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Form	MMU	
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## \*\* 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)

Department of the Treasury Internal Revenue Service Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047

Form 990 (2023)

ΑF	or the	e 2023 calendar year, or tax year beginning and	ending		
B c	heck if	FOUNDATION FOR ADVANCEMENT IN		D Employer identific	cation number
	_Addre	Se CONSERVATION			
	Name Chang	e Doing business as		23-74244	18
	Initial return Final return		Room/suite <b>5 0 0</b>	E Telephone number (202)452	
	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	3,041,744.
	Amen return			H(a) