Form 99

Department of the Treasury

Internal Revenue Service

** 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.



and ending A For the 2023 calendar year, or tax year beginning в Check if applicable: C Name of organization D Employer identification number Address change CITIZENS CLIMATE LOBBY]Name]change 26-3521896 Doing business as Initial Ireturn Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Final 1330 ORANGE AVENUE, # 309 (619)757 - 6719termin-ated 722,545. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended CORONADO, CA 92118 H(a) Is this a group return Applica-F Name and address of principal officer: OLIVIA MELONAS Yes X No for subordinates? pending SAME AS C ABOVE H(b) Are all subordinates included? __Yes L__No 501(c)(3) X 501(c) ((insert no.) Tax-exempt status: 4 4947(a)(1) or 527 If "No," attach a list. See instructions) CITIZENSCLIMATELOBBY.ORG H(c) Group exemption number J Website: **K** Form of organization: **X** Corporation Trust Association Other L Year of formation: 2008 M State of legal domicile: CA Part I Summary Briefly describe the organization's mission or most significant activities: STAKEHOLDER ADVOCACY, GRASSROOTS Activities & Governance LOBBYING AND DIRECT LOBBYING TO ENACT CLIMATE SOLUTIONS. 2 Check this box ot if the organization discontinued its operations or disposed of more than 25% of its net assets. 9 Number of voting members of the governing body (Part VI, line 1a) 3 3 9 Number of independent voting members of the governing body (Part VI, line 1b) 4 4 0 5 Total number of individuals employed in calendar year 2023 (Part V, line 2a) 5 20378 6 6 Total number of volunteers (estimate if necessary) Ο. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, Part I, line 11 7b Prior Year Current Year 936,103. 691,764. Contributions and grants (Part VIII, line 1h) 8 Revenue 18,904. 29,242. Program service revenue (Part VIII, line 2g) 9 3,675. 1,532. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 0. 848. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 959,530. 722,538 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 811. 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 1,270,207. 836,634. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 Expenses 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) Ο. 59,249. **b** Total fundraising expenses (Part IX, column (D), line 25) 442,032. 671,278. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1,942,296. 1,278,666. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 -982,766. -556,128. 19 Revenue less expenses. Subtract line 18 from line 12 Assets or d Balances Beginning of Current Year End of Year 1,185,323. 570.954. Total assets (Part X, line 16) 20 151,897. 88,840. 21 Total liabilities (Part X, line 26) Net / 033,426. 482,114. 22 Net assets or fund balances. Subtract line 21 from line 20 . Part II Signature Block

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

Sign	Signature of officer	Date										
	Type or print name and title											
	Print/Type preparer's name	Preparer's signature	Date	Check	PTIN							
Paid	LUKAS DAVIS		08/29/	24 self-employed	P00668234							
Preparer	Firm's name CONSIDINE & CONSI	DINE	I	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.619.2												
May the I	RS discuss this return with the preparer shown abo	ove? See instructions			X Yes No							
LHA For	HA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)											

3200	12-21-23			
			Form 9	90 (2
4e	(Expenses \$ including grants of \$) (Revenue \$ Total program service expenses 1,032,955.		1	
4d	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$			
4c	(Code:) (Expenses \$ including grants of \$)	(Revenue \$		
łb	(Code:) (Expenses \$ including grants of \$)	(Revenue \$		
	 EDUCATING AND SUPPORTING CONGRESSIONAL LIAISONS. MOBILIZING ENDORSEMENTS FOR CLIMATE LEGISLATION. 			
	GRASSROOTS LOBBYING EFFORTS.		L	
	CLIMATE LEGISLATION. - PERFORMING DIRECT LOBBYING EFFORTS AND PROVIDING SU			
	- PROVIDING TRAININGS, EVENTS, AND CALLS TO ACTION R	ELATED TO	SPECI	FIC
	SPECIFIC CLIMATE LEGISLATION AT THE STATE AND NATIONAL ACTIVITIES INCLUDE:	AL LEVELS.	,	
4a	CITIZENS' CLIMATE LOBBY PROGRAM ACTIVITIES ARE RELATI		NCING	
4.4	revenue, if any, for each program service reported.		29,	
4	Describe the organization's program service accomplishments for each of its three largest program servic Section $501(c)(3)$ and $501(c)(4)$ organizations are required to report the amount of grants and allocations t			
3	Did the organization cease conducting, or make significant changes in how it conducts, any program server If "Yes," describe these changes on Schedule O.	ices?	Yes	Ă
_	If "Yes," describe these new services on Schedule O.			
2	Did the organization undertake any significant program services during the year which were not listed on prior Form 990 or 990-EZ?		Yes	x
	ENACT CLIMATE SOLUTIONS.			
	LOBBYISTS, ENGAGES WITH STAKEHOLDERS, AND LOBBIES ELI			TC
1	Briefly describe the organization's mission: CITIZENS' CLIMATE LOBBY MOBILIZES, EDUCATES AND TRAIN			
Pai	t III Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III			1
				Pa

