Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) Type or print **ECOLIFE CONSERVATION** 20-0147505 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filing your 2810 PIO PICO DRIVE return. See instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. CARLSBAD, CA 92008 Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Is For Code Code Form 990 or Form 990-EZ 01 Form 1041-A 80 Form 4720 (individual) Form 4720 (other than individual) 09 03 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 Form 990-T (corporation) THE ORGANIZATION The books are in the care of ► 2810 PIO PICO DRIVE - CARLSBAD, CA 92008 Telephone No. \triangleright 760-740-1346 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box 🕨 💹 . If it is for part of the group, check this box ▶ 🧾 and attach a list with the names and TINs of all members the extension is for. NOVEMBER 15, 2023, to file the exempt organization return for I request an automatic 6-month extension of time until the organization named above. The extension is for the organization's return for: ► X calendar year 2022 or tax year beginning , and ending If the tax year entered in line 1 is for less than 12 months, check reason: Initial return L Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За **b** If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

using EFTPS (Electronic Federal Tax Payment System). See instructions.

estimated tax payments made. Include any prior year overpayment allowed as a credit.

Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by

Form **8868** (Rev. 1-2022)

3b

EXTENDED TO NOVEMBER 15, 2023

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

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	roi tiit	e 2022 calendar year, or tax year beginning ar	na enaing		
В	Check if applicabl	C Name of organization		D Employer identific	cation number
Σ	Addre				
	Name chang	Doing business as		20-01475	05
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone number	,
Г	Final return			760-740-	
	termin	City or town, state or province, country, and ZIP or foreign postal code	_ t	G Gross receipts \$	1,554,196.
Г	Amen			H(a) Is this a group re	
F	□return □Applic □tion			for subordinates	
	tion pendi	SAME AS C ABOVE		1	—
				H(b) Are all subordinates in	
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	⊣ ′	list. See instructions
	Websi			H(c) Group exemption	
		organization: X Corporation Trust Association Other	L Year	of formation: 2003 N	1 State of legal domicile: CA
P	art I	Summary			
0	1	Briefly describe the organization's mission or most significant activities: ${f AT}$	ECOLIF	E CONSERVATION	ON, OUR
ŭ		MISSION IS TO PROTECT WILDLIFE, NATURAL	RESOUR	RCES, AND TH	E PEOPLE
rra		Check this box if the organization discontinued its operations or dis			
Š	3			3	12
ၓ	1	Number of independent voting members of the governing body (Part VI, line 1k		·····	
∞ ∞					11
ţį	1	Total number of individuals employed in calendar year 2022 (Part V, line 2a)		·····	9
Activities & Governance		Total number of volunteers (estimate if necessary)			0.
Ac		Total unrelated business revenue from Part VIII, column (C), line 12			
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
<u>o</u>			_	Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		1,299,671.	1,210,016.
Revenue	9	Program service revenue (Part VIII, line 2g)		52,558.	60,264.
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		14.	-16,763.
—		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		232,901.	73,803.
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12		1,585,144.	1,327,320.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		459,259.	0.
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
"	1	Solarios other compensation employee benefits (Dort IV, column (A), lines 5.1	0)	413,510.	588,090.
Se	160	Drofossional fundraising foss (Dart IV. solumn (A), line 11s)	°,	68,328.	0.
Expenses	lua	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 167,	251	0075201	J •
Ä	1.5			433,591.	1,113,508.
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,374,688.	1,701,598.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			
. 0	19	Revenue less expenses. Subtract line 18 from line 12		210,456.	-374,278.
Net Assets or Fund Balances			Be	eginning of Current Year	End of Year
set	20	Total assets (Part X, line 16)		687,052.	410,256.
APE	21	Total liabilities (Part X, line 26)		61,503.	113,608.
		Net assets or fund balances. Subtract line 21 from line 20		625,549.	296,648.
P	art II	Signature Block			
Und	ler pena	lties of perjury, I declare that I have examined this return, including accompanying sched	ules and staten	nents, and to the best of my	knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of	which prepare	r has any knowledge.	
		(1)		11/14/2	023
Sig	n	Signature of officer		Date	
He		WILLIAM TOONE, TREASURER			
	•	Type or print name and title			
_		Print/Type preparer's name Preparer's signature		Date Check	I PTIN
Pai	d	CURT JENSON CURT JENSON		11/11/22	
			-		6-5577902
	parer			Firm's EIN 4	0-3311304
USE	Only	Firm's address 550 HOWE AVENUE, SUITE 210			16) 564 0505
		SACRAMENTO, CA 95825		Phone no. (9	16) 564-8727
Ма	y the II	RS discuss this return with the preparer shown above? See instructions			X Yes No

Par	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
•	OUR MISSION IS TO PROTECT WILDLIFE, NATURAL RESOURCES, AND THE PEOPLE
	WHO DEPEND ON THEM. WE WORK AT THE INTERSECTIONS OF HUMANS AND
	WILDLIFE IN MEXICO, UGANDA, AND THE US. BY PROVIDING COMMUNITIES WITH
	HEALTH-CONSCIOUS, ENVIRONMENTALLY FRIENDLY METHODS OF FOOD PRODUCTION
2	
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	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	3, 3, 3, 1, 3,
4	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
40	revenue, if any, for each program service reported. (Code:) (Expenses \$ 1,271,193. including grants of \$) (Revenue \$ 60,268.)
4a	(Code:) (Expenses \$
	THAT COMBINE AQUACULTURE (RAISING AQUATIC ANIMALS) AND HYDROPONICS
	(CULTIVATING PLANTS IN WATER WITH ADDED NUTRIENTS) TO COMMUNITIES IN
	NEED USING A THREE-TIERED APPROACH: 1) EDUCATION AND INSPIRATION VIA
	THE ECO-CYCLE, 2) LEARNING PRODUCTION AND WORKSHOPS VIA THE AQUAPONICS
	INNOVATION CENTER, AND 3) EMPOWERING COMMUNITIES AND FAMILIES TO GROW
	ON THEIR OWN, VIA COMMUNITY SYSTEMS. AQUAPONICS SYSTEMS ALLOW USERS TO
	GROW PRODUCE WITH 90% LESS LAND AND WATER WHILE ELIMINATING POLLUTION
	FROM AGRICULTURAL RUNOFF, REDUCING HABITAT DESTRUCTION, AND ELIMINATING
	CHEMICAL POLLUTION AND PESTICIDES.
	CHEMICAL FOLLOTION AND FESTICIDES:
	COMMUNITY BASED CONSERVATION: THE PROGRAM HELPS PEOPLE AND NATURE
416	
4b	(Code:) (Expenses \$
4c	(Out) \(\sum_{\text{instant}} \) \(\lambda \)
4C	(Code:) (Expenses \$
A -1	Other and mark considers (Describe on Cahedrile O.)
4d	Other program services (Describe on Schedule O.)
_	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses 1,271,193.
4e	Total program service expenses 1,2/1,193. Form 990 (2022)
22000	SEE SCHEDULE O FOR CONTINUATION(S)

11171114 791892 ECI

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 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? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4		Х
5	during the tax year? If "Yes," complete Schedule C, Part II Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4		25
3	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	-		
0	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	Ha		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	0		 -
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u> </u>		<u> </u>
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

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Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
u	"Yes," complete Schedule L, Part IV	28a		х
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?			
·	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
00	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
02		32		x
33	Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	- 55		
57	Part V, line 1	34	х	
35.5		35a	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	- JJa		
b	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	300		
00	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			<u></u>
0,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			 -
	Note: All Form 990 filers are required to complete Schedule O	38	х	
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
		_	000	

232004 12-13-22 Form **990** (2022)

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

			Yes	No				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return 2a 11							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х					
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X				
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b						
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a							
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X				
b	If "Yes," enter the name of the foreign country							
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			37				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X				
_	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с						
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	٥-		Х				
	any contributions that were not tax deductible as charitable contributions?	6a						
D	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	Ch						
7	were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	70		Х				
a	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		21				
b	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	76						
С	to file Form 8282?	7c		Х				
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	70						
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		X				
g g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g						
h								
_	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
	sponsoring organization have excess business holdings at any time during the year?							
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter:							
а	Initiation fees and capital contributions included on Part VIII, line 12							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities							
11	Section 501(c)(12) organizations. Enter:							
а	Gross income from members or shareholders							
b	Gross income from other sources. (Do not net amounts due or paid to other sources against							
	amounts due or received from them.)							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40						
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
b	Note: See the instructions for additional information the organization must report on Schedule O.							
Ь	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans							
_	organization is licensed to issue qualified health plans Enter the amount of reserves on hand 13b 13c							
с 14а	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or							
	excess parachute payment(s) during the year?	15		х				
	If "Yes," see the instructions and file Form 4720, Schedule N.							
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х				
	If "Yes," complete Form 4720, Schedule O.							
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities							
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17						
	If "Yes," complete Form 6069.							

Form **990** (2022) 232005 12-13-22

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					X				
Sec	tion 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	1a	12							
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.									
b	Enter the number of voting members included on line 1a, above, who are independent	1b	11							
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?		Г	2		Х				
3	Did the organization delegate control over management duties customarily performed by or under the	e direct supervision	Γ							
	of officers, directors, trustees, or key employees to a management company or other person?			3		Х				
4										
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?	Г	5		X				
6	Did the organization have members or stockholders?		Г	6		Х				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap		Γ							
	more members of the governing body?		L	7a		X				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s		Γ							
	persons other than the governing body?		L	7b		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	r by the following:								
а	The governing body?			8a	Х					
b	Each committee with authority to act on behalf of the governing body?		[8b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rear		Γ							
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue Code.)								
					Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х				
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters, affiliates,								
	and branches to ensure their operations are consistent with the organization's exempt purposes?		L	10b						
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ before filing the form	n?	11a	Х					
b	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		L	12a	Х					
b	$Were \ officers, \ directors, \ or \ trustees, \ and \ key \ employees \ required \ to \ disclose \ annually \ interests \ that \ could \ give \ rise$	to conflicts?	L	12b	X					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes	es," describe								
	on Schedule O how this was done		L	12c	X					
13	Did the organization have a written whistleblower policy?		L	13	X					
14	Did the organization have a written document retention and destruction policy?		L	14	X					
15	Did the process for determining compensation of the following persons include a review and approva									
	$persons, comparability\ data, and\ contemporaneous\ substantiation\ of\ the\ deliberation\ and\ decision?$									
а	The organization's CEO, Executive Director, or top management official			15a	Х					
b	Other officers or key employees of the organization		L	15b	X					
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent with a								
	taxable entity during the year?		L	16a		X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	ization's								
	exempt status with respect to such arrangements?			16b						
<u>Sec</u>	tion 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	nd 990-T (section 501	(c)(3)s	only)) availa	able				
	for public inspection. Indicate how you made these available. Check all that apply.									
		on Schedule O)								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	nflict of interest polic	y, and	finar	ncial					
	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 bounded THE ORGANIZATION $-\ 760-740-1346$	oks and records								
	2810 PIO PICO DRIVE, CARLSBAD, CA 92008									

Form **990** (2022)

ECI____1

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.

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

- 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.

