

Return of Organization Exempt From Income Tax

Form 990

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

2023

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.

Open to Public Inspection

A For the 2023 calendar year, or tax year beginning and ending

B Check if applicable: C Name of organization: PARKS CALIFORNIA D Employer identification number: 83-1523594 E Telephone number: 877-455-9290 G Gross receipts \$: 26,800,533. H(a) Is this a group return for subordinates? H(b) Are all subordinates included? I Tax-exempt status: J Website: WWW.PARKSCALIFORNIA.ORG K Form of organization: L Year of formation: 2018 M State of legal domicile: CA

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1 Briefly describe the organization's mission... TO HELP STRENGTHEN PARKS. 2 Check this box... 3 Number of voting members... 4 Number of independent voting members... 5 Total number of individuals employed... 6 Total number of volunteers... 7a Total unrelated business revenue... 7b Net unrelated business taxable income... 8 Contributions and grants... 9 Program service revenue... 10 Investment income... 11 Other revenue... 12 Total revenue... 13 Grants and similar amounts paid... 14 Benefits paid to or for members... 15 Salaries, other compensation... 16a Professional fundraising fees... 16b Total fundraising expenses... 17 Other expenses... 18 Total expenses... 19 Revenue less expenses... 20 Total assets... 21 Total liabilities... 22 Net assets or fund balances...

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of officer HEANA CHUNG, VP OF OPERATIONS & FINANCE Date: Preparer: JENNIFER Z IWATA Date: 08/07/24 PTIN: P01310188 Firm's name: GILBERT CPAS Firm's EIN: 68-0037990 Firm's address: 2880 GATEWAY OAKS DR, STE 100 SACRAMENTO, CA 95833 Phone no.: 916-646-6464

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes [] No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: AS CALIFORNIA STATE PARKS' STATUTORY NON-PROFIT PARTNER, WE HAVE A CLEAR MISSION - TO HELP STRENGTHEN PARKS AND INSPIRE ALL PEOPLE TO EXPERIENCE THESE EXTRAORDINARY PLACES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

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 \$ 5,670,801. including grants of \$ 2,150,882.) (Revenue \$ 1,034,419.)

ACCESS & BELONGING: EVERYONE DESERVES TO EXPERIENCE NATURE AND TO FEEL A CONNECTION TO PLACE. AT PARKS CALIFORNIA, WE BELIEVE THAT A CONNECTION TO NATURE IS FUNDAMENTAL TO OUR WELL-BEING. PHYSICAL, MENTAL & EMOTIONAL HEALTH AS WELL AS THE HEALTH OF OUR COMMUNITIES ALL IMPROVE DRASTICALLY WHEN WE CAN ACCESS AND INTERACT WITH NATURAL ECOSYSTEMS AND CAN FEEL A SENSE OF BELONGING WITHIN OUR ENVIRONMENT. IN 2023 PARKS CALIFORNIA DEEPENED OUR COMMITMENT TO ENSURING ACCESS TO PARKS BY EXPANDING OPPORTUNITIES IN RURAL AND URBAN PARKS AND WORKING TO FACILITATE PEOPLE-TO-PARK CONNECTIONS THAT WOULD NOT HAVE OTHERWISE BEEN POSSIBLE.

PROGRAM SERVICE ACCOMPLISHMENTS CONTINUED ON SCHEDULE O.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 5,670,801.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
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>		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c 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>		X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>		X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	X	

Note: All Form 990 filers are required to complete Schedule O

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee reporting, tax returns, foreign accounts, and charitable contributions.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
1b	Enter the number of voting members included on line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
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?		X
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	X	
8b	Each committee with authority to act on behalf of the governing body?		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
11b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
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?		
15a	The organization's CEO, Executive Director, or top management official	X	
15b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed CA
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 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
MEREDITH WADE - 877-455-9290
400 CAPITOL MALL SUITE 900, SACRAMENTO, CA 95814