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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	4		
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,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? 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		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i>	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			X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part IX</i>	11d		x
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	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
	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			
		16		X
17	r for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		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

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22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
LL	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			37
	Schedule K. If "No," go to line 25a	24a		X
	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	24c		
Ь	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24C 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	2-10		
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		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			v
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
а	"Yes," complete Schedule L, Part IV	28a		x
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?/f	200		
•	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in noncash 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? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			v
	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			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
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	554		<u> </u>
5	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?			
De	Note: All Form 990 filers are required to complete Schedule O	38	X	
Par				
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	Yes	
10	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a		res	No
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c		
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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,	0		
	filed for the calendar year ending with or within the year covered by this return 2a	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?			Х
	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>		Х
b	If "Yes," enter the name of the foreign country	_		
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_		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?			
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			х
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	0		
-	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section $170(c)$.			Х
				<u>л</u>
	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.		х
		7c		л
	If "Yes," indicate the number of Forms 8282 filed during the year 7d	7.		
e	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 k	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required			
-				
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8		
9	sponsoring organization have excess business holdings at any time during the year?			
		9a		
a b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	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			
14a	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			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

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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.

800	Check if Schedule O contains a response or note to any line in this Part VI				X				
Sec	tion A. Governing body and Management			Yes	N				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	9						
	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 direct supervision								
	of officers, directors, trustees, or key employees to a management company or other person?								
4	Did the organization make any significant changes to its governing documents since the prior Form				2				
5	Did the organization become aware during the year of a significant diversion of the organization's a				2				
6	Did the organization have members or stockholders?				2				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or								
	more members of the governing body?		7a		2				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,								
	persons other than the governing body?		7b		2				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the y		- 10						
	The governing body?		8a	x					
h	Each committee with authority to act on behalf of the governing body?			X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re		0.0						
Ŭ	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		2				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal								
				Yes	N				
10a	Did the organization have local chapters, branches, or affiliates?		10a	X					
	If "Yes," did the organization have written policies and procedures governing the activities of such		104						
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b	x					
112	Has the organization provided a complete copy of this Form 990 to all members of its governing bo		11a	X					
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		114						
			12a	x					
	 2a Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i> b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 								
