** PUBLIC DISCLOSURE COPY ** **Return of Organization Exempt From Income Tax**

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



| Internal Revenue Service | | | | |
|----------------------------|--|--|--|--|
| Department of the Treasury | | | | |

| AI | For th | e 2022 calendar year, or tax year beginning and | ending | _ | | | | |
|---------------|-------------------------|--|---------------|------------------------------|-------------------------------|--|--|--|
| B | Check if applicab | e: C Name of organization | | D Employer identifie | cation number | | | |
| | Addre | | | | | | | |
| | Name | e Doing business as | | 26-35218 | 96 | | | |
| | Initial | Number and street (or P.O. box if mail is not delivered to street address) | Room/suite | | | | | |
| | Final | 1330 ORANGE AVENUE, # 309 | | (619)757 | | | | |
| _ | termir ated | | | G Gross receipts \$ | 1,575,472. | | | |
| | Amen | CONONADO, CA 92110 | | H(a) Is this a group re | | | | |
| | Applie tion pendi | | | for subordinates | | | | |
| | | SAME AS C ABOVE | | H(b) Are all subordinates in | ncluded? Yes No | | | |
| - | | empt status: $501(c)(3)$ X $501(c)(4)$ (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: 2008 | State of legal domicile: CA | | | |
| Pa | art I | Summary | | | | | | |
| e | 1 | Briefly describe the organization's mission or most significant activities: CITI | ZENS | CLIMATE LOB | BI BUILDS | | | |
| Governance | | POLITICAL WILL FOR CLIMATE SOLUTIONS BY | | | | | | |
| /err | 2 | Check this box if the organization discontinued its operations or disposed | | | | | | |
| ğ | 3 | Number of voting members of the governing body (Part VI, line 1a) | | | 9 | | | |
| ø | 4 | Number of independent voting members of the governing body (Part VI, line 1b) | | <u> </u> | | | | |
| Activities & | 5 | Total number of individuals employed in calendar year 2022 (Part V, line 2a) | | | 21500 | | | |
| ť | 6 | Total number of volunteers (estimate if necessary) | | | 0. | | | |
| Ac | | | | | 0. | | | |
| | a | Net unrelated business taxable income from Form 990-T, Part I, line 11 | <u></u> | Prior Year | Current Year | | | |
| | | Contributions and events (Dart)/III line 1b) | | 2,428,959. | 936,103. | | | |
| anı | 8 | Contributions and grants (Part VIII, line 1h) | | 3,988. | 18,904. | | | |
| Revenue | 9 | Program service revenue (Part VIII, line 2g) | | 4,878. | 3,675. | | | |
| Re | 10 | Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 593. | 848. | | | |
| | 12 | Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | 2,438,418. | 959,530. | | | |
| | 13 | Grants and similar amounts paid (Part IX, column (A), lines 1-3) | | 0. | 811. | | | |
| | 14 | Benefits paid to or for members (Part IX, column (A), line 4) | | 0. | 0. | | | |
| s | 15 | Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | | 807,820. | 1,270,207. | | | |
| Expenses | | Professional fundraising fees (Part IX, column (A), line 11e) | ····· | 0. | 0. | | | |
| be | | Total fundraising expenses (Part IX, column (D), line 25) 147, 3 | 15. | | | | | |
| й | | Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 812,864. | 671,278. | | | |
| | | Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | | 1,620,684. | 1,942,296. | | | |
| | 19 | Revenue less expenses. Subtract line 18 from line 12 | | 817,734. | -982,766. | | | |
| or | | • | B | eginning of Current Year | End of Year | | | |
| sets | 20 | Total assets (Part X, line 16) | | 2,181,432. | 1,185,323. | | | |
| dB | 21 | Total liabilities (Part X, line 26) | | 165,240. | 151,897. | | | |
| Fund Balances | 22 | Net assets or fund balances. Subtract line 21 from line 20 | | 2,016,192. | 1,033,426. | | | |
| Pa | art II | Signature Block | | | | | | |
| Und | er pena | Ities of perjury, I declare that I have examined this return, including accompanying schedule | s and staten | nents, and to the best of my | y knowledge and belief, it is | | | |
| true | , corre | ct, and complete. Declaration of preparer (other than officer) is based on all information of wh | hich prepare | r has any knowledge. | | | | |
| | | | | | | | | |

| Sign | Signature of offi | cer | | | Date | | | |
|---------------------------------------|---|-------------------|----------------------|------|----------------|-----------|--|--|
| | | IELONAS, CFO | | | | | | |
| | Type or print na | me and title | | | | | | |
| | Print/Type prepa | arer's name | Preparer's signature | Date | Check | PTIN | | |
| Paid | RICHARD | HOTZ | | | | P00452784 | | |
| Preparer | Firm's name | CONSIDINE & CONSI | | | Firm's EIN 95- | 2694444 | | |
| Use Only | Firm's address | 8989 RIO SAN DIEG | O DRIVE, SUITE 250 | | | | | |
| SAN DIEGO, CA 92108-1604 Phone no.619 | | | | | | 231.1977 | | |
| May the I | May the IRS discuss this return with the preparer shown above? See instructions | | | | | | | |
| 232001 12-1 | 32001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2022) | | | | | | | |