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) KINDLEY WALSH LAWLOR BOARD DIRECTOR, PRESIDENT & CEO	40.00	X		X				247,024.	0.	9,021.
(2) HEANA CHUNG VICE PRESIDENT OF OPERATIONS & FINAN	40.00			X				188,625.	0.	19,960.
(3) GEOFF KISH VICE PRESIDENT OF PROGRAMS	40.00				X			169,516.	0.	8,317.
(4) MICHAEL BRIDGES DIRECTOR OF DEVELOPMENT, INDIVIDUALS	40.00					X		121,052.	0.	39,491.
(5) MYRIAN SOLIS CORONEL DIRECTOR OF COMMUNITY ENGAGEMENT	40.00					X		137,795.	0.	19,339.
(6) SCOTT KLEIN DIRECTOR OF DEVELOPMENT, CORPORATION	40.00					X		133,183.	0.	6,749.
(7) WILL FOURT BIG BASIN SR. PROJECT MANAGER	40.00					X		125,750.	0.	13,890.
(8) MEREDITH WADE FINANCE MANAGER	40.00					X		107,990.	0.	13,053.
(9) STEPHEN LOCKHART BOARD DIRECTOR - CHAIR	1.00	X						0.	0.	0.
(10) DEANNA MACKEY BOARD DIRECTOR - VICE CHAIR	1.00	X						0.	0.	0.
(11) TONY LILLIOS BOARD DIRECTOR - SECRETARY	1.00	X		X				0.	0.	0.
(12) JOSE GONZALEZ BOARD DIRECTOR - TREASURER	1.00	X		X				0.	0.	0.
(13) ROSIE CLAYBURN BOARD DIRECTOR	1.00	X						0.	0.	0.
(14) MICHAEL MANTELL BOARD DIRECTOR	1.00	X						0.	0.	0.
(15) DAWN ORTIZ-LEGG BOARD DIRECTOR	1.00	X						0.	0.	0.
(16) MICHAEL CAMUNEZ BOARD DIRECTOR	1.00	X						0.	0.	0.

Part VIII Statement of Revenue

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c						
	d Related organizations	1d						
	e Government grants (contributions)	1e	20,545,909.					
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	4,900,833.					
	g Noncash contributions included in lines 1a-1f	1g	\$					
	h Total. Add lines 1a-1f			25,446,742.				
Program Service Revenue	2 a CONTRACT REVENUE	Business Code	900009	1,031,855.	1,031,855.			
	b							
	c							
	d							
	e							
	f All other program service revenue							
	g Total. Add lines 2a-2f			1,031,855.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			319,372.			319,372.	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6 a Gross rents	6a	(i) Real	(ii) Personal				
	b Less: rental expenses ...	6b						
	c Rental income or (loss)	6c						
	d Net rental income or (loss)							
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	(ii) Other				
	b Less: cost or other basis and sales expenses	7b						
	c Gain or (loss)	7c						
d Net gain or (loss)								
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a							
b Less: direct expenses	8b							
c Net income or (loss) from fundraising events								
9 a Gross income from gaming activities. See Part IV, line 19	9a							
b Less: direct expenses	9b							
c Net income or (loss) from gaming activities								
10 a Gross sales of inventory, less returns and allowances	10a							
b Less: cost of goods sold	10b							
c Net income or (loss) from sales of inventory								
Miscellaneous Revenue	11 a OTHER INCOME	Business Code	900099	2,564.	2,564.			
	b							
	c							
	d All other revenue							
	e Total. Add lines 11a-11d			2,564.				
12 Total revenue. See instructions			26,800,533.	1,034,419.	0.	319,372.		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,150,882.	2,150,882.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	642,463.	443,408.	58,408.	140,647.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,399,760.	965,886.	126,651.	307,223.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	57,588.	39,869.	5,639.	12,080.
9 Other employee benefits	385,209.	266,682.	37,722.	80,805.
10 Payroll taxes	156,168.	108,116.	15,293.	32,759.
11 Fees for services (nonemployees):				
a Management				
b Legal	8,467.	7,925.	283.	259.
c Accounting	32,277.	30,213.	1,077.	987.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	3,049.		3,049.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	1,329,778.	1,244,733.	44,387.	40,658.
12 Advertising and promotion	159,551.	116,667.	6,506.	36,378.
13 Office expenses	69,868.	59,356.	394.	10,118.
14 Information technology	26,597.	24,896.	888.	813.
15 Royalties				
16 Occupancy	63,010.	42,740.	5,037.	15,233.
17 Travel	103,824.	66,525.	8,395.	28,904.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	21,325.	8,500.	12,739.	86.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	23,412.	14,846.	1,921.	6,645.
23 Insurance	11,249.	7,971.	969.	2,309.
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.)				
a SOFTWARE AND HOSTING SE	89,952.	63,270.	6,927.	19,755.
b OTHER EXPENSES	32,872.	8,316.	8,472.	16,084.
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	6,767,301.	5,670,801.	344,757.	751,743.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A)		(B)
		Beginning of year		End of year
Assets	1 Cash - non-interest-bearing	20,128.	1	0.
	2 Savings and temporary cash investments	6,972,674.	2	6,184,109.
	3 Pledges and grants receivable, net	865,750.	3	1,698,326.
	4 Accounts receivable, net	264,068.	4	2,011.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	27,359.	9	20,163.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 51,924.		
	b Less: accumulated depreciation	10b 16,668.	10c	35,256.
	11 Investments - publicly traded securities		11	22,361,369.
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets	41,385.	14	26,595.
	15 Other assets. See Part IV, line 11	20,014.	15	61,414.
16 Total assets. Add lines 1 through 15 (must equal line 33)	8,233,413.	16	30,389,243.	
Liabilities	17 Accounts payable and accrued expenses	322,887.	17	329,706.
	18 Grants payable	80,447.	18	1,185,026.
	19 Deferred revenue	2,954,491.	19	3,774,606.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	20,014.	25	61,469.
	26 Total liabilities. Add lines 17 through 25	3,377,839.	26	5,350,807.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	1,728,696.	27	4,201,056.
	28 Net assets with donor restrictions	3,126,878.	28	20,837,380.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	4,855,574.	32	25,038,436.
33 Total liabilities and net assets/fund balances	8,233,413.	33	30,389,243.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	26,800,533.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6,767,301.
3	Revenue less expenses. Subtract line 2 from line 1	3	20,033,232.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	4,855,574.
5	Net unrealized gains (losses) on investments	5	149,630.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	25,038,436.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? _____ 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
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 audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
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? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
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? _____		X
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 _____		