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If		12b	X					
U	on Schedule O how this was done		12c	x					
13	Did the organization have a written whistleblower policy?			x					
14	Did the organization have a written document retention and destruction policy?			x					
15	Did the process for determining compensation of the following persons include a review and appro		14						
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision								
-	The organization's CEO, Executive Director, or top management official		15a		2				
D	Other officers or key employees of the organization		150		-				
16-		amont with a							
108	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrang		16a		2				
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu		104						
b									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the org		104						
200	exempt status with respect to such arrangements?		16b						
	List the states with which a copy of this Form 990 is required to be filed AL, CA, CO, CT,		C VV	мт					
17									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990,	and 990-1 (section 501(c))	3)s only) avail	abl				
	for public inspection. Indicate how you made these available. Check all that apply.								
		in on Schedule O)							
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents,	conflict of interest policy, a	and fina	ncial					
	statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's to AMANDA PILIERA (571)762, 2072	ooks and records							
	AMANDA RIVERA - $(571)762-3973$								
	1330 ORANGE AVENUE, # 309, CORONADO, CA 92118			0000	10.5				
32000	SEE SCHEDULE O FOR FULL LIST OF STATES		Form	1 990	(20				
<u>م</u> د	920 757767 CIMITAT29412 2022 04020 CIMITERIC CI INT		0.11	n T 1	<u>م</u> ۸				
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Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compe	nsated
	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)	(C)					(D)	(E)	(F)	
Name and title	Average	(do	Position				one	Reportable	Reportable	Estimated
	hours per	box	(do not check more than or box, unless person is both officer and a director/truste			is bot	h an	compensation	compensation	amount of
	week		cer an I	ndad I	lirecto	or/trus	tee)	. from	from related	other
	(list any	ndividual trustee or director						the	organizations	compensation
	hours for	or di	ee			sated		organization	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		ee	upens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	dual tr	tional		nploy	st cor yee	_	10334120)		organizations
	line)	ndivic	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			e.gam_atterie
(1) JENNIFER TYLER	39.89	-	-			<u> </u>				
SENIOR DIRECTOR OF GOVERNMENT AFFAIR		1				Х		134,636.	0.	0.
(2) BEN PENDERGRASS	36.66									
VP OF GOVERNMENT AFFAIRS						Х		123,728.	0.	0.
(3) MADELEINE PARA	12.14									
EXECUTIVE DIRECTOR						Х		32,479.	0.	0.
(4) OLIVA MELONAS	5.30									
CFO						Х		15,300.	0.	0.
(5) BRETT CEASE	0.45									-
VP OF PROGRAMS						Х		1,129.	0.	0.
(6) ZAURIE ZIMMERMAN	5.00									-
CHAIR		Х		X				0.	0.	0.
(7) ROSS ASTORIA	2.00									•
SECRETARY	10.00	X		X				0.	0.	0.
(8) MARY SELKIRK	10.00									•
TREASURER		X		X				0.	0.	0.
(9) NATALIE OROZCO	7.50							0	0	0
MEMBER		X						0.	0.	0.
(10) JERRY HINKLE	4.00									•
MEMBER		X						0.	0.	0.
(11) NEIL CHATTERJEE	0.00									•
MEMBER	0.00	X						0.	0.	0.
(12) JENNIFER BURTON	0.00							0	0	0
MEMBER	0 70	X						0.	0.	0.
(13) EFAON COBB	0.70							0	0	0
MEMBER		X						0.	0.	0.
(14) ALEX BOZMOSKI	1.75							0	0	0
MEMBER		X						0.	0.	0.
(15) PIPER CHRISTIAN	0.25	x						0.	0.	0.
MEMBER	9.00	^						0.	0.	0.
(16) MARK REYNOLDS	9.00	x						0.	0.	0.
MEMBER		^						0.	0.	0.
	1									Form 990 (2022)

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Form 990 (2023)	CITIZENS									26-35	218	896	Pa	age 8
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (B) (C) (D) (E) (F)														
	(B) Average hours per week	verage Position (do not check more than one box, unless person is both an officer and a director/trustee)					n an	(D) (E) Reportable Reportable compensation compensation from from related			ion amount o			
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC 1099-NEC)	5/	fr org and	pensa om the anizati d relate anizatio	e ion ed
						<u>×</u>	1.0							
th Cubtotal									307,272.		0.			0.
c Total from	continuation sheets to Part V lines 1b and 1c)	I, Section A							0. 307,272.		0. 0.			0.
	er of individuals (including but n ion from the organization	ot limited to th	iose	liste	ed at	ove	e) wh	io r	eceived more than \$100	0,000 of reportable			Yes	2 No
line 1a? If "	anization list any former officer, Yes," complete Schedule J for s	uch individual									[3		X
and related	ividual listed on line 1a, is the su organizations greater than \$15 son listed on line 1a receive or a	0,000? If "Yes,	" co	mple	ete S	Sche	edule	e J f	for such individual	-		4		X
	the organization? If "Yes," com pendent Contractors	plete Schedule	e J f	or sı	uch p	oers	on .					5		Х
•	his table for your five highest co ation. Report compensation for	•	•						n the organization's tax	•	ensa			
	(A) Name and business	address	NC	ONE	2			_	(B) Description of s	ervices	C	(C omper	;) nsatior	<u> </u>
	er of independent contractors (i f compensation from the organi		ot lir	mite	d to	thos (•	tec	above) who received n	nore than				
												Earm	990 ()	2023/