(A)	(B)			((Pos	C) ition	tion		(D) Reportable	(E)	(F)
Name and title	Average hours per week	box	do not check more than one ox, unless person is both an fficer and a director/trustee)				h an	compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	pataster (W-2		Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) ANNE MIDDLETON	40.00			x				02 402	0.	_
(2) WILLIAM TOONE	30.00			^				93,402.	0.	0.
TREASURER	30.00	x		x				90,001.	0.	0.
(3) RICARDO CERVANTES	0.50							30,0021		
TRUSTEE		Х						0.	0.	0.
(4) ELEANOR MUSICK	0.50									
TRUSTEE		Х						0.	0.	0.
(5) JOSEPH ORNDORFF	0.50									
TRUSTEE	0.50	Х						0.	0.	0.
(6) STEPHEN W. SHULTZ TRUSTEE	0.50	x						0.	0.	0.
(7) DARYL B. WILLIAMS	0.50							0.	0.	0.
TRUSTEE		x						0.	0.	0.
(8) FRED WOLLMAN	0.50									
CFO		Х		Х				0.	0.	0.
(9) A.J. VAN DE VEN	0.50			l						
CHAIR/SECRETARY	0 50	Х		Х				0.	0.	0.
(10) PAUL BERNSTEIN TRUSTEE	0.50	X						0.	0.	0.
(11) JESSE EISNER	0.50	^						0.	0.	•
TRUSTEE		x						0.	0.	0.
(12) ERIN GREY	0.50								-	
ASSISTANT CHAIR		Х		Х				0.	0.	0.
(13) TAYLOR HOLLAND	0.50									
TRUSTEE		Х						0.	0.	0.
		1								
		1								
		1		l		1				

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week	age Position (do not check more than one box, unless person is both an		(D) (E) Reportable Reportable compensation compensation from from related		(F) Estimated amount of other		t of				
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensati		ation ne ition ited
1b Subtotal								183,403.	0	•		0.
c Total from continuation sheets to Part V								0.	0			0.
d Total (add lines 1b and 1c) Total number of individuals (including but in the companies time from the companies time.								183,403. eceived more than \$100	0,000 of reportable	•		0.
compensation from the organization 3 Did the organization list any former officer	director truct	00.1	(0) (mn	lovo		r bio	shoot companyated omr	olovos on		Yes	_
line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the s	such individual									3		X
and related organizations greater than \$15 Did any person listed on line 1a receive or	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J f	for such individual		4		X
rendered to the organization? If "Yes," con	nplete Schedul	e J f	or st	ıch	pers	son .				5		X
Section B. Independent Contractors 1 Complete this table for your five highest co									· · · · · · · · · · · · · · · · · · ·	sation	from	
the organization. Report compensation for (A) Name and business	,		enai ONI		vitn	or w	itnir	the organization's tax (B) Description of s		(Compe	C) ensatio	 on
				<u> </u>				·				
							\perp					
Total number of independent contractors (\$100,000 of compensation from the organ		ot lii	mite	a to		se lis	sted	a above) who received n	nore tnan	F	999	(0000)
200000 40 40 00										⊢orm	シラひ	(2022)

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Га	IL VII		w line in this Dort VIII			
		Check if Schedule O contains a response or note to ar	iy iine in this Part VIII	(B)	(C)	(D)
			Total revenue	Related or exempt function revenue	Unrelated	Revenuè éxcluded from tax under
S S		- L				sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts		Federated campaigns 1a				
اع ق		Membership dues 1b 1c 179,87	5			
rts,		•				
nig.		Related organizations 1d				
Sir		Government grants (contributions) All other contributions, gifts, grants, and				
her	'	similar amounts not included above 1f 1,030,14	1.			
호텔	a	Noncash contributions included in lines 1a-1f				
and	_	Total. Add lines 1a-1f	1,210,016.			
		Business Co				
ę,	2 a	MONARCH MEXICO TRIP IN 90009	9 60,264.	60,264.		
Program Service Revenue	b	· · · · · · · · · · · · · · · · · · ·		· ·		
Sel	C					
eve	d					
ogr	е					
₫	f	All other program service revenue				
	g	Total. Add lines 2a-2f	60,264.			
	3	Investment income (including dividends, interest, and				
		other similar amounts)	30.			30.
	4	Income from investment of tax-exempt bond proceeds				
	5	Royalties				
		(i) Real (ii) Person	al			
		Gross rents 6a				
		Less: rental expenses 6b				
		Rental income or (loss) 6c				
		Net rental income or (loss)				
	<i>i</i> a					
	h	assets other than inventory Less: cost or other basis				
e e	b	and sales expenses				
er Revenue	c	Gain or (loss) 7c -16, 793.				
Re		Net gain or (loss)	-16,793.			-16,793.
je		Gross income from fundraising events (not				,
₹		including \$ 179,875. of				
		contributions reported on line 1c). See				
		Part IV, line 18	9.			
	b	Less: direct expenses 8b 63,65				
	С	Net income or (loss) from fundraising events	73,799.			73,799.
	9 a	Gross income from gaming activities. See				
		Part IV, line 19 9a				
		Less: direct expenses				
		Net income or (loss) from gaming activities				
	10 a	Gross sales of inventory, less returns	_			
		and allowances 10a 56,47 Less: cost of goods sold 10b 146,43	3.			
				-89,958.		
-	С	Net income or (loss) from sales of inventory Business Co		05,950.		
snc	11 ^	EMPLOYEE RETENSION CRE 90009		89,962.		
nec	II a		5 05,502.	05,502.	 	
ella el	C					
Miscellaneous Revenue		All other revenue				
2		Total. Add lines 11a-11d	89,962.			
	12	Total revenue. See instructions	1,327,320.		0.	57,036.

232009 12-13-22

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).

	ion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respon			, , ,	X
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
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,	400 400	440 445	25 256	
	trustees, and key employees	183,403.	119,145.	35,376.	28,882
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	250 254	222 522	60 445	56 684
7	Other salaries and wages	359,874.	233,788.	69,415.	56,671
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	44 012	20 112	0 644	7 057
10	Payroll taxes	44,813.	29,112.	8,644.	7,057
11	Fees for services (nonemployees):				
а	Management				
b	Legal	F2 22F	20 (20	15 677	0 010
С	Accounting	53,235.	28,639.	15,677.	8,919
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	905		905	
f	Investment management fees	895.		895.	
g	Other. (If line 11g amount exceeds 10% of line 25,	220 500	126 027	71 015	10 057
	column (A), amount, list line 11g expenses on Sch O.)	239,509. 5,668.	126,837. 3,578.	71,815.	40,857. 790.
12	Advertising and promotion	24,452.	14,928.	6,441.	3,083
13	Office expenses	24,452.	14,520.	0,441.	3,003
14	Information technology				
15	Royalties	75,858.	47,032.	18,206.	10,620
16	Occupancy	38,870.	36,631.	1,596.	643
17	Travel	30,070.	30,031.	1,390.	045
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	6,907.	6,907.		
19	Conferences, conventions, and meetings	0,301•	0,901•		
20	Interest Payments to offiliates				
21	Payments to affiliates	16,745.		16,745.	
22 23	Depreciation, depletion, and amortization	54,974.	34,084.	13,194.	7,696
	Other expenses. Itemize expenses not covered	34,3740	34,004.	13,134.	7,000
24	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A),				
а	amount, list line 24e expenses on Schedule 0.) PROGRAM EXPENSES	585,579.	585,579.		
a b	DUES AND SUBSCRIPTIONS	6,401.	3,297.	1,160.	1,944
C	CLIENT RELATIONS	2,815.	897.	1,829.	89
d	SUPPLIES	1,043.	182.	861.	
-	All other expenses	557.	557.		
25	Total functional expenses. Add lines 1 through 24e	1,701,598.	1,271,193.	263,154.	167,251
26	Joint costs. Complete this line only if the organization	, ==,==	, -,	, =	,=3=
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	n 12-13-22				Form 990 (2022

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or	note to a	ny line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	245,525.	1	139,169		
	2	Savings and temporary cash investments			100,023.	2	10,035
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net		4	13,027		
	5	Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su					
		controlled entity or family member of any of t		5			
	6	Loans and other receivables from other disquared					
		under section 4958(f)(1)), and persons descr	ibed in s	ection 4958(c)(3)(B)		6	
t	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			110,165.	8	50,626
Ä	9	Prepaid expenses and deferred charges			548.	9	1,041
	10a	Land, buildings, and equipment: cost or other		1			
		basis. Complete Part VI of Schedule D	10a	98,650.			
	b	Less: accumulated depreciation		1 06 050 1	19,145.	10c	2,400
	11	Investments - publicly traded securities			11		
	12	Investments - other securities. See Part IV, lin	211,646.	12	193,958		
	13	Investments - program-related. See Part IV, li		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must e			687,052.	16	410,256
	17	Accounts payable and accrued expenses			10,816.	17	58,309
	18	Grants payable		18			
	19	Deferred revenue	38,722.	19	45,212		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple				21	
ç	22	Loans and other payables to any current or f					
₽ E		trustee, key employee, creator or founder, su					
Liabilities		controlled entity or family member of any of t				22	
Ë	23	Secured mortgages and notes payable to un		_		23	
	24	Unsecured notes and loans payable to unrel				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on li					
		of Schedule D		,	11,965.	25	10,087
	26	Total liabilities. Add lines 17 through 25			61,503.		113,608
		Organizations that follow FASB ASC 958,					·
Ses		and complete lines 27, 28, 32, and 33.					
au	27	Net assets without donor restrictions			525,549.	27	102,690
Bal	28	Net assets with donor restrictions	100,000.	28	193,958		
pu		Organizations that do not follow FASB AS			•		
Ξ.		and complete lines 29 through 33.	. , .				
ŏ	29	Capital stock or trust principal, or current fur	nds			29	
set	30	Paid-in or capital surplus, or land, building, o				30	
AS	31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			625,549.	32	296,648
_	33	Total liabilities and net assets/fund balances	687,052.	33	410,256		

Pa	rt 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)		1,32		
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,70		
3	Revenue less expenses. Subtract line 2 from line 1	3	-37	•	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	62	5,5	<u>49.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	4	5,3	77.
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	29	6,6	48.
Pa	rt 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: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedul				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X_
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sci	nedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

ECOLUTE CONSERVATION 20 – 0147505

			TLE CONSER				4	0-014/303
Pa	ırt I	Reason for Public	Charity Status.	(All organizations must o	omplete tl	nis part.) S	See instructions.	
The	orgar	nization is not a private found	dation because it is: (For lines 1 through 12, o	heck only	one box.)		
1		A church, convention of ch	urches, or association	on of churches described	d in sectio	n 170(b)(1)(A)(i).	
2		A school described in sect					<i>X X Y</i>	
3	一	A hospital or a cooperative				γьγ1γΔγί	ii)	
4	\Box	A medical research organiz						the hospital's name
7	ш		ation operated in co	njunction with a nospita	described	a iii Sectio	ii iro(b)(i)(A)(iii). Litter	the nospital s hame,
_		city, and state:		Hana au mais anaith s anns a	d au auaaua			i
5		An organization operated for		niege or university owner	or opera	ted by a g	overnmental unit descri	bea in
		section 170(b)(1)(A)(iv).	•					
6	Н	A federal, state, or local go	vernment or governn	nental unit described in	section 17	70(b)(1)(A)	(v).	
7		An organization that norma	ally receives a substa	intial part of its support f	rom a gov	ernmental	unit or from the general	public described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)					
8	Щ	A community trust describe	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)			
9		An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	unction with a land-grant	college
		or university or a non-land-	grant college of agric	ulture (see instructions).	Enter the	name, city	y, and state of the collec	je or
		university:						
10	X	An organization that norma	ally receives (1) more	than 33 1/3% of its sup	port from	contributio	ons, membership fees, a	nd gross receipts from
		activities related to its exen	•	-	-			-
		income and unrelated busin		•	, ,		• •	•
		See section 509(a)(2). (Con		(1000 000 tion of the taxy in	om baome	oooo aoqe	and by the organization	and danced, for c.
11		An organization organized		ively to test for public sa	fety See	section 50	19(a)(4)	
12	H	An organization organized	•	•	•			a nurnoses of one or
12		-	· ·	•	•		· · · · · · · · · · · · · · · · · · ·	
		more publicly supported or						DIRECK THE DOX OH
		lines 12a through 12d that						
a	ı L	☐ Type I. A supporting organization.	· ·	•	•			
		the supported organization			a majority	of the dire	ctors or trustees of the s	supporting
		organization. You must o	-					
k) <u>L</u>	☐ Type II. A supporting org	janization supervised	d or controlled in connec	tion with it	s support	ed organization(s), by ha	aving
		control or management of	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or manage the sup	oported
	_	organization(s). You mus	t complete Part IV,	Sections A and C.				
c	: L	$oldsymbol{ol}}}}}}}}} $	egrated. A supporting	g organization operated	in connec	tion with,	and functionally integrat	ed with,
		its supported organizatio	n(s) (see instructions	s). You must complete I	Part IV, Se	ections A,	D, and E.	
c			y integrated. A supp	orting organization oper	ated in co	nnection v	with its supported organ	ization(s)
		that is not functionally int	tegrated. The organiz	zation generally must sat	tisfy a dist	ribution re	quirement and an attent	riveness
		requirement (see instruct	tions). You must con	nplete Part IV, Sections	A and D,	and Part	V.	
6		Check this box if the orga	•	- ·				
		functionally integrated, or					71 , 71 , 71	
1	Ent	er the number of supported	* *	······) ·····-9·-··				
		vide the following information		ed organization(s)				•
		(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	nization listed	(v) Amount of monetary	(vi) Amount of other
		organization	',	(described on lines 1-10	Yes	ng document? No	support (see instructions)	support (see instructions)
				above (see instructions))	1.00	110		
Tat								

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.)

Calendar year (or fiscal year beginning in) 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge	022 (f) Total
membership fees received. (Do not include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to	
include any "unusual grants.") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to	
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	
ization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to	
or expended on its behalf The value of services or facilities furnished by a governmental unit to	
3 The value of services or facilities furnished by a governmental unit to	
furnished by a governmental unit to	
the organization without charge	
110 organization minotic ontargo	
4 Total. Add lines 1 through 3	
5 The portion of total contributions	
by each person (other than a	
governmental unit or publicly	
supported organization) included	
on line 1 that exceeds 2% of the	
amount shown on line 11,	
column (f)	
6 Public support, Subtract line 5 from line 4.	
Section B. Total Support	·
Calendar year (or fiscal year beginning in) (a) 2018 (b) 2019 (c) 2020 (d) 2021 (e) 20	022 (f) Total
7 Amounts from line 4	
8 Gross income from interest,	
dividends, payments received on	
securities loans, rents, royalties,	
and income from similar sources	
9 Net income from unrelated business	
activities, whether or not the	
business is regularly carried on	
10 Other income. Do not include gain	
or loss from the sale of capital	
assets (Explain in Part VI.)	
11 Total support. Add lines 7 through 10	
12 Gross receipts from related activities, etc. (see instructions)	
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	<u></u>
Section C. Computation of Public Support Percentage	
14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) 14	<u>%</u>
15 Public support percentage from 2021 Schedule A, Part II, line 14	<u>%</u>
16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check	
stop here. The organization qualifies as a publicly supported organization	
b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more,	
and stop here. The organization qualifies as a publicly supported organization	
17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14	
and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the	e organization
b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and li	
more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI h	
	atmostions
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see ins	edule A (Form 990) 2022

Schedule A (Form 990) 2022

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.)

	qualify under the tests listed below, please complete Part II.)										
Sec	ction A. Public Support										
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total				
1	Gifts, grants, contributions, and						_				
	membership fees received. (Do not										
	include any "unusual grants.")	1279304.	1329098.	1230317.	1392280.	1210016.	6441015.				
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the	369,707.	120,186.	63,145.	52,558.	116,739.	722,335.				
2	organization's tax-exempt purpose	303,707.	120,100.	03,143.	32,330.	110,733.	722,333.				
3	Gross receipts from activities that										
	are not an unrelated trade or bus- iness under section 513					137 449	137,449.				
4	Tax revenues levied for the organ-					137,1134	137,113.				
7	ization's benefit and either paid to or expended on its behalf										
5	The value of services or facilities										
	furnished by a governmental unit to										
	the organization without charge			166575							
	Total. Add lines 1 through 5	1649011.	1449284.	1293462.	1444838.	1464204.	7300799.				
7 <i>a</i>	Amounts included on lines 1, 2, and						0				
	3 received from disqualified persons						0.				
r	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						0				
	amount on line 13 for the year						0.				
	Add lines 7a and 7b										
8	8 Public support. (Subtract line 7c from line 6.)										
\mathbf{c}_{\sim}	Section B. Total Support										
			#1.0040	() 0000	(0 000 /	() 0000	(0.7				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total				
Cale 9		(a) 2018 1649011.	(b) 2019 1449284. 171.	(c) 2020 1293462. 55.	(d) 2021 1444838. 31,106.	(e) 2022 1464204.	(f) Total 7300799.				
Cale 9 10a	ndar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties,	1649011.	1449284.	1293462. 55.	31,106.	30.	31,500.				
Cale 9 10a	ndar year (or fiscal year beginning in) Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is	1649011.	1449284.	1293462.	1444838.	1464204.	7300799.				
Cale 9 10 <i>a</i> 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	1649011.	1449284.	1293462. 55.	31,106.	30.	31,500.				
Cale 9 10a h	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.)	1649011. 138. 138.	1449284. 171. 171.	1293462. 55. 55.	31,106. 31,106. 109,200. 1585144.	30. 30. 89,962. 1554196.	31,500. 31,500. 31,500. 199,162. 7531461.				
Cale 9 10a h	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the	1649011. 138. 138.	171. 171. 171. 174. 174. 174. 174. 174. 174.	1293462. 55. 55.	31,106. 31,106. 31,106. 109,200. 1585144. year as a section 5	30. 30. 89,962. 1554196. 601(c)(3) organizati	31,500. 31,500. 31,500. 199,162. 7531461.				
Cale 9 10a b 11 12 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here	1649011. 138. 138. 1649149. 1649149. 1649149.	1449284. 171. 171. 171.	1293462. 55. 55.	31,106. 31,106. 109,200. 1585144.	30. 30. 89,962. 1554196. 601(c)(3) organizati	31,500. 31,500. 31,500. 199,162. 7531461.				
112 13 14	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here	1649011. 138. 138. 1649149. 1649149. The organization's finite Support Period Support Support Period Support Period Support Period Support Period Suppo	1449284. 171. 171. 1449455. rst, second, third,	1293462. 55. 55.	31,106. 31,106. 31,106. 109,200. 1585144. year as a section 5	30. 30. 89,962. 1554196. 601(c)(3) organization	31,500. 31,500. 31,500. 199,162. 7531461.				
112 13 14 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here	138. 138. 138. 138. 1649149. The organization's file ic Support Performs 8, column (f), do	171. 171. 171. 174.	1293462. 55. 55.	31,106. 31,106. 31,106. 109,200. 1585144. year as a section 5	30. 30. 30. 89,962. 1554196. 601(c)(3) organization	31,500. 31,500. 31,500. 199,162. 7531461. on, 96.94 %				
11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here Etion C. Computation of Publ Public support percentage from 2021	138. 138. 138. 138. 1649149. The organization's file ic Support Perine 8, column (f), considered as a column	171. 171. 171. 171. 171. reentage ivided by line 13, all, line 15	1293462. 55. 55.	31,106. 31,106. 31,106. 109,200. 1585144. year as a section 5	30. 30. 89,962. 1554196. 601(c)(3) organization	31,500. 31,500. 31,500. 199,162. 7531461. on, 96.94 %				
11 12 13 14 See 15 16 See	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here Stion C. Computation of Puble Public support percentage for 2022 (Public support percentage from 2021)	1649011. 138. 138. 138. 1649149. In a contract of the con	1449284. 171. 171. 171. 1449455. st, second, third, rcentage ivided by line 13, or line 15 e Percentage	1293462. 55. 55.	31,106. 31,106. 31,106. 109,200. 1585144. year as a section 5	30. 30. 30. 89,962. 1554196. 601(c)(3) organization	31,500. 31,500. 31,500. 199,162. 7531461. on, 96.94 % 96.09 %				
11 12 13 14 Sec 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here Extion C. Computation of Publ Public support percentage from 2021 extion D. Computation of Investion D. Computation of Investion D. Computation of Investinent income percentage for 2021	1649011. 138. 138. 138. 1649149. The organization's final fin	171. 171.	1293462. 55. 55.	31,106. 31,106. 31,106. 109,200. 1585144. year as a section 5	30. 30. 89,962. 1554196. 301(c)(3) organization	31,500. 31,500. 31,500. 199,162. 7531461. fon, 96.94 % 96.09 %				
11 12 13 14 See 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here Extion C. Computation of Publ Public support percentage from 2021 extion D. Computation of Investment income percentage from 201 linvestment income percentage from 201 linvestment income percentage from 2021 investment income	1649011. 138. 138. 138. 1649149. The organization's firm the organization the org	171. 171.	1293462. 55. 55.	31,106. 31,106. 31,106. 109,200. 1585144. year as a section 5	30. 30. 30. 89,962. 1554196. 301(c)(3) organization	31,500. 31,500. 31,500. 199,162. 7531461. 500, 96.94 % 96.09 % .42 % .01 %				
11 12 13 14 Sec 17 18 19 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Total support. (Add lines 9, 10c, 11, and 12.) First 5 years. If the Form 990 is for the check this box and stop here Extion C. Computation of Publ Public support percentage from 2021 extion D. Computation of Investion D. Computation of Investion D. Computation of Investinent income percentage for 2021	1649011. 138. 138. 138. 1649149. The organization's file organization's file organization's file organization's file organization (f), of the organization of the	171. 171.	1293462. 55. 55. 1293517. fourth, or fifth tax scolumn (f)) on line 13, column (f)) on line 14, and line lies as a publicly s line 14 or line 19a	31,106. 31,106. 31,106. 109,200. 1585144. year as a section 5 upported organiza , and line 16 is mo	30. 30. 89,962. 1554196. 301(c)(3) organization 15 16 17 18 3 1/3%, and line 1 tion 15 tion 16 tion 17 tion 18 tion 18 tion 18 tion 19 tion 10 tion 11 tion 12 tion 13 tion 14 tion 15 tion 16 tion 17 tion 18 tion 18 tion	7300799. 31,500. 31,500. 199,162. 7531461. on, 96.94 % 96.09 % .42 % .01 % 7 is not X				

Schedule A (Form 990) 2022

232023 12-09-22

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	3a		
	3b		
	_		
	3с		
	40		
	4a		
	41-		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	ฮม		
	9с		
	46		
	10a		
	10b		
4	A (Earr	~ 000	0000

Schedule A (Form 990) 2022

Par	t IV	Supporting Organizations (continued)			
				Yes	No
11	Has th	ne organization accepted a gift or contribution from any of the following persons?			
а		son who directly or indirectly controls, either alone or together with persons described on lines 11b and			
		elow, the governing body of a supported organization?	11a		
b		ily member of a person described on line 11a above?	11b		
		6 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
_		in Part VI.	11c		
Sec		3. Type I Supporting Organizations			
		,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,		Yes	No
1	Did th	e governing body, members of the governing body, officers acting in their official capacity, or membership of one or		100	110
		supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
		ors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
		ively operated, supervised, or controlled the organization's activities. If the organization had more than one supported ization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	_	prization, describe now the powers to appoint and/or remove officers, directors, or trustees were allocated among the ported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2		e organization operate for the benefit of any supported organization other than the supported	-		
_		ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	•	I how providing such benefit carried out the purposes of the supported organization(s) that operated,			
		vised, or controlled the supporting organization.	2		
Sec		C. Type II Supporting Organizations			
		<i>y</i> 11 0 0		Yes	No
1	Were	a majority of the organization's directors or trustees during the tax year also a majority of the directors			110
•		stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
		nagement of the supporting organization was vested in the same persons that controlled or managed			
		upported organization(s).	1		
Sec		D. All Type III Supporting Organizations	•		
				Yes	No
1	Did th	e organization provide to each of its supported organizations, by the last day of the fifth month of the		100	110
		ization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
		(ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
		ization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2		any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	•		
_		ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	-	ganization maintained a close and continuous working relationship with the supported organization(s).	2		
3		ason of the relationship described on line 2, above, did the organization's supported organizations have a			
_		cant voice in the organization's investment policies and in directing the use of the organization's			
		ne or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		orted organizations played in this regard.	3		
Sec		E. Type III Functionally Integrated Supporting Organizations			
1	Check	k the box next to the method that the organization used to satisfy the Integral Part Test during the yea (see instructions) .			
а		The organization satisfied the Activities Test. Complete line 2 below.			
b		The organization is the parent of each of its supported organizations. Complete line 3 below.			
С		The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	structio	ns).	
2		ties Test. Answer lines 2a and 2b below.		Yes	No
а	Did su	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of			
		apported 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 th	he organization was responsive to those supported organizations, and how the organization determined			
	that th	nese activities constituted substantially all of its activities.	2a		
b	Did th	e activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or	r more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
		Ithe reasons for the organization's position that its supported organization(s) would have engaged in			
		activities but for the organization's involvement.	2b		
3		t of Supported Organizations. Answer lines 3a and 3b below.			
а		e organization have the power to regularly appoint or elect a majority of the officers, directors, or			
		es of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b		e organization exercise a substantial degree of direction over the policies, programs, and activities of each			
		supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990) 2022

Sche	edule A (Form 990) 2022 ECOLIFE CONSERVATION			20-0147505 _{Page} 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust on	Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	st complete	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		

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

Schedule A (Form 990) 2022

6 Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

instructions).

6

Par	rt V Type III Non-Functionally Integrated 509	9(a)(3) Supporting Org	anizations _{(continu}	ıed)	
Secti	ion D - Distributions		•		Current Year
1	Amounts paid to supported organizations to accomplish ex	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exem				
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpos	3			
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pr	rovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is responsive	e		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
	•	(i)	(ii)		(iii)
Secti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2022	าร	Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
С	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2018				
b	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
	Excess from 2022				

Schedule A (Form 990) 2022

232028 12-09-22 Schedule A (Form 990) 2022 11171114 791892 ECI 2022.05000 ECOLIFE CONSERVATION ECI____1

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 Inspection

Name of the organization

ECOLIFE CONSERVATION

Employer identification number 20 - 0147505

Pai	t I Organizations Maintaining Donor Advise		ds or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		·
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor adv	rised funds
	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
_	for charitable purposes and not for the benefit of the donor of		
Pai			
1	Purpose(s) of conservation easements held by the organizati		,
-	Preservation of land for public use (for example, recrea		of a historically important land area
	Protection of natural habitat		of a certified historic structure
	Preservation of open space	Treservation	
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form	m of a conservation easement on the last
_	day of the tax year.	ned conservation contribution in the for	Held at the End of the Tax Year
а	Total number of conservation easements		2a
b			
c	Number of conservation easements on a certified historic str		
4	Number of conservation easements included in (c) acquired a		
u	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, re		
Ü	year	icasca, extinguished, or terminated by t	The organization during the tax
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per	-	- f
·	violations, and enforcement of the conservation easements i		
6	Staff and volunteer hours devoted to monitoring, inspecting,		
·	etan and volunteen neare develor to morntoning, inspecting,	Thanking of Violations, and officing co	moorvation basemente daming the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	vation easements during the vear
	3, 1 3,	3	3 ,
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 17	70(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	•	
9	In Part XIII, describe how the organization reports conservati		
	balance sheet, and include, if applicable, the text of the footr	•	
	organization's accounting for conservation easements.	ŭ	
Pai	t III Organizations Maintaining Collections o	f Art, Historical Treasures, or	Other Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 95	58, not to report in its revenue statement	t and balance sheet works
	of art, historical treasures, or other similar assets held for put	olic exhibition, education, or research in	furtherance of public
	service, provide in Part XIII the text of the footnote to its final	ncial statements that describes these ite	ems.
b	If the organization elected, as permitted under FASB ASC 95	58, to report in its revenue statement and	d balance sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research in fu	rtherance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		·
2	If the organization received or held works of art, historical tre		-
	the following amounts required to be reported under FASB A		
а	Revenue included on Form 990, Part VIII, line 1	_	\$
b	Assets included in Form 990, Part X		

Schedule D (Form 990) 2022

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

Pa	rt III Organizations Maintaining C	ollections of Ar	t, Historical T	reasures,	or Oth	er Simila	ar Asse	e ts (conti	nued)
3	Using the organization's acquisition, accession	on, and other records	s, check any of th	e following tha	at make s	significant	use of its	3	
	collection items (check all that apply):								
а	Public exhibition	d	Loan or ex	change progr	am				
b	Scholarly research	е	Other	0.0					
С	Preservation for future generations								
4	Provide a description of the organization's co	ellections and explain	n how they further	the organizat	ion's exe	empt purpo	se in Pa	t XIII.	
5	During the year, did the organization solicit or	· ·	· ·	-					
	to be sold to raise funds rather than to be ma			•				Yes	☐ No
Pa	t IV Escrow and Custodial Arran								
	reported an amount on Form 990, Par	-	J				, ,	,	
1a	Is the organization an agent, trustee, custodi		iary for contribution	ons or other as	sets not	t included			
	on Form 990, Part X?		•					Yes	☐ No
h	If "Yes," explain the arrangement in Part XIII								
	Too, explain the arrangement in rate xin t	and complete the for	lowing table.					Amoun	<u> </u>
	Reginning balance					1c			-
	Beginning balance								
	Additions during the year								
_	Distributions during the year								
† 0-	Ending balance							Vaa	No.
	Did the organization include an amount on Fo					•		∐ Yes	No
_	If "Yes," explain the arrangement in Part XIII.								
Га	Trick			(c) Two yea			aare hack	(a) Fou	r years back
		(a) Current year	(b) Prior year	+ ` '		• • •		(e) 1 0u	
	Beginning of year balance	211,613.	181,344	16	1,815.	1	61,815.		161,815.
	Contributions								
	Net investment earnings, gains, and losses	-16,760.	31,091	. 1	9,529.				
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses	895.	822	_					
g	End of year balance	193,958.	211,613		1,344.	1	61,815.		161,815.
2	Provide the estimated percentage of the curr		e (line 1g, column	(a)) held as:					
а	Board designated or quasi-endowment	100	_%						
b	Permanent endowment	%							
С	Term endowment	<u></u>							
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.							
За	Are there endowment funds not in the posse	ssion of the organiza	tion that are held	and administe	ered for t	the			
	organization by:								Yes No
	(i) Unrelated organizations							3a(i)	X
	(ii) Related organizations								X
b	If "Yes" on line 3a(ii), are the related organiza								
4	Describe in Part XIII the intended uses of the	=							<u> </u>
Pa	rt VI Land, Buildings, and Equipm								
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 11a.	See Form 990	D, Part X	, line 10.			
	Description of property	(a) Cost or ot	i	st or other		ccumulate	d	(d) Boo	k value
	Description of property	basis (investm		s (other)		preciation	_	(4, 200	
12	Land	'	,	, ,					
	Buildings								
	Leasehold improvements								
				98,650.		96,25	50.		2,400.
	Equipment Other			2 3 , 3 3 0 •		J U , L			_,
	Other		X column (R) line	10c)					2,400.

Schedule D (Form 990) 2022

Part VII Investments - Other Securities.			r = r r r r r ugo e
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	d-of-year market value
(1) Financial derivatives			<u> </u>
(2) Closely held equity interests			
(3) Other			
(A) SAN DIEGO FOUNDATION	193,958.	END-OF-YEAR MARKET	VALUE
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	193,958.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.	F 000 P+ IV II 1	44 d O Farma 000 Part V Brands	
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	(h) Dook value
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7) (8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15)		
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	5.
1. (a) Description of liability	· · · · · · · · · · · · · · · · · · ·		(b) Book value
(1) Federal income taxes			
(2) TRAVELERS DEPOSITS			10,087.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 25.)		10,087.
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 ... X