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		8,968,938.	1,378,564.	2,826,771.	25,446,742.	38,621,015.
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 ...					5,136.	5,136.
4 Total. Add lines 1 through 3		8,968,938.	1,378,564.	2,826,771.	25,451,878.	38,626,151.
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)						5,851,617.
6 Public support. Subtract line 5 from line 4.						32,774,534.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4		8,968,938.	1,378,564.	2,826,771.	25,451,878.	38,626,151.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources ...		5,120.	2,292.	87,387.	319,372.	414,171.
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.)				5,052.	2,564.	7,616.
11 Total support. Add lines 7 through 10						39,047,938.
12 Gross receipts from related activities, etc. (see instructions)					12	2,426,765.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	83.93 %
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2023. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2022. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
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).		
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.		
1		
2		
3		

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 <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> 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.		Yes	No
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.			
2a			
2b			
3a			
3b			

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

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2023

Name of the organization

PARKS CALIFORNIA

Employer identification number

83-1523594

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

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

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

Schedule B (Form 990) (2023)

Name of organization PARKS CALIFORNIA	Employer identification number 83-1523594
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ <u>20,545,909.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ <u>2,952,453.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ <u>1,023,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization PARKS CALIFORNIA	Employer identification number 83-1523594
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization PARKS CALIFORNIA	Employer identification number 83-1523594
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization PARKS CALIFORNIA Employer identification number 83-1523594

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, number of easements, acreage, and expenses, and two yes/no questions about monitoring and reporting.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include reporting requirements for art and historical treasures, and amounts required to be reported.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment _____ %
 - c Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|--------|----|
| (i) Unrelated organizations? | 3a(i) | |
| (ii) Related organizations? | 3a(ii) | |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		51,924.	16,668.	35,256.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				35,256.

Part VII Investments - Other Securities

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

Part IX Other Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) OPERATING LEASE LIABILITY	61,469.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	61,469.

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

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization **PARKS CALIFORNIA** Employer identification number **83-1523594**