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Form **990** (2023)

Pa	rt V	/IÌI	Statement of Re	venue					
			Check if Schedule O d	contains a respons	e or note to any lir	ne in this Part VIII			
						(A) Total revenue	(B) Related or exempt	(C)	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1	b d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contr All other contributions, gifts, similar amounts not included Noncash contributions included in	1b 1c 1d ibutions) 1e grants, and 1f	691,764. 1,286.				
a O		h	Total. Add lines 1a-1f		·····	691,764.			
Program Service Revenue	2	a b c d	CONFERENCE		Business Code 900099	29,242.	29,242.		
В°		е							
۲ ۲		f	All other program service	revenue					
		g	Total. Add lines 2a-2f			29,242.			
	3 4		Income from investment c	of tax-exempt bond	proceeds	1,539.			1,539.
	5		Royalties						
	6	b c	Gross rents Less: rental expenses Rental income or (loss) Net rental income or (loss)	(i) Real 6a 6b 6c	(ii) Personal				
	7		Gross amount from sales of	(i) Securities					
Revenue		b	assets other than inventory Less: cost or other basis and sales expenses Gain or (loss)	7a 7b 7 7c -7					
Other Re	8	а	Net gain or (loss) Gross income from fundraisir including \$ contributions reported on	ng events (not of		-7.			-7.
	٥	с	Part IV, line 18 Less: direct expenses Net income or (loss) from Gross income from gamin	fundraising events	b				
	J	b	Part IV, line 19 Less: direct expenses	9. 	b				
	10	a b	Gross sales of inventory, I and allowances Less: cost of goods sold	ess returns)a Ib				
		С	Net income or (loss) from	sales of inventory					
sn					Business Code				
Miscellaneous Revenue	11	а							
llan /en		b							
Be		С							
Ĕ		d	All other revenue						

Form 990 (2023)

CITIZENS CLIMATE LOBBY

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d All other revenue e Total. Add lines 11a-11d

Total revenue. See instructions

Form **990** (2023)

1,532.

0.

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722,538.

29,242.

CITI1401

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CITIZENS CLIMATE LOBBY

(D)

Fundraising

expenses

9,351.

456.

711.

21,143.

54.

113.

27,421.

59,249.

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) (C) (A) Do not include amounts reported on lines 6b, Program service expenses Total expenses Management and general expenses 7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic

743,815.

36,274.

56,545.

20,200.

71,246.

19,158.

150,113.

41,454.

37,050.

606,252.

29,565.

46,087.

50,103.

16,562.

150,113.

29,498.

1,964.

128,212.

6,253.

9,747.

20,200.

2,542.

11,843.

186,462.

7,665.

	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

Benefits paid to or for members 4 5 Compensation of current officers, directors, trustees, and key employees 6 Compensation not included above to disgualified persons (as defined under section 4958(f)(1)) and

persons described in section 4958(c)(3)(B) 7 Other salaries and wages

Pension plan accruals and contributions (include 8 section 401(k) and 403(b) employer contributions)

Other employee benefits 9 Payroll taxes 10

Fees for services (nonemployees): 11

13

14

15

21

22 23

24

а

h

С

a Management b Legal Accounting С

d Lobbying Professional fundraising services. See Part IV, line 17 е Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, q column (A), amount, list line 11g expenses on Sch O.) Advertising and promotion 12

Office expenses Information technology Royalties

16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials ... Conferences, conventions, and meetings 19 Interest 20

> Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),

amount, list line 24e expenses on Schedule 0.) GENERAL AND ADMINISTRAT BANK AND OTHER FEES TECHNOLOGY LOBBYING d

e All other expenses Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization 26 reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

if following SOP 98-2 (ASC 958-720)

34,653. 34,653. 30,817. 30,817. 37,341. 37,341. 1,278,666. 1,032,955.

