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
 - The organization satisfied the Activities Test. Complete line 2 below. а
 - The organization is the parent of each of its supported organizations. Complete line 3 below. h
- The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions). С

2 Activities Test. Answer lines 2a and 2b below.

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





Yes

1

3

No

Page 5

No

Yes

11a

11b

11c

Schedule A (Form 990) 2023

PACIFIC INSTITUTE FOR STUDIES IN Part IV Supporting Organizations (continued)

F) a	a	۵	6
Г	- a	u	e	0

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	ns mus	complete Sections A	through E.
ection 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		
Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ection 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):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
ection C – Distributable Amount			Current Year
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). 7

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Schedule A (Form 990) 2023

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-	rt V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	itions (continue	ed)	
Sec	tion D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt pu		1		
2	Amounts paid to perform activity that directly furthers exempt purposes of	S,			
	in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purposes of su		3		
	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required – provide	e details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.				
- / 8	Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organizati	on is rosponsivo (provida	dataila	7	
0	in Part VI). See instructions.		uelans	8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributi Pre-2023	ons	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required – <i>explain in Part VI</i>). See instructions.				
3	Excess distributions carryover, if any, to 2023				
á	a From 2018				
ŀ	• From 2019				
	: From 2020				
	From 2021				
	From 2022				
	f Total of lines 3a through 3e				
Ģ	Applied to underdistributions of prior years				
ŀ	n Applied to 2023 distributable amount				
	i Carryover from 2018 not applied (see instructions)				
	j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D, line 7: \$				
a	Applied to underdistributions of prior years				
	Applied to 2023 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2023. 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 2024. Add lines 3j and 4c.				
8	Breakdown of line 7:				
ć	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
C	Excess from 2022				
(Excess from 2023				

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Schedule A (Form 990) 2023

Schedule A (Form 9	90) 2023 E	PACIFIC INST	ITUTE FOR S	TUDIES IN	94-305	0434 Page 8
E 3 i	Supplemental Inforn II, line 12; Part IV, Sectio 3, lines 1 and 2; Part IV, Ia, and 3b; Part V, line 1; ines 2, 5, and 6. Also cor IE 10 - OTHER INCO	Section C, line 1; P Part V, Section B, <u>nplete this part for</u>	art IV, Section D, I line 1e; Part V, Se	ines 2 and 3; Part IV, ction D, lines 5, 6, an	Section E, lines 1c, Id 8; and Part V, Sect	2a, 2b,
NATURE AN	D SOURCE	2023	2022	2021	2020	2019
OTHER INC	OME TOTAL	\$0.	\$ 0.	<u>\$0.</u>	\$0.	\$ 1,658. \$ 1,658.