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
ACTA NON VERBA: YOUTH URBAN FARM PROJECT - 1001 83RD AVE, MAILBOX #1 - OAKLAND, CA 94621	45-0935667	501 C(3)	27,420.	0.			2023 ADVENTURE PASS GRANT
ADVENTURE RISK CHALLENGE PO BOX 3208 TRUCKEE, CA 96160	47-1579462	501 C(3)	45,000.	0.			2023-2024 ROUTE TO PARKS GRANT
AMAH MUTSUN LAND TRUST 2460 17TH AVENUE #1019 SANTA CRUZ, CA 95062	32-0447436	501 C(3)	36,728.	0.			CAREER PATHWAYS GRANT PROGRAM
BIPOC SUPPORT FOUNDATION 1507 E. VALLEY PARKWAY ESCONDIDO, CA 92027	85-2617598	501 C(3)	34,903.	0.			2023-2024 ROUTE TO PARKS GRANT
CALIFORNIA OUTDOOR RECREATION FOUNDATION - 21122 LOCKHAVEN CIR - HUNTINGTON BEACH, CA 92646	85-2611681	501 C(3)	27,816.	0.			2023 ADVENTURE PASS GRANT
CALIFORNIA STATE PARKS, DEPARTMENT OF PARKS AND RECREATION - P.O. BOX 942896 - SACRAMENTO, CA 94296	68-0303606	GOVERNMENT	19,000.	15,779.	FAIR MARKET VALUE	SUPPLIES AND EQUIPMENT	SUPPORT TO CA STATE PARKS FOR CLIMATE LITERACY TRAINING AND CLIMATE CHANGE CURRICULUM /

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **55.**

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

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

Schedule I (Form 990) 2023

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTRAL COAST STATE PARKS ASSOCIATION - 202 TANK FARM ROAD, SUITE H2 - SAN LUIS OBISPO, CA 93401	51-0198869	501 C(3)	30,000.	0.			2023 ADVENTURE PASS GRANT
CHINO HILLS STATE PARK INTERPRETIVE ASSOCIATION - 245 VERBENA LANE - BREA, CA 92823	33-0542316	501 C(3)	22,500.	0.			2023 ADVENTURE PASS GRANT
CITY HEIGHTS COMMUNITY DEVELOPMENT CORPORATION - 4001 EL CAJON BLVD - SAN DIEGO, CA 92105	95-3661177	501 C(3)	40,000.	0.			2023-2024 ROUTE TO PARKS GRANT
CITY OF DREAMS P.O. BOX 24037 SAN FRANCISCO, CA 94124	20-0719899	501 C(3)	35,000.	0.			2023-2024 ROUTE TO PARKS GRANT
CITY SURF PROJECT 400 TREAT AVE., UNIT G SAN FRANCISCO, CA 94110	47-2091985	501 C(3)	40,000.	0.			PARKS CA CANDLESTICK ACTIVITIES GRANT
COLOR THE OUTDOORS CORP 523 E 17 STREET OAKLAND, CA 94606	88-3190281	501 C(3)	30,000.	0.			2023-2024 ROUTE TO PARKS GRANT
COMMUNITY BRIDGES 519 MAIN STREET WATSONVILLE, CA 95076	94-2460211	501 C(3)	14,000.	0.			BIG BASIN GRANT
COMPUTER USING EDUCATORS AKA CUE 877 YGNACIO VALLEY RD. WALNUT CREEK, CA 94596	77-0175780	501 C(3)	171,000.	0.			TO SUPPORT PASSPORTS 2.0
CRYSTAL COVE CONSERVANCY #5 CRYSTAL COVE NEWPORT COAST, CA 92657	33-0878633	501 C(3)	56,000.	0.			CAREER PATHWAYS GRANT PROGRAM

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DISABLED HIKERS 171 CAMPBELL ST FORKS, WA 98331	85-4055270	501 C(3)	8,000.	0.			BIG BASIN GRANT
EARTH DISCOVERY INSTITUTE 120 NORTH PARK DRIVE EL CAJON, CA 92021	26-2288903	501 C(3)	35,000.	0.			2023-2024 ROUTE TO PARKS GRANT
EXPLORING NEW HORIZONS OUTDOOR SCHOOLS (ENH) - PO BOX 1514 - FELTON, CA 95018	94-2618650	501 C(3)	40,000.	0.			2023-2024 ROUTE TO PARKS GRANT
FERNANDENO TATAVIAM BAND OF MISSION INDIANS - 1019 SECOND STREET - SAN FERNANDO, CA 91340	38-3735313	NA	35,000.	0.			2023-2024 ROUTE TO PARKS GRANT
FRIENDS OF SANTA CRUZ STATE PARKS 1543 PACIFIC AVENUE, #206 SANTA CRUZ, CA 95060	51-0183410	501 C(3)	7,992.	0.			BIG BASIN GRANT
GOLDEN GATE NATIONAL PARKS CONSERVANCY AKA GGNPC - FORT MASON - SAN FRANCISCO, CA 94123	94-2781708	501 C(3)	52,283.	0.			TO SUPPORT DATA MANAGEMENT TRAININGS
GROWERS FIRST INC. PO BOX 4227 LAGUNA BEACH, CA 92652	38-3674832	501 C(3)	42,000.	0.			2023-2024 ROUTE TO PARKS GRANT
HOMEBOY INDUSTRIES 130 BRUNO ST LOS ANGELES, CA 90012	95-4800735	501 C(3)	35,000.	0.			2023-2024 ROUTE TO PARKS GRANT
LATINO OUTDOORS (COMMUNITY INITIATIVES) - 1000 BROADWAY - OAKLAND, CA 94607	94-3255070	501 C(3)	10,936.	0.			BIG BASIN GRANT