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Check here

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CITIZENS CLIMATE LOBBY

		Check if Schedule O contains a response or n	ote to any line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		675,577.	1	288,349.
	2	Savings and temporary cash investments		495,880.	2	1,621.
	3				3	
	4	Accounts receivable, net		5,918.	4	13,070.
	5	Loans and other receivables from any current or former officer, director,				
		trustee, key employee, creator or founder, substantial contributor, or 35%				
		controlled entity or family member of any of th			5	
	6	Loans and other receivables from other disqua				
		under section 4958(f)(1)), and persons describ			6	
ŝ	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
Ř	9	Prepaid expenses and deferred charges		7,948.	9	5,311.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D				
	b	Less: accumulated depreciation			10c	
	11	Investments - publicly traded securities			11	262,603.
	12	Investments - other securities. See Part IV, line			12	
	13	Investments - program-related. See Part IV, lin			13	
	14	Intangible assets			14	
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must ec		1,185,323.	16	570,954.
	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			21	
S	22	Loans and other payables to any current or fo				
Liabilities		trustee, key employee, creator or founder, sub				
abil		controlled entity or family member of any of th			22	
Ξ	23	Secured mortgages and notes payable to unre			23	
	24	Unsecured notes and loans payable to unrelat			24	
	25	Other liabilities (including federal income tax, p				
		parties, and other liabilities not included on lin				
		of Schedule D		151,897.	25	88,840.
	26	Total liabilities. Add lines 17 through 25		151,897.	26	88,840.
		Organizations that follow FASB ASC 958, cl				
ces		and complete lines 27, 28, 32, and 33.				
lan	27			1,033,426.	27	482,114.
Ba	28	Net assets with donor restrictions			28	
pur		Organizations that do not follow FASB ASC	958, check here			
ц		and complete lines 29 through 33.				
Net Assets or Fund Balances	29	Capital stock or trust principal, or current fund	ls		29	
set	30	Paid-in or capital surplus, or land, building, or			30	
As	31	Retained earnings, endowment, accumulated			31	
Net	32	Total net assets or fund balances		1,033,426.	32	482,114.
	33	Total liabilities and net assets/fund balances		1,185,323.	33	570,954.

Form 990 (2023)

Form 990 (2023) Part X | Balance Sheet

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_	990 (2023) CITIZENS CLIMATE LOBBY	26-	3521896	Pa	ige 12
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			38.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,27		
3	Revenue less expenses. Subtract line 2 from line 1	3			.28.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,03		
5	Net unrealized gains (losses) on investments	5		4,8	16.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	48	2,1	14.
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			-	X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedul				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2 b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	te basis	,		
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the				
	review, or compilation of its financial statements and selection of an independent accountant?			X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sc	hedule	Э.		
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 requ	ired au	dit		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2023)

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Schedule of Contributors

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

2023

Employer identification number

Schedule	В
(Form 990)	

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	\fbox 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

CITIZENS CLIMATE LOBBY

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.

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

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

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Employer identification number

CITIZENS CLIMATE LOBBY

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Part I	Contributors (see instructions). Use duplicate copies of Part I if addi	lional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Typ	(d) be of contribution
1		\$5,000.	rson X yroll oncash plete Part II for ash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Typ	(d) be of contribution
2		\$25,775.	rson X yroll oncash plete Part II for ash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Typ	(d) be of contribution
3		\$25,000.	rson X yroll oncash plete Part II for ash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions Typ	(d) be of contribution
		Total contributions Typ Per \$\$5,000.	
No.		Total contributions Type	rson X yroll oncash plete Part II for
No. 4 (a)	Name, address, and ZIP + 4	Total contributions Typ	e of contribution rson Vroll Vroll Vroll Vroll Vroll Vroll Vrol Vro
No. 4 (a) No.	Name, address, and ZIP + 4	Total contributions Type	ve of contribution rson X yroll
No. 4 (a) No. 5 (a)	(b) Name, address, and ZIP + 4	Total contributions Type	e of contribution rson X yroll

