Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service

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.

2022 **Open to Public** Inspection

Α	For the	e 2022 calenç	lar year, or tax year beginning	01/01/2022	and ending	12/31	2022			
в	Check if	f applicable:	C Name of organization SEE TURTL	ES			D Empl	oyer identification number		
	Address	s change	Doing business as					81-4325149		
	Name c	hange	Number and street (or P.O. box if ma	il is not delivered to street a	address)	Room/suite	E Telepł	hone number		
	Initial re	turn	5605 SE Rural St				800-215-0378			
	Final retu	urn/terminated	City or town, state or province, count	try, and ZIP or foreign posta	al code					
	Amende	ed return	Portland, OR 97206				G Gross	receipts \$ 678,445		
	Applicat	tion pending	F Name and address of principal officer	Brad Nahill		H(a) Is this a g	roup return fo	or subordinates? 🗌 Yes 🗹 No		
			5605 SE Rural St, Portland, OR 9	7206		H(b) Are all s	subordinat	es included? 🗌 Yes 🗌 No		
<u> </u>	Tax-exe	empt status:	✓ 501(c)(3) 501(c) () (insert no.) 🗌 494	7(a)(1) or 527	7 If "No," attac	ch a list. Se	ee instructions.		
J	Website		turtles.org			H(c) Group	exemption	number		
К	Form of	organization: 🗸	Corporation Trust Association	Other	L Year of for	rmation: 2016	M State	of legal domicile: OR		
Ρ	art I	Summa	-							
	1	Briefly des	cribe the organization's mission	or most significant a	ctivities: SEE	Turtles connects	s people	with sea turtles in		
Ce		meaningfu	, personal and, memorable ways.	We help the sea turtle	community co	onnect, grow, and	d thrive k	by supporting		
nar			on Schedule O, Statement 1)							
ver	2		box if the organization disc					s net assets.		
Activities & Governance	3		voting members of the governing				3	7		
کہ م	4		independent voting members of		-		4	6		
itie	5		per of individuals employed in ca	•			5	2		
ctiv	6		per of volunteers (estimate if neo	.,			6	0		
Ă	7a		ated business revenue from Par				7a	0		
	b	Net unrelat	ed business taxable income fro	m Form 990-T, Part I	, line 11		7b	0		
		• • • • •				Prior Yea		Current Year		
ne	8		ons and grants (Part VIII, line 1h)				373,967	527,681		
en!	9	-	ervice revenue (Part VIII, line 2g)				106,895	147,075		
Revenue	10		income (Part VIII, column (A), li				130	26		
	11		nue (Part VIII, column (A), lines 5		-		13,878	2,972		
	12		ue-add lines 8 through 11 (mus				494,870	677,754		
	13		I similar amounts paid (Part IX, o				208,285	384,737		
	14		aid to or for members (Part IX, c				0	0		
Expenses	15		her compensation, employee ber				73,812	124,617		
ens	16a		al fundraising fees (Part IX, colu				0	0		
Ř	b		aising expenses (Part IX, colum		0					
_	17		enses (Part IX, column (A), lines		· · · · ·		171,428	168,750		
	18		nses. Add lines 13–17 (must equ			-	453,525	678,104		
	19	Revenue le	ss expenses. Subtract line 18 fi	rom line 12			41,345	-350		
Net Assets or Fund Balances	00	Total asset	e (Dert V line 16)			Beginning of Cur		End of Year		
\sse Bala	20		s (Part X, line 16)				93,374	92,294		
let A	21		ties (Part X, line 26)				0	0		
			or fund balances. Subtract line re Block	21 Irom line 20 .	<u></u>		93,374	92,294		
_	art II	<u> </u>	I declare that I have examined this retu	m including coordination		totomonto and t- th	a bact of	my knowledge and halles !! !-		
Un	iuer pena	anies or deriury.	i declare that i have examined this retu	ni, incluaina accompanyina	a schedules and s	sialements. and to th	IE DEST OF	HIV KNOWIEGGE AND DEIIET. IT IS		

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

Sign	Signature of officer				Date	1		
Here	Brad Nahill, President							
	Type or print name and title							
Paid Preparer	Print/Type preparer's name Preparer's signature Date					Check if if self-employed	PTIN	
Use Only		Firm's EIN						
Use Only	Firm's address	Phone no.						
May the IR	S discuss this return with the pr	eparer shown above? See instructi	ions				Yes	No
Few Daw even	ard Daduation Act Nation and the			+ N= 11000			OC	

For Paperwork Reduction Act Notice, see the separate instructions.