Schedule D (Form 990) 2022

Par	Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.						
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.			1 400 457		
1				1	1,483,457.		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 . 1					
_	Net unrealized gains (losses) on investments		10,599.	-			
b	Donated services and use of facilities		10,599.	-			
	Recoveries of prior year grants			-			
	Other (Describe in Part XIII.)			١,,	10,599.		
_	Add lines 2a through 2d			2e 3	1,472,858.		
3 4	Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			3	1,472,030.		
	Investment expenses not included on Form 990, Part VIII, line 7b	4a	895.				
	Other (Describe in Part XIII.)		-146,433.				
	Add lines 4a and 4b			4c	-145,538.		
5	Total revenue. Add lines 3 and 4c. (<i>This must equal Form</i> 990, <i>Part I, line</i> 12.)			5	1,327,320.		
	t XII Reconciliation of Expenses per Audited Financial Stater			Retu			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12						
1	Total expenses and losses per audited financial statements			1	1,857,735.		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:						
а	Donated services and use of facilities	2a	10,599.				
	Prior year adjustments						
	Other losses						
d	Other (Describe in Part XIII.)	2d	146,433.				
е	Add lines 2a through 2d			2e	157,032.		
3	Subtract line 2e from line 1			3	1,700,703.		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		0.05				
а	Investment expenses not included on Form 990, Part VIII, line 7b		895.				
	Other (Describe in Part XIII.)				005		
	Add lines 4a and 4b			4c	895.		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,701,598.		
	t XIII Supplemental Information.	1071 41	101 5 11/1	4 5 1	V II 0 D 1 VI		
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa			4; Part	X, line 2; Part XI,		
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any ac	aditional infor	mation.				
РΔΙ	RT V, LINE 4:						
	TI V, DIND I.						
INT	EREST FROM THE ENDOWMENT FUND IS USED FOR	R PAYME	NT TOWARD	THE	EXECUTIVE		
DIE	RECTOR'S SALARY.						
PAF	RT X, LINE 2:						
THE	ORGANIZATION COMPLIES WITH FINANCIAL ACC	COUNTIN	IG STANDARD	S B	OARD		
INT	ERPRETATION NO. 48, ACCOUNTING FOR UNCERS	TAINTY	IN INCOME	TAX	ES, WHICH		
PRO	VIDES ACCOUNTING AND DISCLOSURE GUIDANCE	ABOUT	UNCERTAIN	TAX	POSITIONS.		
EX/	MPLES OF TAX POSITIONS INCLUDE THE TAX-EX	XEMPT S	STATUS OF T	'HE			
ORC	ANIZATION AND VARIOUS POSITIONS RELATED !	TO UNRE	LATED BUSI	NES	S TAXABLE		
INC	COME. MANAGEMENT BELIEVES THAT ALL OF TH	E POSIT	LIONS TAKEN	BY	THE		
05	1231172MTON TN TMC DODDON 3300 CM3MD DODG		MODE II	,, <u>-</u>			
ORC	GANIZATION IN ITS FEDERAL AND STATE RETURI	NS ARE	MOKE LIKET	'X 'I'	HAN NOT TO		

232054 09-01-22

Schedule D (Form 990) 2022

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Attach to Form 990.

OMB No. 1545-0047
2022

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Nam	e of the organization					Employer identifi	cation number
EC	OLIFE CONSERV	ATION				20-014750	5
Pa			ctivities Out	tside the United States. Comple	ete if the organ		
	Form 990, Part IV	/, line 14b.					
1	For grantmakers. Does	the organization	n maintain record	ds to substantiate the amount of its gra	ants and other	assistance,	
	the grantees' eligibility for	or the grants or a	assistance, and	the selection criteria used to award the	e grants or ass	istance?	Yes No
2	For grantmakers. Desc United States.	ribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and o	ther assistance outs	ide the
3		he following Parl	t Lline 3 table ca	an be duplicated if additional space is i	needed)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	(e) If acting is a property described	vity listed in (d) gram service, e specific type (s) in the region	(f) Total expenditures for and investments in the region
			_		THE PROGRAM	HELPS PEOPLE	
					AND NATURE	SUPPORT EACH	
					OTHER BY PF	ROVIDING FUEL	
NOR	TH AMERICA	1	14	PROGRAM SERVICES	EFFICIENT F	PATSARI STOVES	578,606.
3 a	Subtotal	1	14				578,606.
	Total from continuation sheets to Part I	0	0				0.
С	Totals (add lines 3a and 3b)	1	14				578,606.

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

SEE PART V FOR COLUMN (E) DESCRIPTIONS

Schedule F (Form 990) 2022

3 Enter total number of other organizations or entities

			Outside the United States. Cated if additional space is ne		rganization answered	d "Yes" on Form	990, Part IV, line 15, fo	or any
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			recognized as charities by the or counsel has provided a se			•		

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if a	dditional space is neede	d.					
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Page 4

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

Schedule F (Form 990) 2022

Provide the information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III
investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
PART I, LINE 3, COLUMN (E):
REGION: NORTH AMERICA
(E) SPECIFIC TYPES OF SERVICES IN REGION: THE PROGRAM HELPS PEOPLE AND
NATURE SUPPORT EACH OTHER BY PROVIDING FUEL EFFICIENT PATSARI STOVES TO
REPLACE COOKING OVER OPEN FIRES IN COMMUNITIES NEAR THE MONARCH BUTTERFLY
BIOSPHERE RESERVE IN MICHOACN, MEXICO.

SCHEDULE G (Form 990)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the

organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection Employer identification number

Name of the organization							ntification number
	CONSERVATION					20-0147	
Fundraising Activities required to complete this par	 Complete if the organization answer. t. 	ered "\	'es" o	n Form 990, Part IV,	line 1	7. Form 990-E2	I filers are not
1 Indicate whether the organization rais	sed funds through any of the followi	ng acti	vities.	Check all that apply			
a Mail solicitations				overnment grants			
b Internet and email solicitations				nment grants			
c Phone solicitations	g Specia	l fundra	aising	events			
d In-person solicitations		I Con all o	-U	eria ana alima da maratana	_4		
2 a Did the organization have a written of key employees listed in Form 990, F						, or Yes	No
b If "Yes," list the 10 highest paid indi				-			
compensated at least \$5,000 by the		uant to	agree	sinents under willon	uie it	ilidiaisei is to t) C
	r organization:	_		1	1		
(i) Name and address of individual		(iii)	Did aiser	(iv) Gross receipts		Amount paid or retained by)	(vi) Amount paid to (or retained by)
or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		irom activity	'	fundraiser	to (or retained by) organization
					lis	ted in col. (i)	organization
		Yes	No	-			
Total							
3 List all states in which the organization or licensing.	on is registered or licensed to solicit	contrik	oution	s or has been notified	d it is	exempt from re	egistration
LHA For Paperwork Reduction Act Not	ice, see the Instructions for Form	990 or	990-	 EZ.		Schedule	G (Form 990) 2022

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gr				ots greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events
			ANNUAL GALA			(add col. (a) through
a)			(event type)	(event type)	(total number)	- col. (c))
Revenue						
Rev	1	Gross receipts	317,324.			317,324.
	2	Less: Contributions	179,875.			179,875.
	_	2000. CONTINUE CONTIN				
	3	Gross income (line 1 minus line 2)	137,449.			137,449.
	4	Cash prizes				
	ľ	Guerr prizes				
	5	Noncash prizes				
Jses		5 . 6 . 111	27 270			27 270
xpe	6	Rent/facility costs	27,379.			27,379.
Direct Expenses	7	Food and beverages				
Dire		-				
		Entertainment	2,945.			2,945.
	9	Other direct expenses				63,650.
		Direct expense summary. Add lines 4 through Net income summary. Subtract line 10 from I	. ,			73,799.
Pa	rt I					757755
		\$15,000 on Form 990-EZ, line 6a.		, , ,	•	
Ф			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(a) Birigo	bingo/progressive bingo	(b) other garming	col. (a) through col. (c))
Rev						
	1	Gross revenue				
"	2	Cash prizes				
nse		5.15.1 p. 1.25				
Direct Expenses	3	Noncash prizes				
ect E	,	Pont/facility costs				
Δį	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	∟ No	└── No	└── No	
	7	Direct expense summary. Add lines 2 through	h 5 in column (d)			
		Breet expense sammary. And miles 2 timoag	110 III oolamii (a)			
	8	Net gaming income summary. Subtract line 7	7 from line 1, column (d)			
		ter the state(s) in which the organization condu	-	-1-1-0		Yes No
		the organization licensed to conduct gaming a No," explain:				. L Yes L No
J		, <i>э</i> лрын				
		ere any of the organization's gaming licenses re			year?	Yes No
b	If "	Yes," explain:				
	_					

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Schedule G (Form 990) 2022

Sch	edule G (Form 990) 2022	ECOLIFE	CONSERVATION 20-	0147	7505	Page 3
11	Does the organization conduct ga	ıming activities wi	ith nonmembers?		Yes	☐ No
			of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?				Yes	☐ No
13	Indicate the percentage of gaming					
a	The organization's facility			13a		%
						%
			epares the organization's gaming/special events books and records:			
	Name					
	Address					
15a	Does the organization have a con-	tract with a third	party from whom the organization receives gaming revenue?		Yes	☐ No
k	If "Yes," enter the amount of gam	ing revenue recei	ved by the organization \$ and the amount			
	of gaming revenue retained by the	third party \$				
c	If "Yes," enter name and address	of the third party				
	Name					
	Address					
40						
16	Gaming manager information:					
	Name					
	Gaming manager compensation	\$				
	5					
	Description of services provided					
	Director/officer	Employee	Independent contractor			
47	Mandatan, diatributiana					
	Mandatory distributions:					
ā			e charitable distributions from the gaming proceeds to		Vaa	□ No
			ate law to be distributed to other exempt organizations or spent in the	'	Yes	∟ No
L		•	·			
Pa	organization's own exempt activitient IV Supplemental Information		e the explanations required by Part I, line 2b, columns (iii) and (v); and F	art III I	ines 9	9h 10h
			provide any additional information. See instructions.	art III, II	11103 3,	35, 105,
	100, 100, 10, 414 112, 40	арричания				

2022 0

Schedule G (Form 990) 2022

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Schedule G	Form 990) ECOLIFE CONSERVATION Supplemental Information (continued)	20-0147505 Page 4
Part IV	Supplemental Information (continued)	
		Schedule G (Form 990

232084 04-01-22

11171114 791892 ECI

2022.05000 ECOLIFE CONSERVATION

ECI____1

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

ECOLIFE CONSERVATION

Employer identification number 20-0147505

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THAT DEPEND ON THEM. WE BUILD FUEL-EFFICIENT STOVES AND AQUAPONICS
SYSTEMS TO SAVE ECOSYSTEMS AND SAVE LIVES.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
AND COOKING, WE HELP PEOPLE AND NATURE PROSPER TOGETHER. WE HAVE TWO
PROGRAMS: OUR FUEL-EFFICIENT STOVE PROGRAM, AND OUR SUSTAINABLE
AGRICULTURE PROGRAM.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
SUPPORT EACH OTHER BY PROVIDING FUEL EFFICIENT PATSARI STOVES TO
REPLACE COOKING OVER OPEN FIRES IN COMMUNITIES NEAR TWO UNESCO WORLD
HERITAGE SITES: THE MONARCH BUTTERFLY BIOSPHERE RESERVE IN MICHOACN,
MEXICO AND BWINDI IMPENETRABLE NATIONAL PARK IN UGANDA. THE PATSARI
STOVE FUNNELS SMOKE OUT OF THE HOUSES OF THE RECIPIENTS SO THAT THE
FAMILY BREATHES CLEANER AIR, REDUCES FUEL USE, WHICH PROTECTS THE LOCAL
HABITAT AND PROTECTS VULNERABLE SPECIES, WHILE PROVIDING JOBS TO THE
LOCAL COMMUNITIES.
FORM 990, PART VI, SECTION B, LINE 11B:
FORM 990 WAS PREPARED BY AN OUTSIDE ACCOUNTING FIRM AND WAS THOROUGHLY
REVIEWED BY THE ORGANIZATION'S EXECUTIVE DIRECTOR.