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

| <pre>bitefty describe the organization's mission: CITIZENS' CLIMATE LOBBY BUILDS POLITICAL WILL FOR CLIMATE S ENABLING THE BREAKTHROUGH OF PERSONAL AND POLITICAL POWER. Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2? "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," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measu Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the evenue, if any, for each program service reported. Code:</pre> | Yes X No Yes X No Yes X No red by expenses. total expenses, and 18,904. DVANCING LS. TO SPECIFIC FOR |
|---|---|
| brior Form 990 or 990-EZ? f "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? f "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measu Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the evenue, if any, for each program service reported. Code: | Yes X No red by expenses. total expenses, and 18,904. DVANCING LS. TO SPECIFIC FOR |
| brior Form 990 or 990-EZ? f "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? f "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measu Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the evenue, if any, for each program service reported. Code: | Yes X No red by expenses. total expenses, and 18,904. DVANCING LS. TO SPECIFIC FOR |
| brior Form 990 or 990-EZ? f "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? f "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measu Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the evenue, if any, for each program service reported. Code: | Yes X No red by expenses. total expenses, and 18,904. DVANCING LS. TO SPECIFIC FOR |
| f "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services? f "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measu Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the evenue, if any, for each program service reported. Code:) (Expenses 1, 644, 352. including grants of 8 811.) (Revenue § CITIZENS' CLIMATE LOBBY PROGRAM ACTIVITIES ARE RELATED TO A SPECIFIC CLIMATE LEGISLATION AT THE STATE AND NATIONAL LEVE ACTIVITIES INCLUDE: - PROVIDING TRAININGS, EVENTS, AND CALLS TO ACTION RELATED CLIMATE LEGISLATION. - PERFORMING DIRECT LOBBYING EFFORTS AND PROVIDING SUPPORT GRASSROOTS LOBBYING EFFORTS. - EDUCATING AND SUPPORTING CONGRESSIONAL LIAISONS. - MOBILIZING ENDORSEMENTS FOR CLIMATE LEGISLATION. | Yes X No red by expenses. total expenses, and 18,904. DVANCING LS. TO SPECIFIC FOR |
| Did the organization cease conducting, or make significant changes in how it conducts, any program services? ("Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measu Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the evenue, if any, for each program service reported. Code:)(Expenses \$ 1,644,352. including grants of \$ 811.) (Revenue \$ CITIZENS' CLIMATE LOBBY PROGRAM ACTIVITIES ARE RELATED TO A SPECIFIC CLIMATE LEGISLATION AT THE STATE AND NATIONAL LEVE ACTIVITIES INCLUDE: - PROVIDING TRAININGS, EVENTS, AND CALLS TO ACTION RELATED CLIMATE LEGISLATION. - PERFORMING DIRECT LOBBYING EFFORTS AND PROVIDING SUPPORT GRASSROOTS LOBBYING EFFORTS. - EDUCATING AND SUPPORTING CONGRESSIONAL LIAISONS. - MOBILIZING ENDORSEMENTS FOR CLIMATE LEGISLATION. | red by expenses. total expenses, and 18,904. DVANCING LS. TO SPECIFIC FOR |
| <pre>f "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measu Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the evenue, if any, for each program service reported. Code:</pre> | red by expenses. total expenses, and 18,904. DVANCING LS. TO SPECIFIC FOR |
| Describe the organization's program service accomplishments for each of its three largest program services, as measu Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the evenue, if any, for each program service reported. Code:) (Expenses \$1,644,352.including grants of \$811.) (Revenue \$ CITIZENS' CLIMATE LOBBY PROGRAM ACTIVITIES ARE RELATED TO A SPECIFIC CLIMATE LEGISLATION AT THE STATE AND NATIONAL LEVE ACTIVITIES INCLUDE: - PROVIDING TRAININGS, EVENTS, AND CALLS TO ACTION RELATED CLIMATE LEGISLATION. - PERFORMING DIRECT LOBBYING EFFORTS AND PROVIDING SUPPORT SRASSROOTS LOBBYING EFFORTS. - EDUCATING AND SUPPORTING CONGRESSIONAL LIAISONS. - MOBILIZING ENDORSEMENTS FOR CLIMATE LEGISLATION. | total expenses, and 18,904. DVANCING LS. TO SPECIFIC FOR |
| evenue, if any, for each program service reported. Code:)(Expenses \$ 1,644,352. including grants of \$ 811.) (Revenue \$ CITIZENS' CLIMATE LOBBY PROGRAM ACTIVITIES ARE RELATED TO A SPECIFIC CLIMATE LEGISLATION AT THE STATE AND NATIONAL LEVE ACTIVITIES INCLUDE: - PROVIDING TRAININGS, EVENTS, AND CALLS TO ACTION RELATED CLIMATE LEGISLATION. - PERFORMING DIRECT LOBBYING EFFORTS AND PROVIDING SUPPORT SRASSROOTS LOBBYING EFFORTS. - EDUCATING AND SUPPORTING CONGRESSIONAL LIAISONS. - MOBILIZING ENDORSEMENTS FOR CLIMATE LEGISLATION. | 18,904. DVANCING LS. TO SPECIFIC FOR |
| Code:)(Expenses \$ 1,644,352. including grants of \$ 811.) (Revenue \$ CITIZENS' CLIMATE LOBBY PROGRAM ACTIVITIES ARE RELATED TO A SPECIFIC CLIMATE LEGISLATION AT THE STATE AND NATIONAL LEVE ACTIVITIES INCLUDE: - PROVIDING TRAININGS, EVENTS, AND CALLS TO ACTION RELATED CLIMATE LEGISLATION. - PERFORMING DIRECT LOBBYING EFFORTS AND PROVIDING SUPPORT SRASSROOTS LOBBYING EFFORTS. - EDUCATING AND SUPPORTING CONGRESSIONAL LIAISONS. - MOBILIZING ENDORSEMENTS FOR CLIMATE LEGISLATION. | DVANCING LS. TO SPECIFIC FOR |
| CITIZENS' CLIMATE LOBBY PROGRAM ACTIVITIES ARE RELATED TO A SPECIFIC CLIMATE LEGISLATION AT THE STATE AND NATIONAL LEVE ACTIVITIES INCLUDE: - PROVIDING TRAININGS, EVENTS, AND CALLS TO ACTION RELATED CLIMATE LEGISLATION. - PERFORMING DIRECT LOBBYING EFFORTS AND PROVIDING SUPPORT GRASSROOTS LOBBYING EFFORTS. - EDUCATING AND SUPPORTING CONGRESSIONAL LIAISONS. - MOBILIZING ENDORSEMENTS FOR CLIMATE LEGISLATION. | DVANCING LS. TO SPECIFIC FOR |
| SPECIFIC CLIMATE LEGISLATION AT THE STATE AND NATIONAL LEVE ACTIVITIES INCLUDE: - PROVIDING TRAININGS, EVENTS, AND CALLS TO ACTION RELATED CLIMATE LEGISLATION. - PERFORMING DIRECT LOBBYING EFFORTS AND PROVIDING SUPPORT GRASSROOTS LOBBYING EFFORTS. - EDUCATING AND SUPPORTING CONGRESSIONAL LIAISONS. - MOBILIZING ENDORSEMENTS FOR CLIMATE LEGISLATION. | LS. TO SPECIFIC FOR |
| ACTIVITIES INCLUDE: - PROVIDING TRAININGS, EVENTS, AND CALLS TO ACTION RELATED CLIMATE LEGISLATION. - PERFORMING DIRECT LOBBYING EFFORTS AND PROVIDING SUPPORT GRASSROOTS LOBBYING EFFORTS. - EDUCATING AND SUPPORTING CONGRESSIONAL LIAISONS. - MOBILIZING ENDORSEMENTS FOR CLIMATE LEGISLATION. | TO SPECIFIC FOR |
| CLIMATE LEGISLATION. - PERFORMING DIRECT LOBBYING EFFORTS AND PROVIDING SUPPORT GRASSROOTS LOBBYING EFFORTS. - EDUCATING AND SUPPORTING CONGRESSIONAL LIAISONS. - MOBILIZING ENDORSEMENTS FOR CLIMATE LEGISLATION. | FOR |
| CLIMATE LEGISLATION. - PERFORMING DIRECT LOBBYING EFFORTS AND PROVIDING SUPPORT GRASSROOTS LOBBYING EFFORTS. - EDUCATING AND SUPPORTING CONGRESSIONAL LIAISONS. - MOBILIZING ENDORSEMENTS FOR CLIMATE LEGISLATION. | FOR |
| - PERFORMING DIRECT LOBBYING EFFORTS AND PROVIDING SUPPORT GRASSROOTS LOBBYING EFFORTS. - EDUCATING AND SUPPORTING CONGRESSIONAL LIAISONS. - MOBILIZING ENDORSEMENTS FOR CLIMATE LEGISLATION. | |
| GRASSROOTS LOBBYING EFFORTS. - EDUCATING AND SUPPORTING CONGRESSIONAL LIAISONS. - MOBILIZING ENDORSEMENTS FOR CLIMATE LEGISLATION. | |
| - EDUCATING AND SUPPORTING CONGRESSIONAL LIAISONS. - MOBILIZING ENDORSEMENTS FOR CLIMATE LEGISLATION. | |
| | |
| Code:) (Expenses \$ including grants of \$) (Revenue \$) | ; ; |
| Code:) (Expenses \$ including grants of \$) (Revenue \$) | |
| Code:) (Expenses \$ including grants of \$) (Revenue \$) | ```````````````````````````````` |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| Code:) (Expenses \$ including grants of \$) (Revenue \$) | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| |) |
| |) |
| otal prodram service expenses I, 044, JJZ • | |
| otal program service expenses 1,044,552. | Form 990 (2022 |
| 12-13-22 3 | Form 990 (2022 |
| E) | ther program services (Describe on Schedule O.) <pre> kpenses \$ including grants of \$) (Revenue \$ that program service expenses 1,644,352.</pre> |

CITIZENS CLIMATE LOBBY

Form 990 (2022)

26-3521896 Page 2

Form 990 (2022)

Part IV Checklist of Required Schedules

CITIZENS CLIMATE LOBBY

| | | | Yes | No |
|-----|--|-----|----------|----------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A | 1 | | x |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? See instructions | 2 | Х | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for | | | |
| - | public office? If "Yes," complete Schedule C, Part I | 3 | | x |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II | | | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or | 4 | | |
| 5 | similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III | 5 | | x |
| 6 | Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i> | 6 | | x |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, ne environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> | | | x |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete | | | |
| | Schedule D, Part III | 8 | | x |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for | | | |
| | amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV | 9 | | x |
| 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? <i>If</i> "Yes," <i>complete Schedule D, Part VI</i> | 11a | | x |
| b | Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total | 114 | | |
| | assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | x |
| 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 | d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i> | | | x |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | | Х | |
| f | 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 | Х | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII | 12a | х | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? | | | |
| | If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | X |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| b | Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, | | | |
| | investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 | | | v |
| 45 | or more? If "Yes," complete Schedule F, Parts I and IV | 14b | | X |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> | 15 | | x |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to | | | |
| | or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | X |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, | | | v |
| 40 | column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> . See instructions | 17 | | X |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines | 40 | | x |
| 10 | 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," | 18 | | |
| 19 | | 19 | | x |
| 20a | complete Schedule G, Part III | 20a | | X |
| | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20a | <u> </u> | <u> </u> |
| 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 |
| | | | | |

232003 12-13-22

Form 990 (2022)

10570706 757767 CITI14128413 2022.04000 CITIZENS CLIMATE LOBBY

| Form | aan | (2022) |
|------|-----|--------|
| | 330 | (2022) |

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 | 00 | | x |
| 23 | Part IX, column (A), line 2? <i>If</i> "Yes," <i>complete Schedule I, Parts I and III</i> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current | 22 | | |
| 20 | and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J | | | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the | 23 | | X |
| | 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 | | X |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24b | | |
| С | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | | | |
| | any tax-exempt bonds? | 24c | | |
| | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | 24d | | |
| 25a | Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transportion with a discussified parson during the year? If "Year" complete Schedule I. Part I. | 25a | | x |
| h | transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and | 258 | | - 23 |
| J | 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 | | x |
| 26 | Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current | | | |
| | or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% | | | |
| | controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II | 26 | | X |
| 27 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, | | | |
| | creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled | | | x |
| 00 | entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i> | 27 | | |
| 28 | Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| а | A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If | | | |
| | "Yes," complete Schedule L, Part IV | 28a | | x |
| b | A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV | 28b | | Х |
| | A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f | | | |
| | "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 contributions? <i>If</i> "Yes," <i>complete Schedule M</i> | 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? <i>If</i> "Yes," <i>complete Schedule N, Part II</i> | 32 | | x |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations | | | 37 |
| | 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 | 24 | | x |
| 25.2 | Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 34 35a | | X |
| | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity | 000 | | |
| | within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 | 35b | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? | | | |
| | If "Yes," complete Schedule R, Part V, line 2 | 36 | | |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization | | | |
| | and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI | 37 | | X |
| 38 | Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? | 00 | x | |
| Pa | Note: All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance | 38 | л | |
| | 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 2 | | _ | |
| b | Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable | | | |
| с | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming | | | |
| | (gambling) winnings to prize winners? | 1c | X | |
| 232004 | · 12-13-22 5 | Form | 990 | (2022) |
| | | | | |

10570706 757767 CITI14128413 2022.04000 CITIZENS CLIMATE LOBBY

CITI1401

| | | 21896 | Р | age 5 |
|--------|--|-----------------|-----|--------------|
| Par | rt V Statements Regarding Other IRS Filings and Tax Compliance (continued) | | | |
| | | | 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 | 0 | | |
| | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | | | v |
| | Did the organization have unrelated business gross income of \$1,000 or more during the year? | | | 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 | | | v |
| | financial account in a foreign country (such as a bank account, securities account, or other financial account)? | <u>4a</u> | | 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). | _ | | v |
| | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | | | X X |
| | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | | | _ <u>^</u> |
| | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | <u>5</u> c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit | | | x |
| | any contributions that were not tax deductible as charitable contributions? | <u>6a</u> | | _ A |
| D | If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts | C 1- | | |
| - | were not tax deductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in evenes of 0.75 mode partly as a contribution and partly for goods and convises provided to the part | 10r2 7 - | | x |
| | | | | |
| | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required | 7. | | x |
| -1 | to file Form 8282? | 7c | | |
| | | 7e | | |
| e 4 | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | | | |
| f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | | | |
| g b | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098- | | | |
| h 8 | Sponsoring organization received a contribution of cars, boats, anglanes, of other vehicles, did the organization me a rorm roso. | | | |
| 0 | | 8 | | |
| 9 | sponsoring organization have excess business holdings at any time during the year? | | | |
| a | 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? | | | |
| 10 | Section 501(c)(7) organizations. Enter: | 55 | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 10a | | | |
| | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b | _ | | |
| | Section 501(c)(12) organizations. Enter: | _ | | |
| | Gross income from members or shareholders 11a | | | |
| | Gross income from other sources. (Do not net amounts due or paid to other sources against | | | |
| | amounts due or received from them.) 11b | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| | If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | | | |
| а | Is the organization licensed to issue qualified health plans in more than one state? | 13a | | |
| | Note: See the instructions for additional information the organization must report on Schedule O. | | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which the | | | |
| | organization is licensed to issue qualified health plans 13b | | | |
| с | Enter the amount of reserves on hand 13c | | | |
| | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | Х |
| b | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O | 14b | | |
| 15 | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or | | | |
| | excess parachute payment(s) during the year? | 15 | | X |
| | 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 | | X |
| | 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. | | | |

232005 12-13-22

Form **990** (2022)

6 10570706 757767 CITI14128413 2022.04000 CITIZENS CLIMATE LOBBY

| Form 990 | (2022) |
|----------|--------|
|----------|--------|

CITIZENS CLIMATE LOBBY

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.

| Sec | Check if Schedule O contains a response or note to any line in this Part VI | | | | X |
|-------|---|--------------------------------|----------|--------------|----------|
| Sec | tion A. doverning body and Management | | | Yes | N |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | 1a | 9 | 100 | |
| | 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 | 9 | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationsh | | - | | |
| - | officer, director, trustee, or key employee? | | 2 | | 2 |
| 3 | Did the organization delegate control over management duties customarily performed by or under the | | _ | | \vdash |
| • | of officers, directors, trustees, or key employees to a management company or other person? | | 3 | | 2 |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form | | | | |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's as | | 5 | | |
| 6 | Did the organization have members or stockholders? | | 6 | | |
| | Did the organization have members of stockholders, or other persons who had the power to elect or a | | - | | ╞╴ |
| 1a | | | 7a | | 2 |
| h | more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, | ataal/baldara ar | 7.4 | | + |
| b | | | 71- | | 2 |
| • | persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year | | 7b | | 1 |
| 8 | | | | x | |
| а | The governing body? | | 8a | X | ┝ |
| | Each committee with authority to act on behalf of the governing body? | | 8b | | \vdash |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re | | | | , |
| | organization's mailing address? If "Yes," provide the names and addresses on Schedule O | | 9 | | |
| sec | tion B. Policies (This Section B requests information about policies not required by the Internal F | levenue Code.) | | | ١. |
| | | | | Yes | N |
| | Did the organization have local chapters, branches, or affiliates? | | 10a | X | |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such of | | | | |
| | and branches to ensure their operations are consistent with the organization's exempt purposes? $\ _{.}$ | | 10b | X | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing boo | dy before filing the form? | 11a | X | |
| b | Describe on Schedule O the process, if any, used by the organization to review this Form 990. | | | | |
| | Did the organization have a written conflict of interest policy? If "No," go to line 13 | | 12a | X | |
| | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris | | 12b | X | |
| с | Did the organization regularly and consistently monitor and enforce compliance with the policy? If " | Yes," describe | | | |
| | on Schedule O how this was done | | 12c | X | |
| 13 | Did the organization have a written whistleblower policy? | | 13 | X | |
| 14 | Did the organization have a written document retention and destruction policy? | | 14 | X | |
| 15 | Did the process for determining compensation of the following persons include a review and approv | al by independent | | | |
| | persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | ? | | | |
| а | The organization's CEO, Executive Director, or top management official | | 15a | | 2 |
| | Other officers or key employees of the organization | | | | 2 |
| | 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 arrange | ement with a | | | |
| | taxable entity during the year? | | 16a | | 2 |
| 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 orga | | | | |
| | exempt status with respect to such arrangements? | | 16b | | |
| Sec | tion C. Disclosure | | 100 | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed AL, CA, CO, CT, I | DC.FL.GA.IL.K | S.KY | . MF | . 1 |
| 18 | Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, a | | | | |
| 10 | for public inspection. Indicate how you made these available. Check all that apply. | | |) avai | au |
| | | n on Schedule O) | | | |
| 10 | | | nd fina | naial | |
| 19 | Describe on Schedule O whether (and if so, how) the organization made its governing documents, or | conflict of interest policy, a | ind fina | nciai | |
| ~ | statements available to the public during the tax year. | a dia ang d | | | |
| 20 | State the name, address, and telephone number of the person who possesses the organization's be | DOKS and records | | | |
| | AMANDA RIVERA - $(571)762-3973$ | | | | |
| | 1330 ORANGE AVENUE, # 309, CORONADO, CA 92118 | | | 000 | / |
| 32000 | 3 12-13-22 SEE SCHEDULE O FOR FULL LIST OF STATES | | Forn | 1 990 | (20 |
| - ^ | | | ~ | | |
| 10 | 706 757767 CITI14128413 2022.04000 CITIZENS CLIMA | TE LOBBY | | rı14 | 4(|

| Part VII | I Compensation of Officers, Directors, Trustees, Key Employe | es, Highest C | compensated |
|----------|--|---------------|-------------|
| | Employees, and Independent Contractors | | |

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.