0.\$

SCI	HEDULE D	Sup	plemental Financial St	atements			OMB No. 1	545-0047	
	(Form 990) 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.							2023	
Depar Intern	tment of the Treasury al Revenue Service	Go to www.irs.	Attach to Form 990. gov/Form990 for instructions and	I the latest inform	nation.		Open to Inspecti	Public on	
Name	of the organization	•				Employer id	entification nu	mber	
	ELOPMENT, E	UTE FOR STUDIES IN NVIRONMENT & SECUR	RITY			94-305	0434		
Pa	tl Organiz	zations Maintaining Do	nor Advised Funds or Othen nswered "Yes" on Form 990	er Similar Fun	ds or A	Accounts			
	Comple	ate in the organization a				European and a		-1-	
1	Total number at a	end of year	(a) Donor advised fun	ds	(D)	Funds and o	other accoul	nts	
2		ntributions to (during year).							
2		ants from (during year)							
4		at end of year							
5	Did the organizati	ion inform all donors and dor	nor advisors in writing that the as organization's exclusive legal cor	sets held in dono	r advised	d funds	Yes	No	
6	Did the organizati	ion inform all grantees, dono poses and not for the benefit	ors, and donor advisors in writing to the donor or donor advisor, or	that grant funds of for any other pu	an be u	sed only	Yes		
Pa		vation Easements							
Гa			nswered "Yes" on Form 990) Part IV line	7				
1			y the organization (check all that		/.				
•		of land for public use (for exam		Preservation	of a hist	orically imp	ortant land	area	
		natural habitat		Preservation		5 1		aroa	
		of open space					5 Straotaro		
2		through 2d if the organization I	held a qualified conservation contribution	ution in the form o	f a conse	ervation ease	ment on the		
	· · · · · , · · · · ·	y				Held at the	End of the	Tax Year	
ä	Total number of c	conservation easements			2a				
I	Total acreage res	stricted by conservation ease	ments		2b				
(Number of conse	rvation easements on a certi	fied historic structure included on	line 2a	2c				
(Number of conser a historic structur	rvation easements included or re listed in the National Regis	on line 2c acquired after July 25, 2	2006, and not on	2d				
3	Number of conserv tax year	vation easements modified, trar	nsferred, released, extinguished, or t	terminated by the o	organizati	ion during th	e		
4	Number of states	where property subject to co	onservation easement is located						
5	Does the organization and enforcement	ation have a written policy re of the conservation easemen	egarding the periodic monitoring, i nts it holds?	nspection, handli	ng of vic	olations,	Yes	No	
6	Staff and volunteer	r hours devoted to monitoring,	inspecting, handling of violations, ar	nd enforcing conse	rvation e	asements du	ring the year	r	
7	Amount of expense	es incurred in monitoring, inspe	ecting, handling of violations, and er	forcing conservation	on easem	nents during	the year		
8	and section 170(h	ı)(4)(B)(ii)?	n line 2d above satisfy the require				Yes	No	
9	In Part XIII, descuinclude, if application conservation ease	able, the text of the footnote	ports conservation easements in it to the organization's financial stat	ts revenue and externation to the strength to the second sec	pense s ribes the	statement ar e organizati	nd balance s on's accoun	sheet, and iting for	
Pa	t III Organiz Comple	zations Maintaining Co te if the organization a	Ilections of Art, Historical ⁻ nswered "Yes" on Form 990	Treasures, or), Part IV, line	Other 8.	Similar A	ssets		
1a	historical treasure	es, or other similar assets he	r FASB ASC 958, not to report in Id for public exhibition, education al statements that describes these	, or research in fu	ment an urtherand	d balance s ce of public	heet works service, pro	of art, ovide in	
t	following amounts	s relating to these items.	r FASB ASC 958, to report in its r or public exhibition, education, or re-						
	(i) Revenue incli	uded on Form 990, Part VIII,	line 1			ې۔ې			
-									
2			historical treasures, or other similar a ASC 958 relating to these items.						
a		a on Form 990, Part VIII, line				ን ሎ			
	Assets included in	n Form 990, Part X	e Instructions for Form 990.			····· γ	ula D /	000 2022	
DAA	For Paperwork R	equiction Act Notice, see the	e instructions for Form 990.	IEEA3301L 07/	20/23	Sched	ule D (Form	i ୭୭∪) ∠UZS	

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 99
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Schedule D (Form 990) 2023 PACIFIC INS			94-305				
Part III Organizations Maintaining	Collections of Art, His	storical Treasures,	or Other Similar As	ssets (continued)			
3 Using the organization's acquisition, accessio items (check all that apply).	n, and other records, check a	any of the following that m	ake significant use of its	collection			
a Public exhibition	d Loan	or exchange program					
b Scholarly research e Other							
c Preservation for future generations							
 Provide a description of the organization's col Part XIII. 	llections and explain how the	y further the organization's	s exempt purpose in				
5 During the year, did the organization solici to be sold to raise funds rather than to be	t or receive donations of a maintained as part of the o	rt, historical treasures, o organization's collection?	r other similar assets	Yes No			
Part IV Escrow and Custodial Arra Complete if the organization	ngements			n amount on			
Form 990, Part X, line 21.	odian, or other intermedian	v for contributions or oth	er assets not included				
on Form 990, Part X?				Yes No			
b If "Yes," explain the arrangement in Part XIII	and complete the following ta	able.		<u> </u>			
				Amount			
c Beginning balance							
d Additions during the year							
e Distributions during the year							
f Ending balance							
2a Did the organization include an amount on			-	Yes No			
b If "Yes," explain the arrangement in Part >	XIII. Check here if the expla	anation has been provide	ed in Part XIII				
Part V Endowment Funds			1.0				
Complete if the organization	n answered "Yes" on F	orm 990, Part IV, II	ine 10.				
(a) Cu	rrent year (b) Prior yea	r (c) Two years back	(d) Three years back	(e) Four years back			
1a Beginning of year balance	(.,	(,,),	(1) 100 100 100	(,,			
b Contributions							
c Net investment earnings, gains, and losses							
d Grants or scholarships							
e Other expenditures for facilities							
and programs							
f Administrative expenses							
q End of year balance							
2 Provide the estimated percentage of the c	urrent vear end balance (lir	ne 1g. column (a)) held :	as:				
a Board designated or quasi-endowment	8						
b Permanent endowment	°						
c Term endowment %	`						
The percentages on lines 2a, 2b, and 2c shou	uld aqual 100%						
, _							
3a Are there endowment funds not in the posses	sion of the organization that	are held and administered	for the	Yes No			
organization by: (i) Unrelated organizations?							
(ii) Related organizations?				3a(i) 3a(ii)			
b If "Yes" on line 3a(ii), are the related orga							
				. 3D			
4 Describe in Part XIII the intended uses of	ş	ent tunas.					
Part VI Land, Buildings, and Equip							
Complete if the organization answe	red "Yes" on Form 990, Part	IV, line 11a. See Form 9	90, Part X, line 10.				
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value			
1a Land							
b Buildings							
c Leasehold improvements.							
d Equipment							
e Other		43,571.	43,571.	0.			
Total. Add lines 1a through 1e. (Column (d) mus				0.			
BAA				ule D (Form 990) 2023			
				· · ·			