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

THE ORGANIZATION MONITORS AND ENFORCES COMPLIANCES WITH POLICY BY BOTH

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

Schedule O (Form 990) 2022

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Schedule O (Form 990) 2022 Page **2**

Name of the organization **Employer identification number ECOLIFE CONSERVATION** 20-0147505 PERIODICALLY REVIEWING PERFORMANCE AND IF AND WHEN INCIDENTS OCCUR. FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECTORS MEETS ON A QUARTERLY BASIS TO DISCUSS THE EXECUTIVE DIRECTOR'S PERFORMANCE AND PAY, ANY POTENTIAL CONFLICTS OF INTEREST, AMONG OTHER THINGS. FORM 990, PART VI, SECTION C, LINE 19: FINANCIAL REPORTS ARE AVAILABLE ONLINE AT WWW.ECOLIFECONSERVATION.ORG. GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST. FORM 990, PART IX, LINE 11G, OTHER FEES: CONTRACT SERVICES: PROGRAM SERVICE EXPENSES 6,250. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 6,250. PROFESSIONAL FEES: PROGRAM SERVICE EXPENSES 120,587. MANAGEMENT AND GENERAL EXPENSES 71,815. FUNDRAISING EXPENSES 40,857. TOTAL EXPENSES 233,259. 239,509. TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A

232212 10-28-22 Schedule O (Form 990) 2022

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

2022 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

ECOLIFE CONSERVATION

Employer identification number 20-0147505

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a)	(b)	(c)	(d)	(e)	(f)
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)	Total income	End-of-year assets	Direct controllin entity
Identification of Related Tax-Exempt Organiza	1				

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	contr	g) 512(b)(13) rolled ity?
EGOLTEE GONGERVANTON MENTON			501(c)(3))		Yes	No	
ECOLIFE CONSERVATION MEXICO YESTA #77, BOSQUE CAMELINAS MORELIA, MICHOACAN, MEXICO 58290	PROTECTION OF WILDLIFE AND NATURAL RESOURCES	MEXICO	501(C)(3)		ECOLIFE CONSERVATION	x	

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

Part III

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						organizations treated as a partitioning during the tax year.							
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)				
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets	1	ortionate tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera managi partne	or Percentage ownership				
		country)		sections 512-514)		4,000,00	Yes	No	K-1 (Form 1065)	Yes N	o				
										+					
										$\perp \perp$					

Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i Sec 512(k contr enti	ti) tion b)(13) rolled tity?
		country)		J. 1.25.4		45515		Yes	No
									<u> </u>
								 	
									<u> </u>

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No
1	During the tax year, did the organization engage in any of the following transaction						
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	/			1a		X
b	Gift, grant, or capital contribution to related organization(s)				1b		Х
С	Gift, grant, or capital contribution from related organization(s)				1c		X
d	Loans or loan guarantees to or for related organization(s)				1d		X
е	Loans or loan guarantees by related organization(s)				1e		Х
f	Dividends from related organization(s)				1f		X
g	Sale of assets to related organization(s)				1g		X
h	Purchase of assets from related organization(s)				1h		Х
i	Exchange of assets with related organization(s)				1i		Х
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		X
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		X
- 1	Performance of services or membership or fundraising solicitations for related orga	anization(s)			11		Х
	m Performance of services or membership or fundraising solicitations by related organization(s)						X
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization						X
0	Sharing of paid employees with related organization(s)				10		Х
р	Reimbursement paid to related organization(s) for expenses				1p	Х	
					1q		X
r	Other transfer of cash or property to related organization(s)				1r		X
	Other transfer of cash or property from related organization(s)				1s		X
	If the answer to any of the above is "Yes," see the instructions for information on w						
	(a) Name of related organization	(b) Transaction	(c) Amount involved	(d) Method of determining amount in	volved		
		type (a-s)					
(1) E	ECOLIFE CONSERVATION MEXICO	P	578,606.	CASH VALUE			
(2)							
<u>(3)</u>							
<u>(4)</u>							
(5)							
(6)							
	3 09-14-22		1	Schedule	R (For	m 990) 2022

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a)	(b)	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e)	(f)	(g)	(r	1)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related	partners se	Share of	Share of	Dispro	opor- ate	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Genera manag	Percentage
of entity		(state or foreign country)	excluded from tax under	orgs.?	total income	end-of-year assets	allocat	ions?	of Schedule K-1	partne	ownersnip
		Country)	sections 5 (2-5 (4)	Yes No	p mcome	assets	Yes	No	(F01111 1065)	Yes N	0
										\vdash	
										\sqcup	
							1				1

232165 09-14-22

Form **5471**

(Rev. December 2022)

Department of the Treasury

Information Return of U.S. Persons With Respect to Certain Foreign Corporations

Go to www.irs.gov/Form5471 for instructions and the latest information.

Information furnished for the foreign corporation's annual accounting period (tax year required by section 898) (see instructions) hadinging TAN 1 2022 and ending DEC 31 2022

OMB No. 1545-0123

Attachment Sequence No. **121**

internal Revenue Service Section 898) (See I	nstructio	ns) beginning UA	ти т	, ZUZZ, and ending	g DEC 3	1, 202	4			
Name of person filing this return				A Identifying num	ber					
ECOLIFE CONSERVATION				20-0147	505					
Number, street, and room or suite no. (or P.O. box number if	f mail is no	ot delivered to street add	ress)	B Category of filer	(See instructi			` · · ·		
2810 PIO PICO DRIVE					c 2		4 X 5a		5c	
City or town, state, and ZIP code CARLSBAD, CA 92008				C Enter the total poyou owned at the	•	-			ck • 0 0 %	
Filer's tax year beginning JAN 1		, 2022 , and en	ding	DEC 31	,20		<u> </u>			
D Check box if this is a final Form 5471 for the for	eign cor									
E Check if any excepted specified foreign financia	l assets a	are reported on this f	orm (s	ee instructions)						
F Check the box if this Form 5471 has been comp	oleted us	ing "Alternative Inforr	mation	under Rev. Proc. 2019-4	10					
G If the box on line F is checked, enter the corresp	onding (code for "Alternative	Inform	ation" (see instructions)						
H Person(s) on whose behalf this information retu	ırn is file	d:								
(1) Name		(2) Ado	trace		(3) Identifyir	ıa numher		k applicable		
(1) Name		(2) Aut	11633		(3) Identifyii	ig ilullibei	Shareholder	Officer	Director	
Important: Fill in all applicable lines and s	chedule	es. All information	must	be in English. All amou	nts must be	stated in	U.S. dollar	S		
unless otherwise indicated.					1.40 5		· ·			
1a Name and address of foreign corporation					b(1) Emp	loyer identi	fication num	iber, if any		
ECOLIFE CONSERVATION	AMB	IENTAL ME	XIC	ANA	b(2) Refe	rence ID nu	mber (see i	nstructions)	
YESTA #77, BOSQUE CAI							203NO	nou douono,	,	
MORELIA MICHOACAN 58							vhose laws	incorporate	d	
MEXICO						XICO				
d Date of e Principal place of business		f Principal	g Pri	ncipal business activity	1	h Functio	nal currency	/ code		
incorporation MORELIA		business activity code number	I	NSTALL STOV	ES					
02/20/17MEXICO		238900					MX	N		
2 Provide the following information for the foreign	n corpora	ation's accounting pe	eriod st	ated above.						
a Name, address, and identifying number of brane	ch office	or agent (if any) in th	ne Unit	ed States	b If a U.S. in	come tax re	eturn was fil	ed, enter:		
					(i) Taxable in	come or (lo		(ii) U.S. income tax paid (after all credits)		
								•	<u> </u>	
c Name and address of foreign corporation's stat	utory or	resident agent		d Name and address (in	cluding corpo	rate depart	ment, if app	licable) of	.!	
in country of incorporation				person (or persons) v corporation, and the l	ocation of suc	h books an	d records, it	s of the fore f different	eigri	
EDUARDO RAMIREZ MENDO	OZA			ALONSO GA	LVAN Y	ASOC	IADOS	s.c		
MEIRAN #70, C.P. 583	50			AV. VENTU	RA PUE	NTE 9	99/18			
MORELIA MICHOACAN				MORELIA M	ICHOAC	AN				
MEXICO				MEXICO						
Schedule A Stock of the Foreig	n Cor	poration								
					(b) Nui	mber of sha	res issued a			
(a) Description	n of eacl	h class of stock				ng of annua ing period		ii) End of ar ccounting p		
COMMON							1		1	
LHA For Paperwork Reduction Act Notice, see i	nstructio	ons.					Form	5471 (Rev	/. 12-2022)	

Form 5471 (Rev. 12-2022) Page **2**

Schedule B Shareholders of Fore			
Part I U.S. Shareholders of Foreig	n Corporation (see instructions)		
(a) Name, address, and identifying number of shareholder	(b) Description of each class of stock held by shareholder. Note: This description should match the corresponding description entered in Schedule A, column (a). (c) Number of shares held at beginning of annual accounting period	(d) Number of shares held at end of annual accounting period	(e) Pro rata share of Subpart F income (enter as a percentage)
ECOLIFE CONSERVATION 2810 PIO PICO DRIVE CARLSBAD CA 92008 20-0147505	COMMON	1 1	100.00%
Part II Direct Shareholders of For	eign Corporation (see instructions)		
(a) Name, address, and identifying number of shareholder. Also, include country of incorporation of formation, if applicable.	(b) Description of each class of stock held by shareholder.	(c) Number of shares held at beginning of annual accounting period	(d) Number of shares held at end of annual accounting period
ECOLIFE CONSERVATION 2810 PIO PICO DRIVE CARLSBAD CA 92008 20-0147505	COMMON	1	1

Form **5471** (Rev. 12-2022)

Schedule C Income Statement

Important: Report all information in functional currency in accordance with U.S. generally accepted accounting principles (GAAP). Also, report each amount in U.S. dollars translated from functional currency (using GAAP translation rules). However, if the functional currency is the U.S. dollar, complete only the U.S. Dollars column. See instructions for special rules for dollar approximate separate transactions method (DASTM) corporations.