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

List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)

who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

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

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

| (A) | (B) | | | (0 | C) | | | (D) | (E) | (F) |
|------------------------------------|----------------------|-------------------------------|-----------------------|-------------|--------------|---------------------------------|-------|---------------------------------|------------------------------|-----------------------------|
| Name and title | Average | (do | not c | | ition | | one | Reportable | Reportable | Estimated |
| | hours per | box | , unle | ss pe | erson i | is bot | h an | compensation | compensation | amount of |
| | week | | cer an | id a d I | lirecto | r/trus | tee) | from | from related | other |
| | (list any | recto | | | | | | the | organizations | compensation |
| | hours for related | e or di | ee | | | sated | | organization (W-2/1099-MISC/ | (W-2/1099-MISC/ 1099-NEC) | from the |
| | organizations | ustee | trust | | ee | npen: | | 1099-NEC) | 1099-NEC) | organization and related |
| | below | dual ti | tiona | | nploy | st cor yee | - | 1000 NEO) | | organizations |
| | line) | ndividual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | -orme | | | 5. gain_2 |
| (1) DANIEL RICHTER | 36.80 | _ | _ | | - | | _ | | | |
| SR DIRECTOR OF GOVERNMENT AFFAIRS | | | | | | Х | | 135,534. | 0. | 0. |
| (2) JENNIFER TYLER | 39.60 | | | | | | | | | |
| SR DIRECTOR OF GOVERNMENT AFFAIRS | | | | | | Х | | 133,650. | 0. | 0. |
| (3) BEN PENDERGRASS | 37.20 | | | | | | | | | |
| VP OF GOVERNMENT AFFAIRS | | | | | | Х | | 125,550. | 0. | 0. |
| (4) MADELEINE PARA | 18.40 | | | | | | | | | - |
| EXECUTIVE DIRECTOR | | | | | | х | | 72,715. | 0. | 0. |
| (5) OLIVIA MELONAS | 3.60 | | | | | | | 10.000 | | • |
| SR DIRECTOR OF FINANCE | | | | | | Х | | 10,800. | 0. | 0. |
| (6) ZAURIE ZIMMERMAN | 5.00 | | | | | | | | | • |
| CHAIR | | X | | X | | | | 0. | 0. | 0. |
| (7) PIPER CHRISTIAN | 0.50 | | | | | | | | • | • |
| SECRETARY | 0.00 | X | | X | | | | 0. | 0. | 0. |
| (8) MARY SELKIRK | 8.00 | | | | | | | | 0 | 0 |
| TREASURER | | X | | X | | | | 0. | 0. | 0. |
| (9) ROSS ASTORIA | 2.50 | ., | | | | | | | 0 | 0 |
| BOARD MEMBER/NOMINATIONS CHAIR | 1 00 | X | | | | | | 0. | 0. | 0. |
| (10) JERRY HINKLE | 1.00 | | | | | | | | 0 | 0 |
| BOARD MEMBER | | X | | | | | | 0. | 0. | 0. |
| (11) MARK REYNOLDS | 15.00 | | | | | | | 0. | 0. | 0 |
| BOARD MEMBER | 0.50 | X | | | | | | 0. | 0. | 0. |
| (12) EFAON COBB | 0.50 | x | | | | | | 0. | 0. | 0. |
| BOARD MEMBER | 1.00 | ^ | | | | | | 0. | 0. | 0. |
| (13) ALEX BOZMOSKI BOARD MEMBER | 1.00 | x | | | | | | 0. | 0. | 0. |
| (14) NATALIE OROZCO | 3.50 | ^ | | | | | | 0. | 0. | 0. |
| BOARD MEMBER | 5.50 | x | | | | | | 0. | 0. | 0. |
| BOARD MEMBER | | ^ | | | | | | 0. | 0. | 0. |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | 1 | | | | | | | | |
| | | | | | | | | | | Earm 990 (2022) |

232007 12-13-22

Form **990** (2022)

10570706 757767 CITI14128413

| | 990 (2022) CITIZENS | | | | | | | | | 26-35 | 5218 | 896 | Pa | age 8 |
|---|--|---|-----------------------|-----------------------|---------------|-----------------------------------|----------------------|-----------------------|--|--|--------|------------------------------------|---|-----------------------|
| Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) | | | | | | | | | | | | | | |
| | (A) Name and title | (B) Average hours per week (list any hours for related organizations | box, | Institutional trustee | s per | tion more rson is rector | than o s both | n an | (D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC) | (E) Reportable compensation from related organizations (W-2/1099-MIS 1099-NEC) | 3 | Esti amo comp fro orga | (F) mate ount o ther ensat m the nizati relate | of tion e on |
| | | below line) | Individua | Institutio | Officer | Key employee | Highest (employe | Former | | | | orgar | nizatio | ons |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| с | Subtotal Total from continuation sheets to Part VI | I, Section A | | | | | | | 478,249. 0. 478,249. | | 0.0.0. | | | 0.0. |
| _ | Total (add lines 1b and 1c) Total number of individuals (including but n compensation from the organization | | | | | | | | - | ,000 of reportable | - | | | 3 |
| 3 | Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s | - | | • | • | | | Ŭ | | | | 3 | Yes | No X |
| | For any individual listed on line 1a, is the su and related organizations greater than \$150 | m of reportabl),000? <i>If "Yes,</i> | le co " <i>coi</i> | mpe mple | ensa ete S | ition Sche | anc dule | l otl 9 <i>J f</i> | for such individual | the organization | | 4 | | X |
| | Did any person listed on line 1a receive or a rendered to the organization? <i>If "Yes," com</i> ion B. Independent Contractors | | | | | - | | | - | | | 5 | | X |
| 1 | Complete this table for your five highest co the organization. Report compensation for | | | | | | | | n the organization's tax | | pensa | | | |
| | (A) Name and business | address | NC | ONE |] | | | | (B) Description of s | ervices | C | (C) ompen: | | <u>ו</u> |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | + | | | | | | |
| | Total number of independent contractors (i \$100,000 of compensation from the organiz | | ot lir | niteo | d to | thos C | | sted | d above) who received n | nore than | | Form 9 | <u></u> | |

232008 12-13-22

Form **990** (2022)

| | | | Check if Schedule O contains a | response | or note to any lir | ne in this Part VIII | | | |
|--|----|--------|---|---|--------------------|-----------------------------|--|-----|--|
| | | | | · | ž | (A) Total revenue | (B) Related or exempt function revenue | (C) | (D) Revenue excluded from tax under sections 512 - 514 |
| nts its | 1 | а | Federated campaigns | 1a | | | | | |
| iran | | | Membership dues | 1b | | | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | | | Fundraising events | 1c | | | | | |
| | | | Related organizations | 1d | | | | | |
| | | | Government grants (contributions) | 1e | | | | | |
| | | | All other contributions, gifts, grants, and | | | | | | |
| hei | | · | similar amounts not included above | 1f | 936,103. | | | | |
| Ē | | a | Noncash contributions included in lines 1a-1f | 1g \$ | | | | | |
| and | | - | Total. Add lines 1a-1f | | | 936,103. | | | |
| | | | | | Business Code | , | | | |
| a | 2 | а | CONFERENCE | | 900099 | 18,904. | 18,904. | | |
| , vi | 2 | b | | | 500055 | 20,0010 | 20,5010 | | |
| Program Service Revenue | | c | | | | | | | |
| E S | | d | | | | | | | |
| Be | | | | | | | | | |
| Pro | | e 4 | | | | | | | |
| | | | All other program service revenue Total. Add lines 2a-2f | | | 18,904. | | | |
| \rightarrow | 3 | | Investment income (including divide | | | 10,5010 | | | |
| | 3 | | other similar amounts) | , | , | 640. | | | 640. |
| | 4 | | Income from investment of tax-exen | | | 0100 | | | 0400 |
| | 4 | | | • • | | | | | |
| | 5 | | Royalties | i) Real | (ii) Personal | | | | |
| | ~ | _ | | i) near | | | | | |
| | 0 | | Gross rents 6a | | | | | | |
| | | | Less: rental expenses 6b | | | | | | |
| | | | Rental income or (loss) 6c | | | | | | |
| | _ | | Net rental income or (loss) | ecurities | | | | | |
| | ' | а | | 8,977. | (ii) Other | | | | |
| | | | | , | | | | | |
| a | | b | Less: cost or other basis | 012 | | | | | |
| nu | | | and sales expenses | ,942. ,035. | | | | | |
| eve | | | · · · · · · · · · · · · · · · · · · · | | | 2 025 | | | 3,035. |
| Other Revenue | | | Net gain or (loss) | | | 3,035. | | | 3,035 |
| the | 8 | а | Gross income from fundraising events (r | | | | | | |
| 0 | | | including \$ | | | | | | |
| | | | contributions reported on line 1c). S | | | | | | |
| | | | Part IV, line 18 | | | | | | |
| | | | Less: direct expenses | | | | | | |
| | | | Net income or (loss) from fundraisin | - | | | | | |
| | 9 | а | Gross income from gaming activities | | | | | | |
| | | | Part IV, line 19 | | | | | | |
| | | | Less: direct expenses | | | | | | |
| | | | Net income or (loss) from gaming ac | | | | | | |
| | 10 | а | Gross sales of inventory, less return | | | | | | |
| | | | and allowances | | | | | | |
| | | b | Less: cost of goods sold | 10b | | | | | |
| | | с | Net income or (loss) from sales of in | ventory | | | | | |
| s | | | 0 | | Business Code | 0.10 | 0.10 | | |
| le eor | 11 | а | OTHER | | 900099 | 848. | 848. | | |
| Miscellaneous Revenue | | b | | | | | | | |
| Pe | | С | | | | | | | |
| Sin T | | d | All other revenue | | | | | | |
| - | | е | Total. Add lines 11a-11d | | | 848. | | | |

12 Total revenue. See instructions

Form **990** (2022)

3,675.