Form 99	Page 2
Part	III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	SEE Turtles connects people with sea turtles in meaningful, personal and, memorable ways. We help the sea turtle community
	connect, grow, and thrive by supporting community-based conservation efforts. Our programs provide funding, resources, and
	tools to protect endangered sea turtle species in the Global South.
2	Did the organization undertake any significant program services during the year which were not listed on the
-	prior Form 990 or 990-EZ?
	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
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$
	Billion Baby Turtles: Financial support for community organizations protecting sea turtle nesting beaches around the world.
4b	(Code:) (Expenses \$ 117,469 including grants of \$0) (Revenue \$ 147,075)
	SEE Turtles Conservation Tours: Volunteer trips offer people the opportunity to participate in hands-on sea turtle research and
	conservation efforts. These trips provide volunteer help to local organizations, generate income for coastal communities, and
	educate people on how to help people protect sea turtles.
4c	(Code:) (Expenses \$ 44,523 including grants of \$ 17,900) (Revenue \$ 34,909)
	Too Rare to Wear: Working to end the trade in illegal tortoiseshell around the world
4d	Other program services (Describe on Schedule O.) See Schedule O, Statement 2
	(Expenses \$ 203,282 including grants of \$ 79,536) (Revenue \$ 171,884)
4e	Total program service expenses 675,246

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Part	V 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	~	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	~	
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		~
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? <i>If "Yes," complete Schedule C, Part II</i>	4		~
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		~
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</i> "Yes," <i>complete Schedule D, Part I</i>	6		~
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		~
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		~
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? <i>If "Yes," complete Schedule D, Part IV</i>	9		~
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		~
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		~
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		~
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		~
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		~
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f		~
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		~
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		~
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	~	
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			
15	foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b	•	
16	for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	~	
17	assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16		~
18	Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		~
	Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		~
19	If "Yes," complete Schedule G, Part III	19		~
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
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	~	

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Part	V Checklist of Required Schedules (continued)			
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	00	Yes	No
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>	22		~
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		-
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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>	24d 25a		~
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		~
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		~
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? <i>If "Yes," complete Schedule L, Part III</i>	27		-
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," <i>complete Schedule L, Part IV</i>	28a		~
b c	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28b 28c		
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29 30	~	-
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	31		~ ~
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		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		~
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)? 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>	35a 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		~
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		~
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	~	
Part	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			
1a b c	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 6 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 0 0	-	Yes	No

Form 99			F	Page 5
Part			Yes	No
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 2			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
	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		~
	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		~
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
	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? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		
	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?	79 7h		
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
ь 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b Section 501(c)(12) organizations. Enter:			
a	Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
Ŀ	Note: See the instructions for additional information the organization must report on Schedule O.			
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	the organization is licensed to issue qualified health plans 13b Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		-
	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		~
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
	If "Yes," complete Form 4720, Schedule O.			
	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Form	990	(2022)
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Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.	See in	struc	tions
	Check if Schedule O contains a response or note to any line in this Part VI			. 🗸
Secti	on A. Governing Body and Management			
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 7 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.	-	Yes	No
ь 2	Enter the number of voting members included on line 1a, above, who are independent . 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?	2		~
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		~
4 5 6	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? . Did the organization have members or stockholders?	4 5 6		ン ン ン
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		~
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		~
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	•		
a b 9	The governing body?	8a 8b 9	ン ン	~
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	-	ode.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		~
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a b	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe on Schedule O the process, if any, used by the organization to review this Form 990.	11a	~	
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	12a	~	
b C	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe on Schedule O how this was done</i> .	12b	•	
13	Did the organization have a written whistleblower policy?	12c 13	v v	
14	Did the organization have a written document retention and destruction policy?	14	•	~
15	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 b	The organization's CEO, Executive Director, or top management official	15a 15b	~	~
16a	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taughta antity during the upper			
b	with a taxable entity during the year?	16a		
	organization's exempt status with respect to such arrangements?	16b		
	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed <u>CA, OR, SC, WA</u> Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990- (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	T (sec	tion {	501(c

- 19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, address, and telephone number of the person who possesses the organization's books and records. Brad Nahill, (800)215-0378

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

				(0	C)					
(A)	(B)				ition			(D)	(E)	(F)
(A) Name and title						e than o		Reportable	Reportable	Estimated amount
Name and title						is both or/trust		compensation	compensation	of other
	per week				-	1	· · ·	from the	from related	compensation
	(list any hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	nplo	Former	organization (W-2/ 1099-MISC/	organizations (W-2/ 1099-MISC/	from the organization and
	related	dua ecto	ltio	4	du	st c	₽,	1099-NEC)	1099-NEC)	related organizations
	organizations below	r tr	nal t		loye	mp				
	dotted line)	stee	rust		ð	Dens				
			ee			Highest compensated employee				
Brad Nahill	40.00									
President		~		~	~	~		69,498	0	0
Jose Urteaga	1.00									
Secretary		~		~				0	0	0
Dan Berman	1.00									
Treasurer		~		~				0	0	0
Maureen Cunningham	1.00									
Director		~						0	0	0
Sheridan Samano	1.00									
Director		~						0	0	0
Hector Barrios-Garrido	1.00									
Director		~						0	0	0
Cristina Garcia	1.00									
Director		~						0	0	0
		-								
		-								
		-								
		-								
							-			
	+									
	!					!		ļ	!	

Part	VII Section A. Officers, Directors,	Trustees,	Key I	Em	ploy	yee	s, an	d ⊦	lighest Compe	ensated Emp	oyees	(conti	nued)
	(A) Name and title	(B) Average hours per week	box,	unles	Pos neck s pe d a d	rson	e than o is both or/trust	an ee)	(D) Reportable compensation from the	(E) Reportable compensation from related		(F) ated am of other opensat	
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W- 1099-MISC/ 1099-NEC)	2/ 1 orga	rom the nization organiz	and
			-										
			-										
			-										
			-										
			-										
			-										
			-										
1b c d	Subtotal . Total from continuation sheets to Part Total (add lines 1b and 1c) .					 - ·	•		69,498		0		0
2	Total number of individuals (including reportable compensation from the organi							ted	69,498 above) who re 0		0 than \$	100,0	0000
3	Did the organization list any former of employee on line 1a? If "Yes," complete							•				Yes	No V
4	For any individual listed on line 1a, is the organization and related organizations	e sum of re greater th	portal an \$ ⁻	ble 150,	con 000	npei)? <i>[</i>	nsatio f "Yes	n a s,"	nd other compe complete Schee	nsation from th	ne 🔽		
5	individual	or accrue co	ompe	nsa	tion	fro	m any	' un	related organiza				
Sect	on B. Independent Contractors		Joinpi	010	001	iout					5		
1	Complete this table for your five high compensation from the organization. Rep												
	(A) Name and business add	Iress							(B) Description of serv	vices	(C Comper		
None													

2	Total number of independent contractors (including but not limited to those listed above) who	
	received more than \$100,000 of compensation from the organization	

Part VIII Statement of Revenue

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

		<u>.</u>		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts,	1a	Federated campaigns 1a	0				Sections 312-314
un.	b	Membership dues 1b	0				
Đ ể	С	Fundraising events 1c	0				
ifts ar A	d	Related organizations 1d	0				
nila Gi	е	Government grants (contributions) 1e	0				
Sir	f	All other contributions, gifts, grants,					
Contributions, Gifts, Grants, and Other Similar Amounts		and similar amounts not included above 1f	527,681				
o <u>t</u>	g	Noncash contributions included in lines 1a-1f.					
on and		- 9					
0	h	Total. Add lines 1a-1f		527,681			
e)	00	Concernation to un	Business Code	147.075	147.075	0	
Program Service Revenue	2a b	Conservation tours	541700	147,075	147,075	0	0
jram Ser Revenue	D D						
rer Ver	d						
gra Re	e						
jo	f	All other program service revenue		0	0	0	0
а.	g	Total. Add lines 2a–2f		147,075		•	
	3	Investment income (including dividends		147,073			
		other similar amounts).		26	26	0	0
	4	Income from investment of tax-exempt bo	ond proceeds	0	0	0	0
	5	Royalties		347	0	0	347
		(i) Real	(ii) Personal				
	6a	Gross rents 6a 0	0				
	b	Less: rental expenses 6b 0	0				
	С	Rental income or (loss) 6c 0	0				
	d	Net rental income or (loss)		0	0	0	0
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets					
		other than inventory 7a					
ne	b	Less: cost or other basis					
Revenue		and sales expenses . 7b					
Be	C	Gain or (loss) 7c 0	0				
7	d	Net gain or (loss)					
Othe	8a	Gross income from fundraising events (not including \$ 0					
•		of contributions reported on line					
		1c). See Part IV, line 18 8a					
	b	Less: direct expenses 8b					
	c	Net income or (loss) from fundraising eve	nts				
	9a	Gross income from gaming	_				
		activities. See Part IV, line 19 . 9a					
	b	Less: direct expenses 9b					
	С	Net income or (loss) from gaming activitie	es				
	10a	,					
		returns and allowances 10a	3,316				
	b	Less: cost of goods sold 10b	691				
	С	Net income or (loss) from sales of invento		2,625	0	0	2,625
sn			Business Code				
neo ue	11a						<u> </u>
scellaneo Revenue	b						
Sce.	C b						
Miscellaneous Revenue	d	All other revenue	L				
	е 12	Total. Add lines 11a–11d . . Total revenue. See instructions . .		677 754	1/7 101	0	2.072
	14			677,754	147,101	0	2,972