		[Functional Currency	U.S. Dollars
	1a Gross receipts or sales	1a	8,811,290.	438,155.
	b Returns and allowances			
	c Subtract line 1b from line 1a		8,811,290.	438,155.
	2 Cost of goods sold		9,094,182.	452,222.
	3 Gross profit (subtract line 2 from line 1c)	3	-282,892.	-14,067.
e	4 Dividends			
ncome	5 Interest			
<u>ĕ</u>	6a Gross rents			
	b Gross royalties and license fees	6b		
	7 Net gain or (loss) on sale of capital assets	7		
	8a Foreign currency transaction gain or loss - unrealized			
	b Foreign currency transaction gain or loss - realized			
	9 Other income (attach statement)			
	10 Total income (add lines 3 through 9)		-282,892.	-14,067.
	11 Compensation not deducted elsewhere	. 11		
	12a Rents	12a		
	b Royalties and license fees	12b		
Suc	13 Interest	13		
čţi	14 Depreciation not deducted elsewhere	. 14		
Deductions	15 Depletion	. 15		
۵	16 Taxes (exclude income tax expense (benefit))	16		
	17 Other deductions (attach statement - exclude income tax expense			
	(benefit)) SEE STATEMENT 1	. 17	7,230.	360.
	18 Total deductions (add lines 11 through 17)	. 18	7,230.	360.
	19 Net income or (loss) before unusual or infrequently occurring items, and			
Net Income	income tax expense (benefit) (subtract line 18 from line 10)		-290,122.	-14,427.
ည	20 Unusual or infrequently occurring items			
=	21a Income tax expense (benefit) - current	21a		
ž	b Income tax expense (benefit) - deferred			
	22 Current year net income or (loss) per books (combine lines 19 through 21b)		-290,122.	-14,427.
Other Comprehensive Income	23a Foreign currency translation adjustments			_
er nensi	b Other			
Oth Incor	c Income tax expense (benefit) related to other comprehensive income	23c		_
Con	24 Other comprehensive income (loss), net of tax (line 23a plus line 23b less			
	line 23c)	. 24		rm 5471 (Pay 10 0000)

Form **5471** (Rev. 12-2022)

Form 5471 (Rev. 12-2022) Page **4**

Schedule F	Balance Sheet
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Important: Report all amounts in U.S. dollars prepared and translated in accordance with U.S. GAAP. See instructions for an exception for DASTM corporations.

ioi ai	Assets		(a) Beginning of annual accounting period	En acco	(b) d of annual unting perio	d
1	Cash	1	Ŭ 1	1		34.
2a	Trade notes and accounts receivable	2a				40.
b	Less allowance for bad debts	2b	() ()
3	Derivatives	3		1		,
4	Inventories	4				
5	Other current assets (attach statement)	5				
6	Loans to shareholders and other related persons	6				
7	Investment in subsidiaries (attach statement)	7				
8	Other investments (attach statement)	8				
9a	Buildings and other depreciable assets	9a			35,0	49.
b	Less accumulated depreciation	9b	() ()
10a		10a				
b	Less accumulated depletion	10b	() ()
11	Land (net of any amortization)	11				
12	Intangible assets:					
а	Goodwill	12a				
b	Organization costs	12b				
C	Patents, trademarks, and other intangible assets	12c				
d	Less accumulated amortization for lines 12a, 12b, and 12c	12d	() ()
13	Other assets (attach statement)	13				
14	Total assets	14			36,6	23.
	Liabilities and Shareholders' Equity					
15	Accounts payable Other current liabilities (attach statement) SEE STATEMENT 2	15				35.
16	Other current liabilities (attach statement) SEE STATEMENT 2	16			5,7	22.
17	Derivatives	17				
18	Loans from shareholders and other related persons	18				
19	Other liabilities (attach statement) SEE STATEMENT 3	19			5,3	90.
20	Capital stock:					
а	Preferred stock	20a				
b	Common stock	20b				
21	Paid-in or capital surplus (attach reconciliation)	21			05.4	
22	Retained earnings	22			25,4	76.
23	Less cost of treasury stock	23	() (26.6	<u> </u>
24	Total liabilities and shareholders' equity	24			36,6	23.
Sc	nedule G Other Information				- 1	
		,			Yes	No
1	During the tax year, did the foreign corporation own at least a 10% interest, directly or indirectly, in	-	-			37
	partnership?					Х
_	If "Yes," see the instructions for required statement.					37
2						Х
3	During the tax year, did the foreign corporation own any foreign entities that were disregarded as s	•				
	their owner under Regulations sections 301.7701-2 and 301.7701-3 or did the foreign corporation					37
	branches (see instructions)?					X
	If "Yes," you are generally required to attach Form 8858 for each entity or branch (see instructions	,	a:			
4a	During the tax year, did the filer pay or accrue any base erosion payment under section 59A(d) to the support of the filer pay or accrue any base erosion payment under section 59A(d) to the support of the filer pay or accrue any base erosion payment under section 59A(d) to the support of the filer pay or accrue any base erosion payment under section 59A(d) to the support of the filer pay or accrue any base erosion payment under section 59A(d) to the support of the filer pay or accrue any base erosion payment under section 59A(d) to the support of the filer pay or accrue any base erosion payment under section 59A(d) to the support of the filer pay or accrue any base erosion payment under section 59A(d) to the support of the filer pay or accrue any base erosion payment under section 59A(d) to the support of the filer pay or accrue any base erosion payment under section 59A(d) to the support of the filer pay or accrue any base erosion payment under section 59A(d) to the support of the filer pay or accrue any base erosion for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion payment under section for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion for the filer pay or accrue any base erosion		=			
	corporation or did the filer have a base erosion tax benefit under section 59A(c)(2) with respect to					v
	payment made or accrued to the foreign corporation (see instructions)?					X
L	If "Yes," complete lines 4b and 4c.		ф			
b	Enter the total amount of the base erosion payments				_	
C	Enter the total amount of the base erosion tax benefit				_	
5a	During the tax year, did the foreign corporation pay or accrue any interest or royalty for which the					Х
	allowed under section 267A?					
L	If "Yes," complete line 5b.		φ			
D 04000	Enter the total amount of the disallowed deductions (see instructions)		ъ			

Form 5471 (Rev. 12-2022)

Schedule G	Other	Information	(continued)
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			Yes	No
6a	Is the filer claiming a foreign-derived intangible income (FDII) deduction (under section 250) with respect to any			
	transactions with the foreign corporation?			_X_
	If "Yes," complete lines 6b, 6c, and 6d. See instructions.			
b	Enter the amount of gross reciepts derived from all sales of general property to the foreign corporation that the			
	filer included in its computation of foreign-derived deduction eligible income (FDDEI)			
C	Enter the amount of gross receipts derived from all sales of intangible property to the foreign corporation that the filer incl			
	in its computation of FDDEI	\$		
d	Enter the amount of gross receipts derived from all services provided to the foreign corporation that the filer included in			
_	its computation of FDDEI			37
7	During the tax year, was the foreign corporation a participant in any cost-sharing arrangement?			X
	If the answer to question 7 is "Yes," complete a separate Schedule G-1 for each cost sharing arrangement in			
0	which the foreign corporation was a participant during the tax year.			
8	From April 25, 2014, to December 31, 2017, did the foreign corporation purchase stock or securities of a shareholder of the foreign corporation for use in a triangular reorganization (within the meaning of Regulations			
	section 1.358-6(b)(2))?			Х
9a	Did the foreign corporation receive any intangible property in a prior year or the current tax year for which the U.S.			
· ·	transferor is required to report a section 367(d) annual income inclusion for the tax year?			Х
	If "Yes," go to line 9b.			
b	Enter in functional currency the amount of the earnings and profits reduction pursuant to section 367(d)			
	(2)(B) for the tax year			
10	During the tax year, was the foreign corporation an expatriated foreign subsidiary under Regulations section			
	1.7874-12(a)(9)?			X
	If "Yes," see instructions and attach statement.	Î		
11	During the tax year, did the foreign corporation participate in any reportable transaction as defined in Regulations			
	section 1.6011-4?			_X_
	If "Yes," attach Form(s) 8886 if required by Regulations section 1.6011-4(c)(3)(i)(G).			
12	During the tax year, did the foreign corporation pay or accrue any foreign tax that was disqualified for credit under			
	section 901(m)?			<u>X</u>
13	During the tax year, did the foreign corporation pay or accrue foreign taxes to which section 909 applies, or treat			v
	foreign taxes that were previously suspended under section 909 as no longer suspended?			$\frac{x}{x}$
14	Did you answer "Yes" to any of the questions in the instructions for line 14?			
15	If "Yes," enter the corresponding code(s) from the instructions and attach statement Does the foreign corporation have interest expense disallowed under section 163(j) (see instructions)?	_		х
15	If "Yes," enter the amount			
16	Does the foreign corporation have previously disallowed interest expense under section 163(j) carried forward	Ψ		
	to the current tax year (see instructions)?			Х
	If "Yes," enter the amount	φ		
17a	Did any extraordinary reduction with respect to a controlling section 245A shareholder occur during the tax year	·		
	(see instructions)?			Х
b	If the answer to question 17a is "Yes," was an election made to close the tax year such that no amount is treated			
	as an extraordinary reduction amount or tiered extraordinary reduction amount (see instructions)?			
18	Does the reporting corporation have any loan to or from the related party to which the safe-haven rate rules of			
	Regulations section 1.482-2(a)(2)(iii)(B) are applicable, and for which the reporting corporation used a rate of			
	interest within the safe-haven range of Regulations section 1.482-2(a)(2)(iii)(B)(1) (100% to 130% of the AFR for the			
	relevant term)?			X
19a	Did the reporting corporation make at least one distribution or acquisition (as defined by Regulations section			
	1.385-3) during the period including the tax year and the preceding 3 tax years, or, during the period beginning			
	36 months before the date of the respective distribution or acquisition and ending 36 months afterward, did the			X
h	reporting corporation issue or refinance indebtedness owed to a related party?			Λ
b	If the answer to question 19a is "Yes," provide the following. (1) The amount of such distribution(s) and acquisition(s)	¢		
	(2) The amount of such related party indebtedness			
	(=) aa 5. odoir rotated party massiculioso	* ————		

Form **5471** (Rev. 12-2022)

Form 5471 (Rev. 12-2022) Page **6**

Schedule I Summary of Shareholder's Income From Foreign Corporation

If item H on page 1 is completed, a separate Schedule I must be filed for each Category 4, 5a, or 5b filer for whom reporting is furnished on this Form 5471. This Schedule I is being completed for:

Name of	FU.S. shareholder ECOLIFE CONSERVATION Identifying number 20-0147505				
1 a	Section 964(e)(4) Subpart F dividend income from the sale of stock of a lower-tier foreign corporation				
	(see instructions)	1a			
b	Section 245A(e)(2) Subpart F income from hybrid dividends of tiered corporations (see instructions)	1b			
C	Subpart F income from tiered extraordinary disposition amounts not eligible for subpart F exception				
	under section 954(c)(6)	1c			
d	Subpart F income from tiered extraordinary reduction amounts not eligible for subpart F exception				
	under section 954(c)(6)	1d			
е	Section 954(c) Subpart F Foreign Personal Holding Company Income (enter result from Worksheet A)	1e			
f	Section 954(d) Subpart F Foreign Base Company Sales Income (enter result from Worksheet A)	1f			
g	Section 954(e) Subpart F Foreign Base Company Services Income (enter result from Worksheet A)	1g			
h	Other subpart F income (enter result from Worksheet A)	1h			
2	Earnings invested in U.S. property (enter the result from Worksheet B)	2			
3	Reserved for future use	3			
4	Factoring income	4			
	See instructions for reporting amounts on lines 1, 2, and 4 on your income tax return.				
5 a	Section 245A eligible dividends (see instructions)	5a			
b	Extraordinary disposition amounts (see instructions)	5b			
C	Extraordinary reduction amounts (see instructions)	5c			
d	Section 245A(e) dividends (see instructions)	5d			
е	Dividends not reported on line 5a, 5b, 5c, or 5d	5e			
6	Exchange gain or (loss) on a distribution of previously taxed earnings and profits	6			
				Yes	No
7 a	Was any income of the foreign corporation blocked?				
b	Did any such income become unblocked during the tax year (see section 964(b))?				
If the an	swer to either question is "Yes," attach an explanation.				
8 a	Did this U.S. shareholder have an extraordinary disposition (ED) account with respect to the foreign corporation at				
	any time during the tax year (see instructions)?				X
b	If the answer to question 8a is "Yes," enter the U.S. shareholder's ED account balance at the beginning of the CFC year				
	\$ and at the end of the tax year \$ Provide an attachment detailing any change	s from	the		
	beginning to the ending balances.				
C	Enter the CFC's aggregate ED account balance with respect to all U.S. shareholders at the beginning of the CFC year				
	\$ and at the end of the tax year \$ Provide an attachment detailing any change	s from	the		
	beginning to the ending balances.				
9	Enter the sum of the hybrid deduction accounts with respect to stock of the foreign corporation (see instructions)		5 /71 /D		

Form **54/1** (Rev. 12-2022)

SCHEDULE H (Form 5471)

(Rev. December 2021)

Current Earnings and Profits

► Attach to Form 5471.