10

959,530.

19,752.

10570706 757767 CITI14128413 2022.04000 CITIZENS CLIMATE LOBBY

CITI1401

0.

Form 990 (2022)

CITIZENS CLIMATE LOBBY Part VIII Statement of Revenue

| Form 990 (| | | | CITIZE | | |
|------------|-----|---------|----|------------|-----|--------|
| Part IX | Sta | itement | of | Functional | Exp | oenses |

CITIZENS CLIMATE LOBBY

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

| Do | Check if Schedule O contains a respon not include amounts reported on lines 6b, | (A) | (B) | (C) | (D) |
|--------|--|---------------------------------------|-----------------------------|--|-------------------------|
| 7b, | 8b, 9b, and 10b of Part VIII. | Total expenses | Program service expenses | Management and general expenses | Fundraising expenses |
| 1 | Grants and other assistance to domestic organizations | 011 | 011 | | |
| _ | and domestic governments. See Part IV, line 21 | 811. | 811. | | |
| 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, | | | | |
| 6 | trustees, and key employees Compensation not included above to disqualified | | | | |
| 0 | persons (as defined under section 4958(f)(1)) and | | | | |
| | persons described in section 4958(c)(3)(B) | | | | |
| 7 | Other salaries and wages | 1,100,637. | 907,991. | 99,462. | 93,184 |
| ' 8 | Pension plan accruals and contributions (include | _,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | , | | 20,101 |
| 5 | section 401(k) and 403(b) employer contributions) | | | | |
| 9 | Other employee benefits | 86,385. | 72,909. | 9,960. | 3.516 |
| 9 0 | Payroll taxes | 83,185. | 70,152. | 9,478. | 3,516 3,555 |
| 1 | Fees for services (nonemployees): | , | | -, -, -, -, -, -, -, -, -, -, -, -, -, - | -, |
| ' a | | | | | |
| b | | 5,410. | | 5,410. | |
| c | • | 11,000. | | 11,000. | |
| | Lobbying | | | , | |
| e | | | | | |
| f | Investment management fees | | | | |
| g | | | | | |
| 3 | column (A), amount, list line 11g expenses on Sch O.) | | | | |
| 12 | Advertising and promotion | 68,924. | 51,716. | | 17,208 |
| 3 | Office expenses | 40,248. | 25,269. | 9,474. | 5,505 |
| 4 | Information technology | - | _ | | |
| 5 | Royalties | | | | |
| 6 | Occupancy | 15,822. | 13,380. | 1,741. | 701 |
| 7 | Travel | 17,590. | 16,877. | 385. | 328 |
| 8 | Payments of travel or entertainment expenses | | | | |
| | for any federal, state, or local public officials | | | | |
| 9 | Conferences, conventions, and meetings | 107,900. | 107,900. | | |
| 0 | Interest | | | | |
| 1 | Payments to affiliates | | | | |
| 2 | Depreciation, depletion, and amortization | | | | |
| 3 | Insurance | 3,024. | 2,506. | 359. | 159 |
| 4 | Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), | | | | |
| | amount, list line 24e expenses on Schedule 0.) | 150 004 | 150 004 | | |
| a | | 150,024. | 150,024. | | |
| b | | 135,709. | 135,709. | | |
| c | TECHNOLOGY | 57,401. | 57,401. | 2 260 | 12 1 E 0 |
| d | BANK AND OTHER FEES | 27,866. | 1,347. 30,360. | 3,360. | 23,159 |
| | All other expenses | 30,360. 1,942,296. | 1,644,352. | 150,629. | 117 215 |
| 5 | Total functional expenses. Add lines 1 through 24e | т, 244, 430 . | 1,044,332. | 130,023. | 147,315 |
| 6 | Joint costs. Complete this line only if the organization | | | | |
| | reported in column (B) joint costs from a combined | | | | |
| | educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720) | | | | |
| | Check here if following SOP 98-2 (ASC 958-720) | | | | Form 990 (202 |

Form **990** (2022)

10570706 757767 CITI14128413 2022.04000 CITIZENS CLIMATE LOBBY

10570706 757767 CITI14128413 2022.04000 CITIZENS CLIMATE LOBBY

CITIZENS CLIMATE LOBBY

| | | Check if Schedule O contains a response or not | e to any line in this Part X | | | |
|-----------------------------|-----|--|------------------------------|---------------------------------|-----|---------------------------|
| | | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash - non-interest-bearing | | 1,596,191. | 1 | 675,577. |
| | 2 | Savings and temporary cash investments | | 575,283. | 2 | 495,880. |
| | 3 | Pledges and grants receivable, net | | | 3 | |
| | 4 | Accounts receivable, net | | 5,552. | 4 | 5,918. |
| | 5 | Loans and other receivables from any current or | | | | |
| | | trustee, key employee, creator or founder, subst | antial contributor, or 35% | | | |
| | | controlled entity or family member of any of thes | e persons | | 5 | |
| | 6 | Loans and other receivables from other disquali | | | | |
| | | under section 4958(f)(1)), and persons described | d in section 4958(c)(3)(B) | | 6 | |
| ts | 7 | Notes and loans receivable, net | | | 7 | |
| Assets | 8 | Inventories for sale or use | | | 8 | |
| Ä | 9 | Prepaid expenses and deferred charges | | 4,406. | 9 | 7,948. |
| | 10a | Land, buildings, and equipment: cost or other | | | | |
| | | basis. Complete Part VI of Schedule D | 10a | | | |
| | b | Less: accumulated depreciation | 10b | | 10c | |
| | 11 | Investments - publicly traded securities | | | 11 | |
| | 12 | Investments - other securities. See Part IV, line 1 | | | 12 | |
| | 13 | Investments - program-related. See Part IV, line | 11 | | 13 | |
| | 14 | Intangible assets | | | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | | 15 | |
| | 16 | Total assets. Add lines 1 through 15 (must equa | | 2,181,432. | 16 | 1,185,323. |
| | 17 | Accounts payable and accrued expenses | | | 17 | |
| | 18 | Grants payable | | | 18 | |
| | 19 | Deferred revenue | | | 19 | |
| | 20 | Tax-exempt bond liabilities | | | 20 | |
| | 21 | Escrow or custodial account liability. Complete I | Part IV of Schedule D | | 21 | |
| es | 22 | Loans and other payables to any current or form | ner officer, director, | | | |
| Liabilities | | trustee, key employee, creator or founder, subs | antial contributor, or 35% | | | |
| iab | | controlled entity or family member of any of thes | e persons | | 22 | |
| - | 23 | Secured mortgages and notes payable to unrela | ted third parties | | 23 | |
| | 24 | Unsecured notes and loans payable to unrelated | d third parties | | 24 | |
| | 25 | Other liabilities (including federal income tax, pa | yables to related third | | | |
| | | parties, and other liabilities not included on lines | 17-24). Complete Part X | 1.55 0.40 | | 4 5 4 9 9 5 |
| | | of Schedule D | | 165,240. | 25 | 151,897. |
| | 26 | Total liabilities. Add lines 17 through 25 | | 165,240. | 26 | 151,897. |
| S | | Organizations that follow FASB ASC 958, che | ck here X | | | |
| JCe | | and complete lines 27, 28, 32, and 33. | | 0 01 0 1 0 0 | | 1 000 406 |
| alaı | 27 | Net assets without donor restrictions | | 2,016,192. | 27 | 1,033,426. |
| dB | 28 | Net assets with donor restrictions | | | 28 | |
| n | | Organizations that do not follow FASB ASC 9 | 58, check here | | | |
| Net Assets or Fund Balances | | and complete lines 29 through 33. | | | | |
| ets (| 29 | Capital stock or trust principal, or current funds | | | 29 | |
| SSE | 30 | Paid-in or capital surplus, or land, building, or ec | | | 30 | |
| et A | 31 | Retained earnings, endowment, accumulated in | | | 31 | 1 0 2 2 4 2 6 |
| ž | 32 | Total net assets or fund balances | | 2,016,192. | 32 | 1,033,426. |
| | 33 | Total liabilities and net assets/fund balances | | 2,181,432. | 33 | 1,185,323. |