Section	t IX Statement of Functional Expenses on 501(c)(3) and 501(c)(4) organizations must complete	ete all columns. All d	other organizations r	nust complete colun	nn (A).
	Check if Schedule O contains a response	or note to any line	in this Part IX		· · · · · · ·
	ot include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	92,787	92,787	3	
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	291,950	291,950		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0 69,498	0 69,498		
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0		
7	Other salaries and wages	29,713	29,713		
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0	0		
9	Other employee benefits	5,311	5,311		
10	Payroll taxes	20,095	20,095		
11	Fees for services (nonemployees):	20,070	20,070		
a	Management	0	0		
b		0	0		
		0	0		
С А		-			
d		0	0		
e	Professional fundraising services. See Part IV, line 17	0	_		(
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	0	0		
		30,042	30,042		
12	Advertising and promotion	3,474	3,474		
13	Office expenses	6,032	6,032		
14	Information technology	0	0		
15	Royalties	0	0		
16	Occupancy	0	0		
17	Travel	16,043	16,043		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0	0		
19	Conferences, conventions, and meetings .	2,144	2,144		
20	Interest	0	0		
21	Payments to affiliates	0	0		
22	Depreciation, depletion, and amortization .	0	0		
23	Insurance	3,694	3,694		
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	Tour payments	87,512	87,512	0	(
b	Marahant face	9,077	9,077	0	(
c		3,555	3,555	0	
d	Fundraising Bank charges	2,858	3,555	2,858	(
	Bank charges		-	2,838	
е 25	All other expenses	4,319	4,319		
25 26	Total functional expenses. Add lines 1 through 24e 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)	678,104	675,246	2,858	(

Form 990 (2022)

	n 990 (2				Page 11
Ρ	art X				_
		Check if Schedule O contains a response or note to any line in this Pa	(A) Beginning of year		
	1	Cash-non-interest-bearing	93,374	1	92,294
	2	Savings and temporary cash investments	0	2	0
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	0
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	6	controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	5	0
6	7	Notes and loans receivable, net	0	6 7	0
Assets	7		0	8	0
Ass	8	Inventories for sale or use	0	0 9	0
	9 10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a	0	9	0
	b	Less: accumulated depreciation	0	10c	
	11	Investments – publicly traded securities	0		0
	12	Investments – other securities. See Part IV, line 11	0		0
	13	Investments – program-related. See Part IV, line 11	0		0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 33)	93,374	16	92,294
	17	Accounts payable and accrued expenses	0	17	0
	18	Grants payable	0	18	0
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	0
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
ab		controlled entity or family member of any of these persons	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24 25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X	0	24	0
		of Schedule D	0	25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
seou		Organizations that follow FASB ASC 958, check here v and complete lines 27, 28, 32, and 33.			-
ılar	27	Net assets without donor restrictions	93,374	27	92,294
ñ	28	Net assets with donor restrictions	0	28	0
Fund Balances		Organizations that do not follow FASB ASC 958, check here D and complete lines 29 through 33.			
Net Assets or	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds		31	
∍t ⊿	32	Total net assets or fund balances	93,374	32	92,294
ž	33	Total liabilities and net assets/fund balances	93,374	33	92,294

Form **990** (2022)