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Part I

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CITIZENS CLIMATE LOBBY

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

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(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
7		\$24,000.	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
8		\$7,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
9		\$6,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
<u> 10</u>	Name, address, and ZIP + 4	Total contributions	Type of contribution Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$5,000.	PersonXPayrollNoncash(Complete Part II for noncash contributions.)

	\$29,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
16		Schedule B (Form 990) (2023)

(c)

Total contributions

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(a)

No.

12

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(d)

Type of contribution

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(b)

Name, address, and ZIP + 4

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CITIZENS CLIMATE LOBBY

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13			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
14			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		\$5,300.	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			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
18		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (2023)

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Schedule B (F	orm 990) (2023)
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Employer identification number

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CITIZENS CLIMATE LOBBY

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
. 		\$	
(a) No. irom 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
. !		 \$	
3453 12-26-2	23		Schedule B (Form 990) (

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Schedule	B (Form 990) (2023)			Page 4			
Name of o	organization			Employer identification number			
CTTTZ	ENS CLIMATE LOBBY			26-3521896			
	Exclusively religious, charitable, etc., contributio from any one contributor. Complete columns (a) t completing Part III, enter the total of exclusively religious, ch Use duplicate copies of Part III if additional s	hrough (e) and the following line en aritable, etc., contributions of \$1,000 or	try For organizations) that total more than \$1,000 for the year			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held			
		(e) Transfer of gi	[
	Transferee's name, address, an	d ZIP + 4	Relationship of tr	ansferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, and ZIP + 4		Relationship of tr	ansferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	(d) Description of how gift is held			
·	(e) Transfer of gift						
	Transferee's name, address, an	d ZIP + 4	Relationship of tr	ansferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Des	scription of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, an	d ZIP + 4	Relationship of tr	ansferor to transferee			
323454 12-20	6-23	19		Schedule B (Form 990) (2023)			

15420829 757767 CITI14128413 2023.04020 CITIZENS CLIMATE LOBBY CITI1401

SCHEDULE [

Department of the Treasury

(Form 9	990)
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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.



CITI1401

Internal Revenue Service Name of the organization

15420829 757767 CITI14128413

CITIZENS CLIMATE LOBBY

Employer identification number 26-3521896

Pai	organizations Maintaining Donor Advise		or Accou	Ints.Complete if the
		(a) Donor advised funds	(b) Fund	ds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	d funds	
	are the organization's property, subject to the organization's	exclusive legal control?		Yes 📖 No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be us	sed only	
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose co	onferring	
Pa		-	rt IV, line 7.	
1	Purpose(s) of conservation easements held by the organizati	· · · · · · · · · · · · · · · · · · ·		
	Preservation of land for public use (for example, recrea		-	important land area
	Protection of natural habitat	Preservation of a	certified his	storic structure
-	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form of	a conserva	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			
b	Total acreage restricted by conservation easements			
С	Number of conservation easements on a certified historic str		2 c	
d	Number of conservation easements included on line 2c acqu			
	on a historic structure listed in the National Register			
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the c	organization	i during the tax
	year			
4	Number of states where property subject to conservation eas			
5	Does the organization have a written policy regarding the per			
	violations, and enforcement of the conservation easements in			
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	rvation eas	ements during the year
7	Amount of expenses incurred in monitoring, inspecting, hance	lling of violations, and enforcing conservatio	on easemer	nts during the year
8	Does each conservation easement reported on line 2d above			
	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservati	•		
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial statemen	its that des	cribes the
D	organization's accounting for conservation easements.		0:	
Pa	t III Organizations Maintaining Collections or Complete if the organization answered "Yes" on Form		ier Simila	ar Assets.
10	If the organization elected, as permitted under FASB ASC 95		d balance a	boot works
Id	-	-		
	of art, historical treasures, or other similar assets held for put			public
h	service, provide in Part XIII the text of the footnote to its finar			t worko of
b	If the organization elected, as permitted under FASB ASC 95			
	art, historical treasures, or other similar assets held for public provide the following amounts relating to these items.		rance of pu	iblic service,
			c	r
	(i) Revenue included on Form 990, Part VIII, line 1			\$
2	(ii) Assets included in Form 990, Part X If the organization received or held works of art, historical tre	agurage or other similar apports for financial a		\$
2			jain, provid	e
-	the following amounts required to be reported under FASB A	-		1
	Revenue included on Form 990, Part VIII, line 1			β
	Assets included in Form 990, Part X			^{}}} Schedule D (Form 990) 2023
	For Paperwork Reduction Act Notice, see the Instruction			Conedule D (FUIII 990) 2023
33205	1 09-28-23	20		