Part X Balance Sheet

12

CITI1401

Form **990** (2022)

| Part XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI | <u>530.</u> |
|--|-------------|
| | |
| | |
| | |
| | 296. |
| 2 Total expenses (must equal Part IX, column (A), line 25) 2 1,942, | |
| 3 Revenue less expenses. Subtract line 2 from line 1 | |
| 4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 2,016, | 192. |
| 5 Net unrealized gains (losses) on investments 5 | |
| 6 Donated services and use of facilities6 | |
| 7 Investment expenses 7 | |
| 8 Prior period adjustments 8 | |
| 9 Other changes in net assets or fund balances (explain on Schedule O) 9 | 0. |
| 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, | |
| column (B)) 10 1 , 033 , | 426. |
| Part XII Financial Statements and Reporting | |
| Check if Schedule O contains a response or note to any line in this Part XII | X |
| Ye | s No |
| 1 Accounting method used to prepare the Form 990: Cash X Accrual Other | |
| If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. | |
| 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a | X |
| If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a | |
| separate basis, consolidated basis, or both: | |
| Separate basis Consolidated basis Both consolidated and separate basis | |
| b Were the organization's financial statements audited by an independent accountant? | |
| If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, | |
| consolidated basis, or both: | |
| X Separate basis Consolidated basis Both consolidated and separate basis | |
| c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, | |
| review, or compilation of its financial statements and selection of an independent accountant? | |
| If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. | |
| 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the | |
| Uniform Guidance, 2 C.F.R. Part 200, Subpart F? 3a | X |
| b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit | |
| or audits, explain why on Schedule O and describe any steps taken to undergo such audits 3b | |

Form **990** (2022)

232012 12-13-22

13 10570706 757767 CITI14128413 2022.04000 CITIZENS CLIMATE LOBBY CITI1401

| CITIZENS | CLIMATE | ЪC |
|----------|---------|-----|
| | | 100 |

** PUBLIC DISCLOSURE COPY **

Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2022

Employer identification number

| Schedule | В |
|------------|---|
| (Form 990) | |

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one):

CITIZENS CLIMATE LOBBY

| Filers of: | Section: |
|--------------------|--|
| Form 990 or 990-EZ | $\fbox{3}$ 501(c)(4) (enter number) organization |
| | 4947(a)(1) nonexempt charitable trust not treated as a private foundation |
| | 527 political organization |
| Form 990-PF | 501(c)(3) exempt private foundation |
| | 4947(a)(1) nonexempt charitable trust treated as a private foundation |
| | 501(c)(3) taxable private foundation |

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

General Rule

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

Special Rules

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

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

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

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

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

Schedule B (Form 990) (2022)

CITIZENS CLIMATE LOBBY

Name of organization

223452 11-15-22

Employer identification number

26-3521896

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 X Person Payroll 25,500. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 2 X Person Payroll 20,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 3 X Person Payroll 24,450. Noncash (Complete Part II for noncash contributions.) (c) (d) (a) (b) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 4 Х Person Payroll 33,681. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 5 X Person Payroll 5,000. Noncash (Complete Part II for noncash contributions.) (d) (b) (c) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 6 X Person Pavroll 18,000. Noncash \$ (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2022)

15

10570706 757767 CITI14128413 2022.04000 CITIZENS CLIMATE LOBBY

CITI1401

CITIZENS CLIMATE LOBBY

Name of organization

223452 11-15-22

Employer identification number

26-3521896

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 7 X Person Payroll 50,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution X 8 Person Payroll 8,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 9 X Person Payroll 6,000. Noncash \$ (Complete Part II for noncash contributions.) (c) (d) (a) (b) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution 10 Х Person Payroll 5,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 11 X Person Payroll 5,000. Noncash (Complete Part II for noncash contributions.) (d) (b) (c) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 12 X Person Pavroll 24,000. Noncash \$ (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2022)

16

10570706 757767 CITI14128413 2022.04000 CITIZENS CLIMATE LOBBY

CITI1401

Name of organization

Page 2 Employer identification number

26-3521896

CITIZENS CLIMATE LOBBY

| Part I | Contributors (see instructions). Use duplicate copies of Part I if additiona | al space is needed. | |
|--------------|--|----------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 13 | | \$92,574. | Person Payroll Noncash X (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 14 | | \$90,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 15 | | \$5,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 16 | | \$5,000. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 17 | | \$ <u> </u> | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 223452 11-15 | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (2022 |

CITI1401

10570706 757767 CITI14128413 2022.04000 CITIZENS CLIMATE LOBBY

| Part II | ENS CLIMATE LOBBY Noncash Property (see instructions). Use duplicate copies of Part II | | 6-3521896 |
|------------------------------|--|---|-----------------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| 13 | STOCKS | | 03/16/22 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (See instructions.) | (d) Date received |
| | | | |
| 23453 11-1 | 5-22 1 Q | | Schedule B (Form 990) (2022 |

Name of organization

Employer identification number

18

10570706 757767 CITI14128413 2022.04000 CITIZENS CLIMATE LOBBY

CITI1401

| Schedule | B (Form 990) (2022) | | | Page 4 |
|-----------------|---|---|-------------------------------------|--------------------------------|
| Name of o | organization | | | Employer identification number |
| CTTTZ | ENS CLIMATE LOBBY | | | 26-3521896 |
| | | ns to organizations described in s | ection 501(c)(7), (8), or (10) | |
| | from any one contributor. Complete columns (a) th | prough (e) and the following line ent | ry For organizations | |
| | completing Part III, enter the total of exclusively religious, chi Use duplicate copies of Part III if additional sp | aritable, etc., contributions of \$1,000 or I Dace is needed. | ess for the year. (Enter this info. | once.) • |
| (a) No. | | | | |
| from Part I | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | (e) Transfer of gif | t | |
| | | | | |
| | Transferee's name, address, an | d ZIP + 4 | Relationship of tra | ansferor to transferee |
| | | | | |
| | | | | |
| | | | | |
| (a) No. | | | | |
| from | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held |
| Part I | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | (e) Transfer of gif | t | |
| | | () | | |
| | Transferee's name, address, an | d ZIP + 4 | Relationship of tra | ansferor to transferee |
| | | | | |
| | | | | |
| | | | | |
| (a) No. | | | | |
| from | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held |
| Part I | | | | |
| | | | | |
| | | | | |
| | | | | |
| | • | (e) Transfer of gif | t | |
| | | | | |
| | Transferee's name, address, an | d ZIP + 4 | Relationship of tra | ansferor to transferee |
| | | | | |
| | | | | |
| | | [| | |
| (a) No | | | | |
| (a) No. from | (b) Purpose of gift | (c) Use of gift | (d) Des | cription of how gift is held |
| Part I | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | (e) Transfer of gif | ' t | |
| | | | | |
| | Transferee's name, address, an | d ZIP + 4 | Relationship of tra | ansferor to transferee |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 223454 11-1 | 5-22 | 19 | | Schedule B (Form 990) (2022) |

10570706 757767 CITI14128413 2022.04000 CITIZENS CLIMATE LOBBY CITI1401

| SCHEDULE [|
|------------|
|------------|

| (Form 9 | 990) |
|---------|------|
|---------|------|

Part I

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.



Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

| | | | = |
|----------|---------|-------|---|
| CITIZENS | CLIMATE | LOBBY | |
| | | | |

| | CITIZENS CLIMATE LOBBY | 26-3521896 |
|---|---|--------------------------|
| ſ | Organizations Maintaining Donor Advised Funds or Other Similar Funds or A | ccounts. Complete if the |
| | arganization anawarad "Vaa" on Farm 000. Dort IV line 6 | |