Part VII	Investments – Other Securities		N/A	
	Complete if the organization answered "Yes" of		· ·	
	ption of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-o	f-year market value
· · ·	al derivatives			
	held equity interests			
(3) Other				
(A) (B)		-		
(C)		-		
(D) (E)		-		
<u>(F)</u>				
$\frac{(G)}{(G)}$		-		
(H)		-		
(I)				
	n (b) must equal Form 990, Part X, line 12, column (B))	-		
Part VIII	Investments – Program Related		N/A	
	Complete if the organization answered "Yes" of		11c. See Form 990, Part X, line 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-ot-year market value
(1)				
(2)				
(3) (4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, line 13, column (B))			
Part IX	Other Assets Complete if the organization answered "Yes" or	N/A N/A Form 990 Part IV line		
		escription		(b) Book value
(1)				
(2)				
(3)				
(4) (5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	umn (b) must equal Form 990, Part X, line 15, o	column (B))		
Part X	Other Liabilities Complete if the organization answered "Yes" or	n Form 990 Part IV line	11e or 11f See Form 990 Part X line (25
1.		ription of liability		(b) Book value
	al income taxes	, ,		
	ISORED GROUPS PAYABLE			38,183.
(3)				
(4) (5)				
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
	mn (b) must equal Form 990, Part X, line 25, c uncertain tax positions. In Part XIII, provide the text of the f			38,183.

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

Schedule D (Form 990) 2023 PACIFIC INSTITUTE FOR STUDIES IN 94	4-3050434	Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per R	leturn	
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 6	5,819,875.
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 2b		
c Recoveries of prior year grants 2c		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2e	7,445.
3 Subtract line 2e from line 1.	3 6	5,812,430.
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 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b.	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5 6	5,812,430.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1 6	5,311,539.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		<u>· · ·</u>
a Donated services and use of facilities		
b Prior year adjustments	-	
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2e	
3 Subtract line 2e from line 1.	3 6	5,311,539.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		<u>, </u>
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b.	-	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 6	5 <u>,311,539.</u>
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.