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOS ANGELES CONSERVATION CORPS P.O. BOX 861658 LOS ANGELES, CA 90086-1658	33-0878633	501 C(3)	30,000.	0.			CAREER PATHWAYS GRANT PROGRAM
LOWELL COMMUNITY DEVELOPMENT CORPORATION - 1749 L STREET - FRESNO, CA 93701	45-0961157	501 C(3)	68,400.	0.			2023 ADVENTURE PASS GRANT
MEWATER FOUNDATION 4018 PACHECO STREET SAN FRANCISCO, CA 94116	47-4924647	501 C(3)	53,974.	0.			2023 ADVENTURE PASS GRANT
MOUNTAIN PARKS FOUNDATION 525 N BIG TREES PARK ROAD FELTON, CA 95018	23-7275572	501 C(3)	32,265.	0.			BIG BASIN GRANT
NATURE FOR ALL 201 W. GARVEY AVE., STE. 102-503 MONTEREY PARK, CA 91754	83-1265253	501 C(3)	30,000.	0.			2023 ADVENTURE PASS GRANT
OAKLAND UNIFIED SCHOOL DISTRICT 1000 BROADWAY, SUITE 300 OAKLAND, CA 94607	94-6000385	GOVERNMENT	33,284.	0.			2023 ADVENTURE PASS GRANT
OCCIDENTAL ARTS & ECOLOGY CENTER 15290 COLEMAN VALLEY RD OCCIDENTAL, CA 95465	68-0359676	501 C(3)	30,000.	0.			CAREER PATHWAYS GRANT PROGRAM
OCEANO COMMUNITY SERVICES DISTRICT PO BOX 599 OCEANO, CA 93475	95-3639481	GOVERNMENT	15,904.	0.			2023-2024 ROUTE TO PARKS GRANT
ORANGE COUNTY COASTKEEPER 3151 AIRWAY AVE. COSTA MESA, CA 92626	33-0847892	501 C(3)	30,000.	0.			2023-2024 ROUTE TO PARKS GRANT