► Go to www.irs.gov/Form5471 for instructions and the latest information.

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service Name of person filing Form 5471 Identifying number 20-0147505 ECOLIFE CONSERVATION Reference ID number (see instr.) Name of foreign corporation EIN (if any) ECA1702203N0 ECOLIFE CONSERVATION AMBIENTAL ME

IMPORTANT: Enter the amounts on lines 1 through 5c infunctional currency. -290,122. Current year net income or (loss) per foreign books of account 2 Net adjustments made to line 1 to determine current earnings and profits according to U.S. financial and tax **Net Additions** accounting standards (see instructions): **Net Subtractions** Capital gains or losses 2a Depreciation and amortization 2b Depletion 2c Investment or incentive allowance 2d 2e Charges to statutory reserves Inventory adjustments Income taxes (see Schedule E, Part I, Section 1, line 6, column (m), and Part III, line 3, column (i)) 2g h Foreign currency gains or losses 2h Other (attach statement) 3 3 Total net additions Total net subtractions -290,122. 5a Current earnings and profits (line 1 plus line 3 minus line 4) 5a **b** DASTM gain or (loss) for foreign corporations that use DASTM (see instructions) 5b c Combine lines 5a and 5b and enter the result on line 5c. Then enter on lines 5c(i), 5c(ii), and 5c(iii)(A) through 5c(iii)(D) the portion of the line 5c amount with respect to the categories of income shown -290,122. on those lines (i) General category (enter amount on applicable Schedule J, Part I, line 3, column (a)) 5c(i) (ii) Passive category (enter amount on applicable Schedule J, Part I, line 3, column (a)) 5c(ii) (iii) Section 901(j) category: (A) Enter the country code of the sanctioned country and enter the line 5c amount with respect to the sanctioned country on this line 5c(iii)(A) and on the applicable Schedule J, Part I, line 3, column (a) (B) Enter the country code of the sanctioned country ▶ and enter the line 5c amount with respect to the sanctioned country on this line 5c(iii)(B) and on the applicable Schedule J, Part I, line 3, column (a) (C) Enter the country code of the sanctioned country ▶ and enter the line 5c amount with respect to the sanctioned country on this line 5c(iii)(C) and on the applicable Schedule J, Part I, line 3, column (a) 5c(iii)(C (D) Enter the country code of the sanctioned country and enter the line 5c amount with respect to the sanctioned country on this line 5c(iii)(D) and on the applicable Schedule J, Part I, line 3, column (a) 5c(iii)(D) Current earnings and profits in U.S. dollars (line 5c translated at the average exchange rate, as -14,427.defined in section 989(b)(3) and the related regulations (see instructions)) 5d 20.110000 e Enter exchange rate used for line 5d

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule H (Form 5471) (Rev. 12-2021)

SCHEDULE J (Form 5471) (Rev. December 2020)

Accumulated Earnings & Profits (E&P) of Controlled Foreign Corporation

► Attach to Form 5471.

► Go to www.irs.gov/Form5471 for instructions and the latest information.

OMB No. 1545-0123

Name of person filing Form 5471

Department of the Treasury

Internal Revenue Service

Identifying number

ECOLIFE CONSERVATION		20-0147505					
Name of foreign corporation	EIN (if any)	Reference ID number					
ECOLIFE CONSERVATION AMBIENTAL MEXICANA		ECA1702203N0					
a Separate Category (Enter code - see instructions.)		▶ GEN					
b If code 901j is entered on line a, enter the country code for the sanctioned country (see instructions)							
Part I Accumulated E&P of Controlled Foreign Corporation							

Ш	Check the box if person filing return does not have all U.S. sha	reholders' information			structions).		
		(a) Post-2017 E&P Not Previously Taxed (post-2017 section 959(c)(3) balance)	(b) Post-1986 Undistributed Earnings (post-1986 and pre-2018 section 959(c)(3) balance)	(c) Pre-1987 E&P Not Previously Taxed (pre-1987 section 959(c)(3) balance)	(d) Hovering Deficit and Deduction for Suspended Taxes	(i) Reclassified section 965(a) PTEP	E&P (see instructions) (ii) Reclassified section 965(b) PTEP
1a	Balance at beginning of year (as reported on prior year Schedule J)						
b	Beginning balance adjustments (attach statement)						
С	Adjusted beginning balance (combine lines 1a and 1b)						
2a	Reduction for taxes unsuspended under anti-splitter rules						
b	Disallowed deduction for taxes suspended under anti-splitter rules						
3	Current year E&P (or deficit in E&P) (enter amount from applicable line 5c of Schedule H)	-290,122.					
4	E&P attributable to distributions of previously taxed E&P from lower-tier foreign corporation						
5a	E&P carried over in nonrecognition transaction						
b	Reclassify deficit in E&P as hovering deficit after						
	nonrecognition transaction						
6	Other adjustments (attach statement)						
7	Total current and accumulated E&P (combine lines 1c through 6)	-290,122.					
8	Amounts reclassified to section 959(c)(2) E&P from section 959(c)(3) E&P						
9	Actual distributions						
10	Amounts reclassified to section 959(c)(1) E&P from section 959(c)(2) E&P						
11	Amounts included as earnings invested in U.S. property and reclassified to section 959(c)(1) E&P (see instructions)						
12	Other adjustments (attach statement)						
13	Hovering deficit offset of undistributed post- transaction E&P (see instructions)						
14	Balance at beginning of next year (combine lines 7 through 13)	-290,122.					

rait	Accumulated Exp of Con	uonea	roreign Corporation (C	ontinued)				
		(e) Previously Taxed E&P (see instructions)						
	(iii) General section 959(c)(1) PTEP	(iv) Rec	classified section 951A PTEP	PTEP (v) Reclassified section 245A(d) PTEP (vi) Section 965(a)		PTEP	(vii) Section 965(b) PTEP	
1a								
b								
С								
2a								
b								
3								
4								
5a								
b								
6 7								
8								
9								
10								
11								
12								
13								
14								
			(e) Previously Taxed E&P (see instructions)				(f)
	(viii) Section 951A PTEP			(c	(f) Total Section 964(a) E&P (combine columns (a), (b), (c), and (e)(i) through (e)(x))			
1a								
b								
С								
2a								
b								000 100
3								-290,122.
4								
5a b		+						
6		+						
7		+						-290,122.
8		+						23071221
9								
10		+						_
11		+						
12								
13								
14								-290,122.

Part	II Nonpreviously Taxed E&P Subject to Recapture as Subpart F Income (section 952(c)(2))			
Import	ant: Enter amounts in functional currency.			
1	Balance at beginning of year	•	1	
2	Additions (amounts subject to future recapture)	•	2	
3	Subtractions (amounts recaptured in current year)	•	3	
4	Balance at end of year (combine lines 1 through 3)	•	4	

Schedule J (Form 5471) (Rev. 12-2020)

SCHEDULE M (Form 5471)

(Rev. December 2021)
Department of the Treasury
Internal Revenue Service

Name of person filing Form 5471

Transactions Between Controlled Foreign Corporation and Shareholders or Other Related Persons

► Attach to Form 5471.

► Go to www.irs.gov/Form5471 for instructions and the latest information.

OMB No. 1545-0123

Identifying number

ECOLIFE CONSERVATION		20-014750	5
Name of foreign corporation	EIN (if any)	Reference ID number	

ECOLIFE CONSERVATION AMBIENTAL ME ECA1702203N0

Important: Complete a separate Schedule M for each controlled foreign corporation. Enter the totals for each type of transaction that occurred during the annual accounting period between the foreign corporation and the persons listed in columns (b) through (f). All amounts must be stated in U.S. dollars translated from functional currency at the average exchange rate for the foreign corporation's tax year. See instructions.

Enter the relevant functional currency and the exchange rate used throughout this schedule ightharpoonup MEXICO , PESO20.110000 (C) Any domestic corporation or partnership controlled by (d) Any other foreign corporation or partnership (e) 10% or more U.S. shareholder of controlled (f) 10% or more U.S. (a) Transactions of (b) U.S. person filing this return shareholder of foreign corporation (other than the U.S. person filing this return) any corporation controlling the foreign corporation controlled by foreign corporation U.S. person filing this return U.S. person filing this return 1 Sales of stock in trade (inventory) 2 Sales of tangible property other than stock in trade 3 Sales of property rights (patents, trademarks, etc.) 4 Platform contribution transaction payments received 5 Cost sharing transaction payments received 6 Compensation received for technical, managerial, engineering, construction, or like services 7 Commissions received 8 Rents, royalties, and license fees received $\boldsymbol{9}\,$ Hybrid dividends received (see instr.) ... 10 Dividends received (exclude hybrid dividends, deemed distributions under subpart F, and distributions of previously taxed income) 11 Interest received 12 Premiums received for insurance or reinsurance **13** Loan guarantee fees received 578,606. 0. 0. 14 Other amounts received (att. statement) 578,606. 15 Add lines 1 through 14 16 Purchases of stock in trade (inventory) 17 Purchases of tangible property other than stock in trade 18 Purchases of property rights (patents, trademarks, etc.) 19 Platform contribution transaction payments paid 20 Cost sharing transaction payments paid 21 Compensation paid for technical, managerial, engineering, construction, or like services 22 Commissions paid 23 Rents, royalties, and license fees paid 24 Hybrid dividends paid (see instructions) 25 Dividends paid (exclude hybrid dividends 26 Interest paid 27 Premiums paid for insurance or reinsurance 28 Loan guarantee fees paid 29 Other amounts paid (attach statement) 30 Add lines 16 through 29

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 5471.

Schedule M (Form 5471) (Rev. 12-2021)

212371 04-01-22

Name of person filling Form 5471

Identifying number

ECOLIFE CONSERVATION

20-0147505

ECOLIFE CONSERVATION	∠∪−	014/303			
(a) Transactions of foreign corporation	(b) U.S. person filing this return	(C) Any domestic corporation or partnership controlled by U.S. person filing this return	(d) Any other foreign corporation or partnership controlled by U.S. person filing this return	(e) 10% or more U.S. shareholder of controlled foreign corporation (other than the U.S. person filing this return)	(f) 10% or more U.S. shareholder of any corporation controlling the foreign corporation
31 Accounts Payable					
32 Amounts borrowed (enter the maximum					
loan balance during the year) - see instr.					
33 Accounts Receivable					
34 Amounts loaned (enter the maximum					
loan balance during the year) - see instr.					

Schedule M (Form 5471) (Rev. 12-2021)