 Accounting method used to prepare the Form 990: ✓ Cash Accrual Other Other. If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Beparate basis Ocnosolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?	67 678 9: 9:	7,754 8,104 -350 3,374 0 0 0 -730 0 2,294
1 Total revenue (must equal Part VIII, column (A), line 12) 1 1 2 Total expenses (must equal Part IX, column (A), line 25) 2 3 3 Revenue less expenses. Subtract line 2 from line 1 3 4 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 5 5 Net unrealized gains (losses) on investments 5 6 6 Donated services and use of facilities 6 7 7 8 Prior period adjustments 7 8 9 Other changes in net assets or fund balances (explain on Schedule O) 9 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 9 10 22, column (B) Check if Schedule O contains a response or note to any line in this Part XII 10 Part XII Financial Statements and Reporting Other 10 1 Accounting method used to prepare the Form 990: [C Cash	67 678 9: 9:	8,104 -350 3,374 0 0 0 -730 0 2,294
2 Total expenses (must equal Part IX, column (Å), line 25) 2 3 Revenue less expenses. Subtract line 2 from line 1 3 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (Å)) 4 5 Net unrealized gains (losses) on investments 5 6 Donated services and use of facilities 6 7 Investment expenses 7 8 Prior period adjustments 7 9 0 0 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	671 9: 	8,104 -350 3,374 0 0 -730 0 2,294
3 Revenue less expenses. Subtract line 2 from line 1 3 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 5 Net unrealized gains (losses) on investments 5 6 Donated services and use of facilities 5 7 Investment expenses 6 7 Investment expenses 7 8 Prior period adjustments 8 9 Other changes in net assets or fund balances (explain on Schedule O) 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 PartXIII Financial Statements and Reporting 10 Check if Schedule O contains a response or note to any line in this Part XII 1 1 Accounting method used to prepare the Form 990: ☑ Cash ☐ Accrual ☐ Other 11 If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a If "Yes," check a box below to indica	9:	-350 3,374 0 0 -730 0 2,294
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 5 Net unrealized gains (losses) on investments 5 6 Donated services and use of facilities 6 7 Investment expenses 7 8 Prior period adjustments 8 9 Other changes in net assets or fund balances (explain on Schedule O) 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 10 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII Intervention of Schedule O. Schedule O. 2 I Accounting method used to prepare the Form 990: I Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a Vere the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial	9:	3,374 0 0 -730 0 2,294
5 Net unrealized gains (losses) on investments 5 6 Donated services and use of facilities 6 7 Investment expenses 7 8 Prior period adjustments 7 9 Other changes in net assets or fund balances (explain on Schedule O) 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 9 20 Check if Schedule O contains a response or note to any line in this Part XII 10 Part XII Financial Statements and Reporting 10 Check if Schedule O contains a response or note to any line in this Part XII 10 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 10 Part XII Financial Statements and Reporting 0 If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: 2a If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b	9:	0 0 -730 0 2,294
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 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 9 10 PartXII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 10 PartXII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 10 PartXII Financial Statements compiled or note to any line in this Part XII 20 1 Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a 16 "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: 2a If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b If "Yes," check a box below to indicate whether the financial stat		0 0 -730 0 2,294
7 Investment expenses 7 8 Prior period adjustments 7 9 Other changes in net assets or fund balances (explain on Schedule O) 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)) 9 10 PartXII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 10 PartXII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 10 1 Accounting method used to prepare the Form 990: Cash Accrual Other 1 the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: 2b Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? 2b If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate		0 -730 0 2,294
 8 Prior period adjustments		-730 0 2,294
9 Other changes in net assets or fund balances (explain on Schedule O). 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)). 10 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990: Cash Accrual Other 1 Accounting method used to prepare the Form 990: Cash Accrual Other 1 Accounting method used to prepare the Form 990: Cash Accrual Other 1 ft the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. 2a 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: 2b If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b		0 2,294
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32, column (B)) 10 Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 1 Accounting method used to prepare the Form 990: Cash 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 If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: 2a Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant? 2b If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b		
Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII		
Check if Schedule O contains a response or note to any line in this Part XII		
 Accounting method used to prepare the Form 990: ☑ Cash ☐ Accrual ☐ Other	• •	
 Accounting method used to prepare the Form 990: ☑ Cash ☐ Accrual ☐ Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Beparate basis ☐ Consolidated basis ☐ Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant?	V	_
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? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: 2a b Were the organization's financial statements audited by an independent accountant?	Yes	No
Schedule O. 2a Were the organization's financial statements compiled or reviewed by an independent accountant?		
 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant?		
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Image: Separate basis is is is in the separate basis is is is is is in the separate basis is is is is is in the separate basis is is is is is in the separate basis is is is is independent accountant? Image: Separate basis is		~
 reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 		~
 Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 		
b Were the organization's financial statements audited by an independent accountant? 2b If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: 2b		
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:		~
separate basis, consolidated basis, or both:		-
Separate basis Consolidated basis Both consolidated and separate basis		
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of		
the audit, review, or compilation of its financial statements and selection of an independent accountant? . 2c		
If the organization changed either its oversight process or selection process during the tax year, explain on		
Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the		
Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		~
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		
required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits . 3b		

Form **990** (2022)

SCHE	DULE	A
(Form	990)	

Public Charity Status and Public Support

OMB No. 1545-0047

Open to Public

Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

Name of the organization

Employer identification number

81-4325149

SEE TURTLES

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)
- 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 An organization that normally receives (1) more than 33¹/₃% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33¹/₃% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - **a Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B.
 - **b** Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C.
 - c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.
 - d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations . . .

g Provide the following information about the supported organization(s)

	about the supp	jertea erganization(e)				
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part IISupport Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under
Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
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)						
6	Public support. Subtract line 5 from line 4						
	on B. Total Support		1		1	1	
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc					12	
13	First 5 years. If the Form 990 is for the organization, check this box and stop he on C. Computation of Public Support	re				ear as a sectio	
<u>3ecu</u> 14	Public support percentage for 2022 (line 6	-		11 column (f))		14	%
14	Public support percentage from 2022 (inter Public support percentage from 2021 Sch					15	<u> </u>
16a	33 ¹ / ₃ % support test—2022. If the organization qua	ization did not	check the box	k on line 13, ai	nd line 14 is 3	3 ¹ /3% or more,	check this
b	331 /3% support test—2021. If the organi this box and stop here . The organization						
17a	10%-facts-and-circumstances test - 20 10% or more, and if the organization m Part VI how the organization meets the organization	eets the facts facts	-and-circumst umstances tes	ances test, ch	eck this box a zation qualifies	and stop here.	Explain in
b	10%-facts-and-circumstances test — 20 15 is 10% or more, and if the organizatio in Part VI how the organization meets the organization	on meets the fa e facts-and-cir	acts-and-circu	mstances test,	, check this bo	ox and stop he	re . Explain
18	Private foundation. If the organization of instructions						x and see

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.)

Secti	on A. Public Support			, picaco oo		,	
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and membership fees						
-	received. (Do not include any "unusual grants.")	207,655	176,271	159,967	373,967	527,681	1,445,541
2 3	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 Gross receipts from activities that are not an	115,767	136,874	47,559	106,895	100,928	508,023
3	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 7a	Total. Add lines 1 through 5Amounts included on lines 1, 2, and 3received from disqualified persons	323,422	313,145	207,526	480,862	628,609	1,953,564
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
с 8	Add lines 7a and 7b						1,953,564
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	323,422	313,145	207,526	480,862	628,609	1,953,564
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.	619	440	188	1,233	26	2,506
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975				.,		
С	Add lines 10a and 10b	619	440	188	1,233	26	2,506
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 gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
44	and 12.)	324,041	313,585	207,714	482,095	628,635	1,956,070
14	First 5 years. If the Form 990 is for the organization, check this box and stop here	•		, third, tourth,	•		
Secti	on C. Computation of Public Suppor						<u> </u>
15	Public support percentage for 2022 (line 8	•		13, column (f))		15	99.87 %
16	Public support percentage from 2021 Sch	nedule A, Part I	II, line 15 .			16	0 %
	on D. Computation of Investment In		-				
17	Investment income percentage for 2022 (I			-		17	0.13 %
18	Investment income percentage from 2021					18	0 %
19a	$33^{1}/_{3}\%$ support tests – 2022. If the organization 17 is not more than $33^{1}/_{3}\%$, check this box						
b	33 ¹ / ₃ % support tests – 2021. If the organiz line 18 is not more than 33 ¹ / ₃ %, check this b	ation did not cl	neck a box on	line 14 or line 1	9a, and line 16	is more than 3	3 ¹ /3%, and
20	Private foundation. If the organization di	-	-	-			
						Schedule A	(Form 990) 2022

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Yes No

1

2

3a

3b

3c

4a

4b

4c

5a

5b 5c

6

7

8

9a

9b

9c

10a

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.

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 organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's
- income or assets at all times during the tax year? If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard.

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- **a** The organization satisfied the Activities Test. Complete **line 2** below.
- **b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
- c 🗌 The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions).
- 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 No

1

2

1

3

2a

2b

3a

3b

Yes No

Yes No

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			ions A through E.
Sect	ion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C-Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
-	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	allv i	ntegrated Type III suppo	rting organization

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization 7 (see instructions).

Schedule A (Form 990) 2022

Schedu	le A (Form 990) 2022			Page 7
Part	V Type III Non-Functionally Integrated 509(a)(3	B) Supporting Organi	zations (continued)	
Sect	on D-Distributions			Current Year
1	Amounts paid to supported organizations to accomplish e		1	
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	orted	
	organizations, in excess of income from activity	2		
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	inizations 3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required-	•	· · · · · · · · · · · · · · · · · · ·	
	Other distributions (describe in Part VI). See instructions.		6	
7 8	Total annual distributions. Add lines 1 through 6.	h the everesimetics is use	7	
0	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	in the organization is res	8 sponsive	
9	Distributable amount for 2022 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	
Sect	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required — <i>explain in Part VI</i>). See instructions.			
3	Excess distributions carryover, if any, to 2022			
а	From 2017			
b	From 2018			
C	From 2019			
d	From 2020			
e	From 2021			
f	Total of lines 3a through 3e			
<u> </u>	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2022 distributable amount			
i	Carryover from 2017 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2022 distributable amount			
C	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in</i> Part VI . See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2018			
b	Excess from 2019			
С	Excess from 2020			
d	Excess from 2021			
e	Excess from 2022			

Schedule A (Form 990) 2022

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

SCHEDULE	F
(Form 990)	