SCHEDULE F (Form 990)		Statement of Activities Outside the United States omplete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.						
Department of the Treasury	Go to www.ir		h to Form 990. or instructions and the latest i	nformation	Open to Public			
Internal Revenue Service		-		Employer identi	Inspection fication number			
° PACIF	IC INSTITUTE OPMENT, ENVIF			94-30504				
			e United States. Comple					
	Part IV, line 14b.		ſ	5				
			substantiate the amount of its selection criteria used to award					
2 For grantmakers. Describ United States.	e in Part V the organi	zation's procedure	s for monitoring the use of its gra	ants and other assistance	outside the			
3 Activities per Region. (T	he following Part I, I	line 3 table can b	e duplicated if additional space	e is needed.)				
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region			
				CORPORATE WATER				
(1) SOUTH AFRICA		1	PROGRAM SERVICES	STEWARDSHIP	16,298			
				CORPORATE WATER				
(2) BRAZIL		2	PROGRAM SERVICES	STEWARDSHIP	169,273			
(2)				CORPORATE WATER				
(3) UNITED KINGDOM		1	PROGRAM SERVICES	STEWARDSHIP	93,529.			
(4) CANADA		1	DDOCDAM CEDUICEC	CORPORATE WATER	05 222			
(-) CANADA		1	PROGRAM SERVICES	STEWARDSHIP CORPORATE WATER	95,232			
(5) SWITZERLAND		1	PROGRAM SERVICES	STEWARDSHIP	171,392			
		1		CORPORATE WATER	111,052			
(6) KENYA		1	PROGRAM SERVICES	STEWARDSHIP	13,750.			
				CORPORATE WATER				
(7) ECUADOR		1	PROGRAM SERVICES	STEWARDSHIP	30,333.			
(8)								
(9)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
(17)								
3a Subtotal		8			589,807			
b Total from continuation		0			305,007			
sheets to Part I								
c Totals (add lines 3a and 3b).	0	8			589,807			

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

Schedule F (Form 990) 2023 PACIFIC INSTITUTE FOR STUDIES IN

94-3050434

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)
2 E	nter total number of recipient organiz ganization by the IRS, or for which t	zations listed above the grantee or course	nat are recognized	as charities by t	he foreign country,	recognized as a t	ax exempt 501(c)(3	3)	0
3 E BAA	nter total number of other organization	ons or entities							0 0 7 (Form 990) 2023

Schedule F (Form 990) 2023 PACIFIC INSTITUTE FOR STUDIES IN

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	1	1		1	1	Schedule F	(Form 990) 2023

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Page	e 4

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

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.

Page 5

	Suppleme	ental Informa	tion Reg	jarding F	undraising or Gami	ng Activ	vities	OMB No. 1545-0047	
SCHEDULE G (Form 990)	LE G Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.							2023	
Department of the Treasury Internal Revenue Service	Go	o to www.irs.go	Open to Public Inspection						
Name of the organization PA	CIFIC INSTI	TUTE FOR	Employer identifica	tion number					
DE Fundraising	94-305043	4							
Fart Form 990-E2	Z filers are not re	quired to comp	lete this p	oart.	owing activities. Check				
a X Mail solicitatio	Ũ		ough any		X Solicitation of non-				
b X Internet and email solicitations f Solicitation of government grants									
c Phone solicitations g Special fundraising events d In-person solicitations In-person solicitations									
		r oral agreement	t with any i	ndividual (i	ncluding officers, director	rs, trustee	es, or key		
employees listed	in Form 990, Par	t VII) or entity i	n connect	tion with p	rofessional fundraising nt to agreements under v	services	?		
compensated at l	east \$5,000 by th	e organization.	(iunuraise	ers) pursua	nt to agreements under v				
(i) Name and addres or entity (fundr		(ii) Activity	have custor	fundraiser dy or control ibutions?	(iv) Gross receipts from activity	(or re fundra	ount paid to etained by) iser listed in olumn (i)	(vi) Amount paid to (or retained by) organization	
APERIO PHILAN	THROPY LLC		Yes	No					
1 75 PEARL ST 1	· · · · ·	CONSULTING		х			77,000.		
BROOKLYN NY 1	1201	CONSOLLING		Λ			77,000.		
2									
3									
-									
4									
5									
6									
7									
8									
9									
5									
10									
10									
	nich the organizatio				ontributions or has been	notified it	77,000.	0.	
or licensing.	<u>j</u> .	J						-	