| | organization answered "Yes" on Form 990, Part IV, line | | | |
|-------|---|-------------------------------|-------------------------|---------------------------------|
| | | (a) Donor advised t | iunds (| 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 v | vriting that the assets held | in donor advised fun | ds |
| | are the organization's property, subject to the organization's e | exclusive legal control? | | YesNo |
| 6 | Did the organization inform all grantees, donors, and donor ad | dvisors in writing that gran | t funds can be used o | only |
| | for charitable purposes and not for the benefit of the donor of | r donor advisor, or for any | other purpose confer | ring |
| _ | impermissible private benefit? | | | |
| Par | rt II Conservation Easements. Complete if the org | anization answered "Yes" | on Form 990, Part IV | , line 7. |
| 1 | Purpose(s) of conservation easements held by the organization | | | |
| | Preservation of land for public use (for example, recreat | | | prically important land area |
| | Protection of natural habitat | F | Preservation of a certi | fied historic structure |
| | Preservation of open space | | | |
| 2 | Complete lines 2a through 2d if the organization held a qualifi | ied conservation contribut | ion in the form of a co | |
| | day of the tax year. | | | Held at the End of the Tax Year |
| а | | | | 2a |
| b | | | | 2b |
| С | Number of conservation easements on a certified historic stru- | | | 2c |
| d | Number of conservation easements included in (c) acquired a | | | |
| _ | historic structure listed in the National Register | | | 2d |
| 3 | Number of conservation easements modified, transferred, rele | eased, extinguished, or ter | minated by the organ | nization during the tax |
| | year | | | |
| 4 | Number of states where property subject to conservation eas | | | |
| 5 | Does the organization have a written policy regarding the peri | | | |
| • | violations, and enforcement of the conservation easements it | | ····· | |
| 6 | Staff and volunteer hours devoted to monitoring, inspecting, | nandling of violations, and | enforcing conservation | on easements during the year |
| 7 | Amount of expanses incurred in monitoring, increating, hand | ling of violations, and onfo | raing concentration of | expenses during the year |
| 7 | Amount of expenses incurred in monitoring, inspecting, hand | ing of violations, and erno | reing conservation ea | asements during the year |
| 8 | Does each conservation easement reported on line 2(d) abov | a satisfy the requirements | of section 170(b)(4)(F | 2)/i) |
| 0 | and section 170(h)(4)(B)(ii)? | | | |
| 9 | In Part XIII, describe how the organization reports conservation | | | |
| 5 | balance sheet, and include, if applicable, the text of the footn | | • | |
| | organization's accounting for conservation easements. | ioto to the organization of | | |
| Par | t III Organizations Maintaining Collections of | Art, Historical Trea | sures, 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 | 8, not to report in its reven | ue statement and ba | lance sheet works |
| | of art, historical treasures, or other similar assets held for pub | lic exhibition, education, c | r research in furthera | nce of public |
| | service, provide in Part XIII the text of the footnote to its finan | | | |
| b | If the organization elected, as permitted under FASB ASC 95 | | | e sheet works of |
| | art, historical treasures, or other similar assets held for public | exhibition, education, or r | esearch in furtheranc | e of public service, |
| | provide the following amounts relating to these items: | | | |
| | (i) Revenue included on Form 990, Part VIII, line 1 | | | \$ |
| | | | | |
| 2 | If the organization received or held works of art, historical trea | | | |
| | the following amounts required to be reported under FASB A | | | |
| а | Revenue included on Form 990, Part VIII, line 1 | - | | \$ |
| | Assets included in Form 990, Part X | | | |
| LHA | For Paperwork Reduction Act Notice, see the Instructions | s for Form 990. | | Schedule D (Form 990) 2022 |
| 23205 | 1 09-01-22 | | | |

| Sche | edule D (Form 990) 2022 CITIZEN | S CLIMATE | LOBBY | | | | | 26-35 | 2189 | 6 Pa | age 2 |
|---------|--|---------------------------------|-----------------|------------|---------------------|-----------|----------------------|---------------|------------------|------------|--------------|
| Pa | rt III Organizations Maintaining C | Collections of A | rt, Histori | cal Tr | easures, o | or Oth | er Simi | ilar Asse | ts (conti | nued) | |
| 3 | Using the organization's acquisition, access | on, and other record | ls, check an | y of the | following that | t make : | significar | nt use of its | | | |
| | collection items (check all that apply): | | | | | | | | | | |
| а | Public exhibition | d | 🗆 🛄 Loar | n or exc | hange progra | m | | | | | |
| b | Scholarly research | e | Othe | er | | | | | | | |
| с | Preservation for future generations | | | | | | | | | | |
| 4 | Provide a description of the organization's c | ollections and explai | n how they f | urther t | he organizatio | on's exe | empt pur | oose in Par | t XIII. | | |
| 5 | During the year, did the organization solicit of | or receive donations | of art, histori | ical trea | sures, or othe | er simila | r assets | _ | _ | | - |
| | to be sold to raise funds rather than to be m | | | | | | | | Yes | | No |
| Pa | rt IV Escrow and Custodial Arran | | ete if the org | anizatio | n answered " | Yes" or | n Form 99 | 90, Part IV, | line 9, o | r | |
| | reported an amount on Form 990, Pa | rt X, line 21. | | | | | | | | | |
| 1a | Is the organization an agent, trustee, custod | | 2 | | | | | | 7 | | 7 |
| | on Form 990, Part X? | | | | | | | L | Yes | | No |
| b | If "Yes," explain the arrangement in Part XIII | and complete the fo | llowing table | e: | | | | | • | | |
| | | | | | | | | | Amour | t | |
| | Beginning balance | | | | | | | | | | |
| | Additions during the year | | | | | | | | | | |
| | Distributions during the year | | | | | | | | | | |
| t | • | | | | | | | | | | |
| | Did the organization include an amount on F | | | | | | • • • • • • | L | Yes | | J No ∣ |
| | If "Yes," explain the arrangement in Part XIII. rt V Endowment Funds. Complete i | | | | | | | | | | |
| 1 41 | | (a) Current year | (b) Prior | | (c) Two years | | | vears back | (e) Fou | r vears | back |
| 1a | Beginning of year balance | (, | (10) 1 1101 | <i>,</i> | (0) | | () | , | (-) | , , | |
| ia b | Contributions | | | | | | | | | | |
| с С | Net investment earnings, gains, and losses | | | | | | | | | | |
| d | Grants or scholarships | | | | | | | | | | |
| | Other expenditures for facilities | | | | | | | | | | |
| Ū | and programs | | | | | | | | | | |
| f | Administrative expenses | | | | | | | | | | |
| | End of year balance | | | | | | | | | | |
| 2 | Provide the estimated percentage of the cur | rent vear end balanc | e (line 1a. co | olumn (a | a)) held as: | | | | | | |
| a | Board designated or quasi-endowment | | % | | ,,, | | | | | | |
| b | Permanent endowment | % | | | | | | | | | |
| с | Term endowment | % | | | | | | | | | |
| | The percentages on lines 2a, 2b, and 2c sho | ould equal 100%. | | | | | | | | | |
| 3a | Are there endowment funds not in the posse | ession of the organization | ation that are | e held a | nd administe | red for t | the | | | | |
| | organization by: | | | | | | | | | Yes | No |
| | (i) Unrelated organizations | | | | | | | | 3a(i) | | |
| | (ii) Related organizations | | | | | | | | 3a(ii) | | |
| b | If "Yes" on line 3a(ii), are the related organization | ations listed as requi | red on Sche | dule R? | | | | | 3b | | |
| 4 | Describe in Part XIII the intended uses of the | 0 | wment fund | S. | | | | | | | |
| Pa | rt VI Land, Buildings, and Equipm | | | | | | | | | | |
| | Complete if the organization answere | d "Yes" on Form 990 |), Part IV, lin | e 11a. S | See Form 990 | , Part X | , line 10. | | | | |
| | Description of property | (a) Cost or o basis (investr | | | or other (other) | • • | ccumula preciatio | | (d) Boo | k valu | e |
| 1a | Land | | | | | | | | | | |
| | Buildings | | | | | | | | | | |
| | Leasehold improvements | | | | | | | | | | |
| d | Equipment | | | | | | | | | | |
| | Other | | | | | | | | | | |
| Tota | I. Add lines 1a through 1e. (Column (d) must e | equal Form 990, Part | X, column (E | 3), line 1 | 0c.) | | | | D (7 | | 0. |

Schedule D (Form 990) 2022

232052 09-01-22

| 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 en | d-of-year market value |
| 1) Financial derivatives | | | |
| 2) Closely held equity interests | | | |
| 3) Other | | | |
| (A) | | | |
| (B) | | | |
| (C) | | | |
| (D) | | | |
| (E) | | | |
| (F) | | | |
| (G) | | | |
| (H) | | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) | | | |
| Part VIII Investments - Program Related. | | | |
| Complete if the organization answered "Yes" | on Form 990 Part IV line | 11c See Form 990 Part X line 13 | |
| (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or en | d-of-vear 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. | | | |
| Complete if the organization answered "Yes" | Description | TTd. See Form 990, Part X, line 15. | (b) Book value |
| | Description | | |
| (1) | | | |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) lin | 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 2 | |
| (a) Description of liability | | | (b) Book value |
| (1) Federal income taxes | | | |
| (2) DUE TO RELATED PARTIES | | | 151,897. |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) lin | e 25) | | 151,897. |
| | | | |