Statement of Activities Outside the United States

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

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

Department of the Treasury Internal Revenue Service Name of the organization

SEE TURTLES

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

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

Activities per Region. (The fo (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
(1) North America (including Canad	0	1	Grantmaking		48,050
(2) Central America and the Caribb	0	0	Grantmaking		95,250
(3) South America	0	0	Grantmaking		14,000
(4) Sub-Saharan Africa	0	0	Grantmaking		23,500
(5) East Asia and the Pacific	0	0	Grantmaking		109,100
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal					
sheets to Part I					000.000
c Totals (add lines 3a and 3b)	0	1			289,900

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

OMB No. 1545-0047

2022

Open to Public

Inspection

Employer identification number

81-4325149

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)
(1)			Sub-Saharan Africa	Sea turtle conservatio	5,500	0	0		
(2)			Central America and	Sea turtle conservatio	10,000	0	0		
(3)			Central America and	Sea turtle conservatio	27,500	0	0		
(4)			Central America and	Sea turtle conservatio	31,650	0	0		
(5)			North America (inclu	Sea turtle conservatio	15,800	0	0		
(6)			North America (inclu	Sea turtle conservatio	15,000	0	0		
(7)			South America	Sea turtle conservatio	12,500	0	0		
(8)			East Asia and the Pa	Sea turtle conservatio	7,000	0	0		
(9)			East Asia and the Pa	Sea turtle conservatio	10,000	0	0		
10)			East Asia and the Pa	Sea turtle conservatio	10,000	0	0		
11)			East Asia and the Pa	Sea turtle conservatio	6,600	0	0		
12)			East Asia and the Pa	Sea turtle conservatio	10,000	0	0		
(13)			East Asia and the Pa	Sea turtle conservatio	45,000	0	0		
14)									
15)									
(16)	F				· · ·				
2	exempt 501(c	c)(3) organizatio	n by the IRS, or for v	sted above that are r which the grantee or c	ounsel has provid	led a section 501(c)(3	B) equivalency letter	🕨	13
3	Enter total nu	mber of other o	organizations or entit	ties					37

Schedule F (Form 990) 2022

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash	(f) Amount of noncash	(g) Description of noncash assistance	(h) Method of
		recipients	cash grant	casn disbursement	assistance	of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
0)							
1)							
2)							
3)							
4)							
5)		_					
6)							
7)							
8)							

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.

Schedule F (Form 990) 2022

Page	4
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Part	V Foreign Forms		
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 Instructions for Form 926)	☐ Yes	🖌 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 Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	☑ 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 Instructions for Form 5471)	☐ Yes	🖌 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? <i>If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)</i>	Yes	🖌 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 Instructions for Form 8865)	Ves	🖌 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 Instructions for Form 5713; don't file with Form 990).	Yes	🖌 No

Schedule F (Form 990) 2022

Part V Supplemental Information

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

Schedule F, Part I, Line 2 - Part I Line 2 The organization requires g rantees to fill out annual applications and reports with information on
activities conducted with funds. All grantees are checked against the OFAC sanctions list, site visits are performed when possible, and a
group of expert advisors provide input on grantees.

SCHEDULE I Grants and Other Assistance to Organizations, Form 990) Governments, and Individuals in the United States							1545-0047) 22				
Depar	tment of the Treasury al Revenue Service		с			Form 990.	, Part IV, line 21 or 2	2.		Open t	o Public ection
	of the organization			00107	ww.iis.gov/i oriiiss	o for the latest line			Emplover i	identification num	
	TURTLES								p.ojo.	81-4325149	
		Information	on Grants and	Assistance						01 4020147	
1	Does the organ	nization mainta		stantiate the amou				for the grants or as			No
2			0		the use of grant fu						
Pai	t II Grants a	and Other As	ssistance to Do	mestic Organiz	ations and Don	nestic Governm	ents. Complete	if the organization space is needed.		ered "Yes" on	Form 990
1 (a) Name and address or governme	0	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description on noncash assistar		(h) Purpose or assista	
(1)	Sch I, Stmt 1										
(2)											
(3)											
(4)											
(5)											
(6)											
(8)											
(9)											
(10)											

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

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

Schedule I (Form 990) 2022

Part III	rt III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.					
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1						
2						
3						
4						
5						
6						
7						
Part IV	Supplemental Information. Provid	de the information r	equired in Part I, li	ne 2; Part III, colum	n (b); and any other addit	ional information.
Schedule I	, Part I, Line 2 - Part I Line 2 The organization	on requires annual app	lications and reports	on activities done with	grant funds. Site visits are pe	erformed where possible and expert
advisors a	re consulted for feedback.					