2023.04020 CITIZENS CLIMATE LOBBY

PartIIII Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets;contruce0. 3 Using the organization sacquestion, accession, and other records, check any of the following that make significant use of its collection there (check all that apply). a Public exhibition b Schelary research c Preceive accession of or future generations d During the year, did the organization's collections of art, historical treasures, or other similar assets to bas dot create funds attret that to be maintained as part of the companization's calcentor? Vess No PartIV Escrow and Custodial Arrangements complete if the organization answered "Yes" on Form 900, Part IV, line 5, or resported an amount on from 930, Part X line 21. 1a Is the organization angent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 900, Part X line 21. 1a Is the organization angent, trustee, custodian, or other intermediary for contributions or the assets not included on Form 900, Part X line 21. 1a Is the organization in the part XIII and complete the following table: 1b If Yes, explain the arrangement in Part XII. How for the organization account liability? Yes No b If Yes, explain the arrangement in Part XII. How for the organization has been provided in PartXIII. Partive indevare balance	Sche	CITIZENS CLIMATE LOBBY 26-3521896 Page 2										
collection terms (check all that apply). Collection terms (check all that apply). Scholarly research Other	Par	t III Organizations Maintaining C	collections of A	rt, His	torical Tr	reasures,	or Othei	^r Simil	ar Asse	ts (contin	ued)	
a Public exhibition d Can or exchange program b Scholdry research e Otter	3											
b Scholarly research e Other c Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 Uning the year, do the organization solicit or receive donations of art. historical treasures, or other similar assets to be solid to raise funds rather than to be maintained as part of the organization answered "Yes" on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on form 900, Part X, line 21. Amount c Beginning balance Intermediary for contributions or other assets not included on form 900, Part X, line 21. No b If 'Yes, 'explain the arrangement in Part XIII and complete the following table: Amount Intermediary c Beginning balance Intermediary Yes No b If 'Yes, 'explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII Intermediary Part V Endowment Funds Compote if the organization included an amount on Form 990, Part X, line 21. Intermediary Yes No b Conther organization include an amount on Form 990, Part X, line 21. for solid ance Intermediary Intermediary a Did tho organization include an amount on Form 990, P												
b Scholarly research e Other c Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 Uning the year, do the organization solicit or receive donations of air, historical treasures, or other similar assets to be solid the organization assets 6 Provide a description of the organization assets to be solid the organization assets the organization assets 7 Provide an amount on form 990, Part X, line 21. Ta is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on form 980, Part X, line 21. Amount te c Beginning balance 11 11 te Amount te c Beginning balance 11 11 te te the te	а	Public exhibition	c	1 🗌 t	Loan or exc	hange progr	am					
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b Contributions			(a) Current year	(b) F	Prior year	(c) Two yea	ırs back 🛛 (d	s) Three y	/ears back	(e) Four	years	back
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e Other expenditures for facilities and programs												
and programs												
f Administrative expenses		-										
g End of year balance	f											
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment% b Permanent endowment% c Term endowment% The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) Unrelated organizations? (ii) Related organizations? (iii) Related organizations? (ii) Are the related organizations listed as required on Schedule R? (i) Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) (b) Book value (c) Accumulated depreciation (d) Book value (d) Book value (d) Buildings (d) Book value (d) Book value (d) Buildings (d) Equipment (d) E												
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Part VI Land, Buildings, and Equipment Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land											I	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value 1a Land	Par		0									
Description of property (a) Cost or other basis (investment) (b) Cost or other basis (other) (c) Accumulated depreciation 1a Land				0, Part I	V, line 11a. S	See Form 99	0, Part X, li	ne 10.				
basis (investment) basis (other) depreciation 1a Land					-				ed	(d) Book	value	e
b Buildings		(- , - - , -, -, -, -, -, -, -, -, -, -, -, -, -,			• •					.,		
b Buildings	1a	Land										
c Leasehold improvements												
d Equipment												
e Other Other Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)) 0.												
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))												
				X, line 1	10c. columr	<i>ו</i> (B))						0.
			, <u> </u>	,	,				Schedule	D (Form	990)	