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PACIFIC GROVE MUSEUM OF NATURAL HISTORY - 165 FOREST AVENUE - PACIFIC GROVE, CA 93950	32-0268455	501 C(3)	15,521.	0.			2023-2024 ROUTE TO PARKS GRANT
PLACER SHERIFF'S ACTIVITIES LEAGUE PO BOX 1592 LOOMIS, CA 95650	80-0841816	501 C(3)	42,000.	0.			2023-2024 ROUTE TO PARKS GRANT
READI MINISTRIES INTERNATIONAL 2565 POST ST SAN FRANCISCO, CA 94115	81-2038215	501 C(3)	10,000.	0.			PARKS CA CANDLESTICK ACTIVITIES GRANT
REAL OPTIONS FOR CITY KIDS (R.O.C.K.) - 73 LELAND AVE - SAN FRANCISCO, CA 94134	94-3212617	501 C(3)	34,751.	0.			2023-2024 ROUTE TO PARKS GRANT
SACRED PLACES INSTITUTE FOR INDIGENOUS PEOPLES (SIERRA HEALTH FOUNDATION) - 1321 GARDEN HIGHWAY - SACRAMENTO, CA 95833	45-5282243	501 C(3)	35,000.	0.			2023-2024 ROUTE TO PARKS GRANT
SAN JOAQUIN JOINT POWERS AUTHORITY 949 EAST CHANNEL STREET STOCKTON, CA 95202	47-4601205	GOVERNMENT	33,034.	0.			2023-2024 ROUTE TO PARKS GRANT
SAN JOAQUIN RIVER PARKWAY AND CONSERVATION TRUST - 11605 OLD FRIANT RD - FRESNO, CA 93730	77-0196692	501 C(3)	73,644.	0.			2023 ADVENTURE PASS GRANT
SAN MATEO COUNTY LIBRARIES 125 LESSINGIA COURT SAN MATEO, CA 94402	83-1472500	GOVERNMENT	30,000.	0.			2023 ADVENTURE PASS GRANT
SANTA MONICA MOUNTAINS FUND 401 W HILLCREST DRIVE THOUSAND OAKS, CA 91360	95-4187832	501 C(3)	105,000.	0.			TO SUPPORT ACCESSIBLE AND INCLUSIVE OUTDOOR EDUCATION PROJECT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAVE CALIFORNIA SALMON P.O. BOX 1111 ARCATA, CA 95518	88-1650309	501 C(3)	30,000.	0.			2023 ADVENTURE PASS GRANT
SAVE THE REDWOODS LEAGUE 111 SUTTER ST SAN FRANCISCO, CA 94104	94-0843915	501 C(3)	55,807.	0.			BIG BASIN GRANT
SAVED BY NATURE 2772 JOSEPH AVE #4 CAMPBELL, CA 95008	94-3177095	501 C(3)	8,000.	0.			BIG BASIN GRANT
SIERRA CLUB FOUNDATION 2605 ADOBE CANYON RD KENWOOD, CA 95452	94-6069890	501 C(3)	11,000.	0.			GRANT TO SUPPORT FAMILY CAMPING WITH INSPIRING CONNECTIONS OUTDOORS
SIERRA INSTITUTE FOR COMMUNITY AND ENVIRONMENT - PO BOX 11 - TAYLORSVILLE, CA 95983	91-1818166	501 C(3)	30,000.	0.			CAREER PATHWAYS GRANT PROGRAM
SIERRA STATE PARKS FOUNDATION PO BOX 28 TAHOE CITY, CA 96145	94-2539013	501 C(3)	21,325.	0.			2023-2024 ROUTE TO PARKS GRANT
SONOMA ECOLOGY CENTER 1019 2ND ST SAN FERNANDO, CA 91340	94-3136500	501 C(3)	28,650.	0.			2023-2024 ROUTE TO PARKS GRANT
THE STEWARDSHIP NETWORK 416 LONGSHORE DR. ANN ARBOR, MI 48105	56-2471470	501 C(3)	88,650.	0.			TO SUPPORT CAPACITY BUILDING FOR LANDSCAPE-SCALE PARTNERSHIPS IN
TREEPEOPLE 12601 MULHOLLAND DR. BEVERLY HILLS, CA 90210	23-7314838	501 C(3)	35,000.	0.			2023-2024 ROUTE TO PARKS GRANT

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TUOLUMNE RIVER PRESERVATION TRUST PO BOX 3727 SONORA, CA 95370	94-2834151	501 C(3)	40,000.	0.			2023-2024 ROUTE TO PARKS GRANT
UNITED AMERICAN INDIAN INVOLVEMENT, INC. - 1125 W 6TH ST, STE 103 - LOS ANGELES, CA 90017	95-2917933	501 C(3)	21,852.	0.			2023-2024 ROUTE TO PARKS GRANT
VENTANA WILDLIFE SOCIETY 9699 BLUE LARKSPUR LANE MONTEREY, CA 93940	94-2795935	501 C(3)	39,584.	0.			2023-2024 ROUTE TO PARKS GRANT
WATERSIDE WORKSHOPS 84 BOLIVAR DRIVE BERKELEY, CA 94710	26-0200654	501 C(3)	32,000.	0.			2023-2024 ROUTE TO PARKS GRANT
WEST HILLS COMMUNITY COLLEGE DISTRICT - 275 PHELPS AVE. - COALINGA, CA 93210	77-0323447	GOVERNMENT	35,000.	0.			2023-2024 ROUTE TO PARKS GRANT

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

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

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

PART I, LINE 2:

A GRANT APPLICATION FORM IS USED FOR ANY INTERESTED ENTITIES SEEKING ASSISTANCE CONSISTENT WITH THE INTENT OF GRANT AWARDS SOLICITATION. IF ANY APPLICATIONS WERE SELECTED FOR GRANT AWARDS, THEN THE APPLICANT SIGNS A CONTRACT WITH SPECIFIC TERMS AND CONDITIONS TO ENSURE THE GRANTEE FULFILLS ITS OBLIGATIONS AS OUTLINED IN THE GRANT APPLICATION SOLICITATION AND DESCRIBED IN THEIR PROPOSAL. REGULAR REPORTING, CHECK-IN CALLS OR ONSITE VISITS ARE METHODS USED FOR ENSURING GRANT MONIES ARE UTILIZED FOR INTENDED PURPOSE.