Sche	edule	G (Form 990) 2023 PACIFIC	C INSTITUTE FOR	STUDIES IN	94-30	50434 Page 2				
Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18 reported more than \$15,000 of fundraising event contributions and gross income on Form 990-E and 6b. List events with gross receipts greater than \$5,000.										
			(a) Event #1	(b) Event #2	(c) Other events NONE (total number)	(d) Total events (add column (a) through column (c))				
nue			(event type)	(event type)	(total number)					
Revenue	1	Gross receipts								
<u>L.</u>	2	Less: Contributions								
	3	Gross income (line 1 minus line 2)								
	4	Cash prizes								
	5	Noncash prizes								
lses	6	Rent/facility costs								
Direct Expenses	7	Food and beverages								
rect	8	Entertainment								
ā	9	Other direct expenses								
	10	Direct expense summary. Add lines 4 thr	ough 9 in column (d).							
	11	Net income summary. Subtract line 10 fr	om line 3, column (d).							
Par	t III	Gaming. Complete if the organiza than \$15,000 on Form 990-EZ, lin	ation answered "Ye le 6a.	s" on Form 990, Pa	art IV, line 19, or re	ported more				
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))				
R	1	Gross revenue								
ses	2	Cash prizes								
Exper	3	Noncash prizes								
Direct Expenses	4	Rent/facility costs								
	5	Other direct expenses								
	6	Volunteer labor	Yes %	Yes% No	_Yes% No					
	7									
	8	Net gaming income summary. Subtract li	ine 7 from line 1, colurr	ın (d)						
ł	a Is th o If "N 		g activities in each of th	nese states?						
		e any of the organization's gaming license 'es," explain:		or terminated during th		Yes No				

Schedule G (Form 990) 2023

Schedule G (Form 990) 2023	PACIFIC INST	TITUTE FOR STUDIES		4-3050)434	Page 3
11 Does the organization conduct	gaming activities with r	nonmembers?			Yes	No
12 Is the organization a grantor, ber administer charitable gaming?					Yes	No
13 Indicate the percentage of gamin	g activity conducted in:			1 1		
a The organization's facility				13 a		010
b An outside facility				13b		0/0
14 Enter the name and address of the	ne person who prepares t	he organization's gaming/specia	l events books and records	:		
Name						
Address						
 15 a Does the organization have a d b If "Yes," enter the amount of g of gaming revenue retained by c If "Yes," enter name and address 	aming revenue received the third party \$	ty from whom the organization	n receives gaming revenu and th	ne amour		No
Name						
Address						; '
16 Gaming manager information:						
Name						
Gaming manager compensatio	n \$					
Description of services provide	d					
Director/officer	Employee	Independent c	ontractor			
17 Mandatory distributions:						
a Is the organization required unde state gaming license?	r state law to make chari	table distributions from the gami	ng proceeds to retain the		Yes	No
b Enter the amount of distributions organization's own exempt act			t organizations or spent in	the		
Part IV Supplemental Infor and Part III, lines 9, information. See ins	, 9b, 10b, 15b, 15c,	e explanations required l , 16, and 17b, as applica	by Part I, line 2b, col ble. Also provide an	umns (y additi	(iii) and (v ional);

SCHEDULE J		Compensation Information		OMB No. 1545-0047				
(Form 990)		For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Complete if the organization answered "Yes" on Form 990, Part IV, line		2023				
Department of the Treasury Internal Revenue Service		Attach to Form 990. Go to <i>www.irs.gov/Form990</i> for instructions and the latest informatic	on.	Open to Public Inspection				
Name		PACIFIC INSTITUTE FOR STUDIES IN DEVELOPMENT, ENVIRONMENT & SECURITY	Employer identification 94-3050434	number				
Par		s Regarding Compensation	94 9090494					
· ui	quotaon				Yes	No		
1a	Check the approp VII, Section A, I	priate box(es) if the organization provided any of the following to or for a person listed on Fo ine 1a. Complete Part III to provide any relevant information regarding these items.	orm 990, Part		105			
	First-class o	or charter travel Housing allowance or residence for	r personal use					
	Travel for co	pmpanions Payments for business use of pers	onal residence					
	Tax indemn	ification and gross-up payments Health or social club dues or initiat	ion fees					
	Discretionar	y spending account Personal services (such as maid, c	hauffeur, chef)					
b		es on line 1a are checked, did the organization follow a written policy regarding payment or or provision of all of the expenses described above? If "No," complete Part III to exp	lain	. 1b	_			
2		ation require substantiation prior to reimbursing or allowing expenses incurred by all ficers, including the CEO/Executive Director, regarding the items checked on line 1a		. 2				
3	Executive Direct	any, of the following the organization used to establish the compensation of the organization of the organization. Check all that apply. Do not check any boxes for methods used by a related organization of the CEO/Executive Director, but explain in Part III.	on's CEO/ anization to					
	X Compensati	on committee X Written employment contract						
	Independen	t compensation consultant Compensation survey or study						
	Form 990 of	other organizations	ation committee					
4	During the year, organization or	did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the 1 a related organization:	filing					
		ance payment or change-of-control payment?				Х		
	•	receive payment from a supplemental nonqualified retirement plan?				Х		
С	c Participate in or receive payment from an equity-based compensation arrangement?					Х		
	IT "Yes" to any of	lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.						
	Only section 50	1(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.						
5	For persons listed contingent on the	d on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compen ne revenues of:	sation					
	5	۱?				Х		
b		anization?		. 5b		Х		
	If "Yes" on line 5	a or 5b, describe in Part III.						
	contingent on th	d on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compen le net earnings of:						
		1?				X X		
α		Any related organization?						
_								
7	7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III					Х		
8	Were any amount	nts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was s	subject			ĺ		
	to the initial con If "Yes," describ	tract exception described in Regulations section 53.4958-4(a)(3)? e in Part III.		. 8		х		
				-				
9	It "Yes" on line 8 section 53 4958	, did the organization also follow the rebuttable presumption procedure described in Regula -6(c)?	tions	. 9				
BAA		Reduction Act Notice, see the Instructions for Form 990.	Schedule		ı 990)	2023		