Schedule I (Form 990) 2022

Schedule I, Part IV, Statem	ient 1		5	SEE TURTLES
Form: Schedule I (2022)			EI	N: 81-4325149
Page: 1				Part II, Line 1
Desc	ription of Grants and Other Assistance to Governments and C	Organizations in the United	States	
		Recipient EIN	Amt. of cash grant	Amt. of non- cash asst.
Name and address	Amigos of Costa Rica PO Box 748 West Chester, PA 19380	31-1714653	13,200	C
IRC code section	3			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Sea turtle conservation			
Name and address	Sea Turtle Conservancy 481 NW 6th St Suite A Gainesville, FL 32609	59-6156069	24,000	
IRC code section				
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Sea turtle conservation			
Name and address	Ocean Foundation 1320 19th St NW Suite 500 Washington, DC 20036	71-0863908	6,200	
IRC code section				
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Sea turtle conservation			
Name and address	Protective Turtle Ecology Center for Training Outreach 11065 Campus St Griggs Hall Loma Linda, CA 92350	20-8314246	10,000	
IRC code section	· · · · · · · · · · · · · · · · · · ·			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Sea turtle conservation			

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

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

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service
Name of the organization

		•	
SEE	TURTI	ES	

Employer identification number
81-4325149

Part	Types of Property		I	I				
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o noncash con			
1	Art-Works of art							
2	Art-Historical treasures							
3	Art-Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities-Publicly traded							
10	Securities-Closely held stock .							
11	Securities – Partnership, LLC, or trust interests							
12	Securities-Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate-Residential							
16	Real estate – Commercial							
17	Real estate – Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens				-			
24	Archeological artifacts				-			
25	Other (<u>cyrptocurrency</u>		49	107,341	FMV			
26	Other ()		,				
27	Other (1						
28	Other (-			
29	Number of Forms 8283 received which the organization completed				29			
							Yes	No
30a	During the year, did the organiza 28, that it must hold for at least 3	years from	the date of the initial contr	ibution, and which isn't rec	quired to be			
	used for exempt purposes for the		ing period?			30a		~
b	If "Yes," describe the arrangement							
31	Does the organization have a contributions?			es the review of any n	onstandard	31	~	
32a	Does the organization hire or us	e third part	ties or related organization	is to solicit, process, or se	ell noncash			

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

32a

~

Schedule M (F	Form 990) 2022 Page 2
Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether
	the organization is reporting in Part I, column (b), the number of contributions, the number of items received,
	or a combination of both. Also complete this part for any additional information.
Schedule N	A, Part I, Line 32b - Part I Line 32b Cryptocurrency donations were made through third party platforms such as The Giving Block,
	t, and Engiven. These companies process the donation and immediate sale of the crypto so that the organization receives cash
	ot hold the cryptocurrency.

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

20 22				
Open to Public				
Inspection				

Department of the Treasury	Attach to Form 990 or Form 990-EZ.	Open to Public
Internal Revenue Service	Go to www.irs.gov/Form990 for the latest information.	Inspection
Name of the organization		Employer identification number
SEE TURTLES		81-4325149
Form 990, Part VI, Sec	tion B, Line 11b - A draft of the Form 990 is provided via email to all board members	for review and comment prior to
filing with the IRS.		
Form 990, Part VI, Sectosasis.	tion B, Line 12c - Board members review and confirm compliance with the conflict o	of interest policy on an annual
	tion B, Line 15 - The organization determines compensation of the Executive Direct	
	tions that are similarly sized, in the same state, and have similar missions. The con	npensation is reviewed and
approved by the board	l.	
	tion C, Line 19 - The organization makes its governing documents, conflict of intere upon request. Governing documents are also available on the organization's websi .org/board.	
Form 990, Part IX, Line	e 11g - App development: 7,437 Subcontractors: 19,297 Media outreach: 468 Tax co	nsulting 2,440

Cat. No. 51056K

Schedule O, Statement 1

Form: Form 990 (2022)

Page: 1

Activity Or Mission Description

Part I, Line 1

Description

community-based conservation efforts. Our programs provide funding, resources, and tools to protect endangered sea turtle species in the Global South.

			SEE TURTLES		
			81-4325149		
Page: 2			Pa	rt III, Line 4d	
	Other Program Services Accomplishments				
Activity Code	Description	Expense	Grants	Revenue	
	Sea Turtles & Plastic: provides support for coastal communities to remove plastic waste from sea turtle habitat.	67,904	54,200	66,727	
	General programs: includes educational efforts to teach people about how to protect sea turtles	121,665	13,186	105,054	
	Sea Turtle Inclusivity Fund: support for disadvantaged communities to participate in turtle conservation.	13,713	12,150	103	
Total:		203,282	79,536	171,884	