Part IV Supplemental Information

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT:

CALIFORNIA STATE PARKS, DEPARTMENT OF PARKS AND RECREATION

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT TO CA STATE PARKS FOR CLIMATE LITERACY TRAINING AND CLIMATE CHANGE CURRICULUM / GENERAL SUPPORT TO CA STATE PARKS

NAME OF ORGANIZATION OR GOVERNMENT: THE STEWARDSHIP NETWORK

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT CAPACITY BUILDING FOR LANDSCAPE-SCALE PARTNERSHIPS IN CALIFORNIA

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

PARKS CALIFORNIA

Employer identification number

83-1523594

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

- b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain
- 2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2023

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) KINDLEY WALSH LAWLOR BOARD DIRECTOR, PRESIDENT & CEO	(i)	247,024.	0.	0.	7,449.	1,572.	256,045.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) HEANA CHUNG VICE PRESIDENT OF OPERATIONS & FINAN	(i)	188,625.	0.	0.	9,431.	10,529.	208,585.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) GEOFF KISH VICE PRESIDENT OF PROGRAMS	(i)	169,516.	0.	0.	8,317.	0.	177,833.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MICHAEL BRIDGES DIRECTOR OF DEVELOPMENT, INDIVIDUALS	(i)	121,052.	0.	0.	6,850.	32,641.	160,543.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) MYRIAN SOLIS CORONEL DIRECTOR OF COMMUNITY ENGAGEMENT	(i)	137,795.	0.	0.	7,125.	12,214.	157,134.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

PARKS CALIFORNIA

Employer identification number

83-1523594

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

TO HELP CLOSE NATURE-EQUITY GAPS, WE ARE WORKING TO CONNECT PEOPLE TO NATURE AND CONNECT COMMUNITIES TO PARKS BY IDENTIFYING AND ADDRESSING BARRIERS THAT HAVE KEPT THEM FROM EXPERIENCING FIRSTHAND OUR TREASURED NATURAL AND CULTURAL RESOURCES. PROJECTS INCLUDE BUT ARE NOT LIMITED TO SCHOOL FIELD TRIP - PASSPORT, ADVENTURE PASS GRANT, ROUTE TO PARKS GRANT, AND COMMUNITY ENGAGEMENT - URBAN PARKS PROGRAMMING & LOW-COST ACCOMMODATION STUDY, ARTS IN CALIFORNIA PARKS (NEW MULTI-YEAR GRANTS PROGRAM), AND UNTOLD STORIES/INCLUSIVE HISTORY (SHARING THE FULL BREADTH OF PAST, AND CONNECTING PARK SITES TO THE CURRENT WORLD OF VISITORS).

CLIMATE & STEWARDSHIP:

INNATELY, NATURE HAS ESSENTIAL WORTH. AT PARKS CALIFORNIA, WE BELIEVE THAT FUNDAMENTAL TO OUR PLANETARY HEALTH ARE INTACT AND FLOURISHING NATURAL ECOSYSTEMS. HOME TO THE LARGEST AND MOST DIVERSE STATE PARK SYSTEM IN THE COUNTRY, CALIFORNIA'S PARKS HAVE 1.6 MILLION ACRES, 340 MILES OF COASTLINE, 970 MILES OF LAKE AND RIVER FRONTAGE, AND 4,500 MILES OF TRAILS. STATE PARKS PROTECT CRITICAL ECOSYSTEMS THAT PROVIDE GLOBAL SIGNIFICANCE FAR BEYOND THE PARK BOUNDARIES, BUT YET OUR PARKS FACE CHALLENGES FROM CLIMATE IMPACTS AND INCREASED VISITATION. THAT IS WHY, WITH CALIFORNIA STATE PARKS WE ARE BRINGING TOGETHER COMMUNITIES AND PARTNERS FROM ACROSS THE STATE, TO ACCELERATE AND SCALE EFFORTS TO TAKE ON THE CONSERVATION AND CLIMATE CHALLENGES FACING OUR VALUED LANDSCAPES. PROJECTS INCLUDE BUT ARE NOT LIMITED TO LANDSCAPE

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

Schedule O (Form 990) 2023

Name of the organization

PARKS CALIFORNIA

Employer identification number

83-1523594

STEWARDSHIP, CLIMATE FELLOWSHIP, AND INNOVATING TOOLS & TRAINING (SUCH AS VISITOR USE MANAGEMENT TOOLKIT AND EARLY DETECTION RAPID RESPONSE).