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

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

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

		(B) Breakdown of W-2 a	nd/or 1099-MISC and/o	r 1099-NEC compensatio		(D) Nontaxable	(E) Total of columns(B)(i)-(D)	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	benefits	columns(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
	(i)	219,136.	0.	0.	0.	38,685.	257,821.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	173,170.	0.	0.	0.	13,458.	186,628.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)	165,455.	0.	0.	0.	13,106.	178,561.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
AMANDA BIELAWSKI	(i)	140,321.	0.	0.	0.	20,717.	161,038.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)				\square		\bot	
	(ii)							
	(i)							
6	(ii)							
	(i)							
	(ii)							
	(i)							
8	(ii)				Γ		Γ	
	(i)							
9	(ii)				Γ		Γ	
	(i)							
10	(ii)				Γ		Γ	
	(i)							
11	(ii)						F	
	(i)							
12	(ii)						<u>+</u>	
	(i)							
13	(ii)				+		+	
	(i)							
	(ii)				+		+	1
	(i)							1
	(ii)				+		+	1
	(i)							1
	(ii)				+		+	1
ВАА		-	TEEA4102L 07/03	3/23	•	•	Schedule .	J (Form 990) 2023

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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.

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 2023

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of th

^{ie organization} PACIFIC INSTITUTE FOR STUDIES IN	Employer identification number
DEVELOPMENT, ENVIRONMENT & SECURITY	94-3050434

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

CORPORATE WATER STEWARDSHIP

- IN 2023, CEO WATER MANDATE GREW TO 242 ENDORSING COMPANIES WITH THE WRC GROWING TO 35 MEMBER COMPANIES.

- WRC FACILITATED 21 COLLECTIVE ACTIONS IN 15 BASINS ACROSS 6 COUNTRIES AND LAUNCHED 100 PRIORITY BASINS ON THE WATER ACTION HUB.

- LAUNCHED THE BUSINESS LEADERS OPEN CALL TO ACCELERATE WATER ACTION AT THE UN 2023 WATER CONFERENCE.

- LAUNCHED THE WRC INVESTMENT PORTFOLIO STRATEGY AND ANNOUNCED THE FIRST COLLECTIVE CORPORATE INVESTMENT COMMITMENTS.

-SUPPORTED THE LAUNCH OF THE FORWARD FASTER WATER RESILIENCE TARGET AT UNGA.

-FACILITATED PILOTING OF DRAFT NET POSITIVE WATER IMPACT GUIDANCE AND DRAFT WASH MULTI-BENEFIT ACCOUNTING FRAMEWORK.

-RELEASED VERSION 2 OF THE BENEFIT ACCOUNTING OF NATURE-BASED SOLUTIONS FOR WATERSHEDS GUIDE.

-PARTICIPATED IN OVER 60 SPEAKING ENGAGEMENTS TO ELEVATE WATER STEWARDSHIP, WITH PROGRAMMING AT UN 2023 WATER CONFERENCE, COP28, 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