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... 🗴

Schedule D (Form 990) 2022

232053 09-01-22

| Sche | dule D (Form 990) 2022 CITIZENS CLIMATE LOBBY | | 26-3 | 3521896 Page 4 |
|---|---|---|------------------|--------------------------------------|
| Pa | t XI Reconciliation of Revenue per Audited Financial Sta | tements With Rever | | |
| | Complete if the organization answered "Yes" on Form 990, Part IV, lin | e 12a. | | |
| 1 | Total revenue, gains, and other support per audited financial statements | | 1 | 959,530. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | | |
| а | Net unrealized gains (losses) on investments | 2a | | |
| b | Donated services and use of facilities | 2b | | |
| с | Recoveries of prior year grants | 2c | | |
| d | | | | |
| е | Add lines 2a through 2d | | | 0. |
| 3 | Subtract line 2e from line 1 | | | 959,530. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | | |
| b | Other (Describe in Part XIII.) | 4b | | _ |
| С | Add lines 4a and 4b | | 4c | 0. |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | | | 959,530. |
| | | | | |
| Pa | rt XII Reconciliation of Expenses per Audited Financial Sta | atements With Expe | | rn. |
| Pa | TXII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, lin | atements With Expe e 12a. | nses per Retu | |
| Pa 1 | rt XII Reconciliation of Expenses per Audited Financial Sta | atements With Expe e 12a. | nses per Retu | rn. 1,942,296. |
| | T XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, lin Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: | e 12a. | nses per Retu | |
| 1 | T XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, lin Total expenses and losses per audited financial statements | e 12a. | nses per Retu | |
| 1 2 a | XII Reconciliation of Expenses per Audited Financial Sta Complete if the organization answered "Yes" on Form 990, Part IV, lin Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments | 2a 2b | nses per Retu | |
| 1 2 a | XII Reconciliation of Expenses per Audited Financial Sta Complete if the organization answered "Yes" on Form 990, Part IV, lin Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities | 2a 2b | nses per Retu | |
| 1 2 a b c d | T XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, lin Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) | 2a 2a 2b 2c 2d 2d | nses per Retu | |
| 1 2 a b c d | TXII Reconciliation of Expenses per Audited Financial Sta Complete if the organization answered "Yes" on Form 990, Part IV, lin Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses | 2a 2a 2b 2c 2d 2d | nses per Retu | 1,942,296. |
| 1 2 a b c d | T XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, lin Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) | 2a 2a 2b 2c 2d 2d | nses per Retu | |
| 1 2 b c d e | T XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, lin Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: | 2a 2a 2b 2c 2d 2d | nses per Retu | 1,942,296. |
| 1 2 b c d 3 | t XII Reconciliation of Expenses per Audited Financial Sta Complete if the organization answered "Yes" on Form 990, Part IV, lin Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 | 2a 2a 2b 2c 2d 2d | nses per Retu | 1,942,296. |
| 1 2 b c d e 3 4 a | T XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, lin Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: | 2a 2a 2b 2c 2d 2d | nses per Retu | 1,942,296. |
| 1 2 3 4 2 4 3 4 5 | T XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, lin Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) | 2a 2a 2b 2c 2c 2d 2d 4a 4b 4b | 1 2e 3 | 1,942,296. 0. 1,942,296. 0. |
| 1 2 a b c d e 3 4 a b c 5 | T XII Reconciliation of Expenses per Audited Financial State Complete if the organization answered "Yes" on Form 990, Part IV, lin Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) | 2a 2a 2b 2c 2c 2d 2d 4a 4b 4b | 1 2e 3 | 1,942,296. |

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

PART X, LINE 2:

| THE ORGANIZATION FOLLOWS ACCOUNTING STANDARDS WHICH CLARIFY THE ACCOUNTING | | | | | | |
|--|--|--|--|--|--|--|
| FOR UNCERTAINTY IN INCOME TAXES RECOGNIZED IN ITS FINANCIAL STATEMENTS AND | | | | | | |
| PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE | | | | | | |
| FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR | | | | | | |
| EXPECTED TO BE TAKEN IN A TAX RETURN. IT ALSO PROVIDES GUIDANCE ON | | | | | | |
| DERECOGNITION AND MEASUREMENT OF A TAX POSITION TAKEN OR TO BE TAKEN IN A | | | | | | |
| TAX RETURN. AS OF DECEMBER 31, 2022 AND 2021, THE ORGANIZATION HAS NOT | | | | | | |
| ACCRUED INTEREST OR PENALTIES RELATED TO UNCERTAIN TAX POSITIONS. | | | | | | |
| | | | | | | |

| | | | | Sc | hedule D (Form | 990) 2022 |
|---------------------------|------------|-----------------------------------|----------|-------|----------------|-----------|
| 2055 09-01-22 | | 24 | | | | |
| 70706 757767 CITI14128413 | 2022 04000 | ଌ ୳ ୯୮ሞ୮୵ଢ଼ୖୖୖୖୖୖୖୖ | ҀҬӷтмҳѿѿ | LOBBY | <u>ст</u> . | T1401 |
| | | | | | <u> </u> | |

| SC | HEDULE J Compensation Information | 0 | MB No. ⁻ | 1545-00 |)47 |
|------|---|--------------|---------------------|---------|----------|
| | rm 990) For certain Officers, Directors, Trustees, Key Employees, and Highest | | 20 | 77 |) |
| • | Compensated Employees | | 20 | 22 | - |
| Dene | tment of the Treasury Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990. | C | pen to | Publ | lic |
| | tment of the Treasury Attach to Form 990. al Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. | | Inspe | ction | |
| Nam | e of the organization E | mployer iden | | | mber |
| | CITIZENS CLIMATE LOBBY | 26-352 | 189 | 6 | |
| Pa | rt I Questions Regarding Compensation | | | | |
| | | | | Yes | No |
| 1a | Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 99 | 90, | | | |
| | Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. | | | | |
| | First-class or charter travel Housing allowance or residence for persona | | | | |
| | Travel for companions Payments for business use of personal resid | dence | | | |
| | Tax indemnification and gross-up payments | | | | |
| | Discretionary spending account | chef) | | | |
| | | | | | |
| b | If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or | | 4 | | |
| • | reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain | | 1b | | |
| 2 | Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, | | • | | |
| | trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? | | 2 | | <u> </u> |
| 3 | Indicate which, if any, of the following the organization used to establish the compensation of the organization's | | | | |
| 5 | CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization | n to | | | |
| | establish compensation of the CEO/Executive Director, but explain in Part III. | 110 | | | |
| | Compensation committee Written employment contract | | | | |
| | Independent compensation consultant Compensation survey or study | | | | |
| | Form 990 of other organizations | nmittee | | | |
| | | in netoo | | | |
| 4 | During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing | | | | |
| | organization or a related organization: | | | | |
| а | Receive a severance payment or change-of-control payment? | | 4a | | X |
| b | Participate in or receive payment from a supplemental nonqualified retirement plan? | | 4b | | X |
| с | Participate in or receive payment from an equity-based compensation arrangement? | | 4c | | X |
| | If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. | | | | |
| | | | | | |
| | Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. | | | | |
| 5 | For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation | | | | |
| | contingent on the revenues of: | | | | |
| а | The organization? | | 5a | | X |
| b | Any related organization? | | 5b | | X |
| | If "Yes" on line 5a or 5b, describe in Part III. | | | | |
| 6 | For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation | | | | |
| | contingent on the net earnings of: | | | | v |
| a | The organization? | | 6a | | X X |
| b | Any related organization? | | 6b | | |
| - | If "Yes" on line 6a or 6b, describe in Part III. | | | | |
| 1 | For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments | | 7 | | x |
| ~ | not described on lines 5 and 6? If "Yes," describe in Part III | | 7 | | |
| 8 | Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract execution described in Regulations section 52 (1958 4(a)/2)2 If "Yes," describe in Regulations | | | | x |
| 0 | initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III | | 8 | | - 21 |
| 9 | If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 (1958-6/c)? | | 9 | | |
| | Regulations section 53.4958-6(c)? For Paperwork Reduction Act Notice, see the Instructions for Form 990. | Schedule | | n 990 |) 2022 |

232111 10-18-22

26-3521896

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

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

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

| (A) Name and Title | | (B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation | | | other deferred | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | in column (B) |
|--------------------|-------------|--|---|---|----------------|-------------------------|------------------------------------|---|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | compensation | | | reported as deferred on prior Form 990 |
| (1) MADELEINE PARA | (i) | 72,715. | 0. | 0. | 0. | 0. | 72,715. | 0. |
| EXECUTIVE DIRECTOR | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (i) (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |

Part III Supplemental Information

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

Schedule J (Form 990) 2022

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047 Open to Public Inspection Employer identification number

26-3521896

CITIZENS CLIMATE LOBBY

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

PERSONAL AND POLITICAL POWER.

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

THE RETURNS ARE REVIEWED AND APPROVED BY OFFICERS BEFORE FILING.

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

THE ORGANIZATION REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES

COMPLIANCE BY ANNUAL REVIEW.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL, CA, CO, CT, DC, FL, GA, IL, KS, KY, ME, MD, MA, MS, MO, NJ, NY, NC, ND, OK, OR, PA, RI, SC, TN UT,WA,WI

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

THE ORGANIZATION MAKES DOCUMENTS AVAILABLE TO THE PUBLIC.

FORM 990, PART XII, LINE 2C

THERE WAS NO CHANGE DURING THE YEAR.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 232211 10-28-22

Schedule O (Form 990) 2022

28 10570706 757767 CITI14128413 2022.04000 CITIZENS CLIMATE LOBBY