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or	end-of-year market value
(1) Financial derivatives			
2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.		·	
Complete if the organization answered "Yes	" on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or	end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Fotal . (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Complete if the organization answered "Yes (a (1)) Description	110. See Form 390, Fart A, line 15.	(b) Book value
(2) (3)			
(4)			
(5)			
(6) (7)			
(8) (9)			
(ə) Fotal. (Column (b) must equal Form 990, Part X, line 15, c	(B)		
Part X Other Liabilities	,ог. (<i>D))</i>		
Complete if the organization answered "Yes	" on Form 990 Part IV line	11e or 11f See Form 990 Part X line	25
(a) Description of lightly			(b) Book value
(1) Federal income taxes (2) DUE TO RELATED PARTIES			88,840.
			00,040.
(3)			
(4)			
(4) (5)			
(4) (5) (6)			
(4) (5) (6) (7)			
(4) (5) (6) (7) (8)			
(4) (5) (6) (7)			88,840.

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

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

Schedule D (Form 990) 2023

332053 09-28-23

Sche	dule D (Form 990) 2023 CITIZENS CLIMATE LOBBY			26-	3521896	Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statem	ents With F	Revenue per F			
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.				
1	Total revenue, gains, and other support per audited financial statements			1	727	,354.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	. 2a	4,816.			
b	Donated services and use of facilities	2b				
с	Recoveries of prior year grants					
d						
е	Add lines 2a through 2d			2e		,816.
3	Subtract line 2e from line 1			3	722	,538.
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.)					,538.
Pa	rt XII Reconciliation of Expenses per Audited Financial Staten		Expenses per	Retu	ırn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.				
1				1		
	Total expenses and losses per audited financial statements			1	1,278	,666.
2	Total expenses and losses per audited financial statements			1	1,278	,666.
				1	1,278	,666.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	. 2a		1	1,278	,666.
2 a	Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a 2b		1	1,278	,666.
2 a b	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 2c		1	1,278	
2 a b c d	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 2b 2c 2d		1 2e		0.
2 a b c d	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 2b 2c 2d		-	1,278	0.
2 a b c d e	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	2a 2b 2c 2d		2e		0.
2 b c d e 3	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 2b 2c 2d		2e		0.
2 b c d 3 4	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 2b 2c 2d 2d		2e		0.
2 a b c d e 3 4 a	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.) Add lines 4a and 4b	2a 2b 2c 2d 2d 4a 4b		2e 3	1,278	<u>0.</u> ,666. 0.
2 a b c d e 3 4 a b c 5	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 2b 2c 2d 2d 4a 4b		2e 3		<u>0.</u> ,666. 0.

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, 2023 AND 2022, THE ORGANIZATION HAS NOT				
ACCRUED INTEREST OR PENALTIES RELATED TO UNCERTAIN TAX POSITIONS.				

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		Schedule D (Form 990) 2023
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SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Employer identification number 26 - 3521896

CITIZENS CLIMATE LOBBY

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.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.LHA332211 11-14-23

Schedule O (Form 990) 2023

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