PARKS FOR THE FUTURE:

THE HEALTH OF CALIFORNIA'S PARKS BENEFIT FROM COLLABORATIVE STEWARDSHIP AND COMMUNITY CONNECTIONS. PARKS CALIFORNIA IS BASED ON A NEW AND MORE SUSTAINABLE MODEL FOR PUBLIC-PRIVATE PARTNERSHIP. TOGETHER, WE ENSURE PROTECTED LANDS REMAIN RESILIENT WHILE MEETING THE EVOLVING NEEDS OF ALL PEOPLE. PARKS FOR THE FUTURE TAKE ON MULTIPLE MEANINGS. IT SPEAKS TO OUR NEED FOR PARKS NOW AND INTO THE FUTURE, HOW WE STEWARD THESE PLACES TO ENSURE THEIR AND OUR SURVIVAL, AND OF OUR NEED TO INNOVATE TO ENSURE PARKS REMAIN RELEVANT AND ACCESSIBLE FOR FUTURE GENERATIONS. PROJECTS INCLUDE BUT ARE NOT LIMITED TO REIMAGINING BIG BASIN, NONPROFIT PARTNER STUDY, VIRTUAL ADVENTURE APP, AND OUTERSPATIAL APP, AND CAREER PATHWAYS GRANT.

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

THERE IS NO SUCH COMMITTEE WITH THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY.

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

AUDIT COMMITTEE WILL REVIEW THE FORM 990 BEFORE IT IS FILED WITH THE IRS.

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

THE CONFLICT OF INTEREST POLICY IS MONITORED AND ENFORCED. WHILE THE CONFLICT OF INTEREST POLICY IS APPLIED TO PARKS CALIFORNIA STAFF, IT IS APPLIED TO THE BOARD WITH GREATER SCRUTINY. VP OF OPERATIONS & FINANCE MONITORS THE BOARD ACTIVITIES AND BRINGS THOSE ACTIVITIES THAT FALL WITHIN

Name of the organization PARKS CALIFORNIA	Employer identification number 83-1523594
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THE CONFLICTS COVERED BY THE POLICY TO THE ATTENTION OF THOSE BOARD MEMBERS ENGAGED IN THE ACTIVITIES AND DISCUSS IF THE CONFLICTS EXIST. IF CONFLICTS EXIST THEN THE RESOLUTION PROCEDURES OUTLINED IN THE POLICY DOCUMENT ARE FOLLOWED.

FORM 990, PART VI, SECTION B, LINE 15:

DURING THE EXECUTIVE SESSION OF THE BOARD MEETING, THE BOARD REVIEWED THE PRESIDENT & CEO'S JOB PERFORMANCE AND APPROVED TO ADJUST THE COMPENSATION. THE PRESIDENT AND CEO LAST REVIEWED IN 2022.

BOARD APPROVED A COMPENSATION ADJUSTMENT WITH A MAXIMUM CAP TO NOT EXCEED. BASED ON THE OUTCOME OF THE ANNUAL PERFORMANCE REVIEW PROCESS, COMPENSATIONS WERE ADJUSTED. THE VP OF OPERATIONS AND FINANCE AND VP PROGRAMS WAS LAST REVIEWED IN 2022.

FORM 990, PART VI, SECTION C, LINE 18:

A PUBLIC DISCLOSURE 990 FORM WILL BE MADE AVAILABLE ON THE PARKS CALIFORNIA WEBSITE. THE 1023 FORM WILL BE AVAILABLE UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19:

THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC.

FORM 990, PART IX, LINE 11G, OTHER FEES:

OTHER PROFESSIONAL SERVICES:

PROGRAM SERVICE EXPENSES	1,244,733.
MANAGEMENT AND GENERAL EXPENSES	44,387.
FUNDRAISING EXPENSES	40,658.

Name of the organization PARKS CALIFORNIA	Employer identification number 83-1523594
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TOTAL EXPENSES	1,329,778.
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TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,329,778.
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FORM 990, PART XII, LINE 2C:

THE ORGANIZATION HAS AN AUDIT COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE FINANCIAL STATEMENT AUDIT, AND THIS PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.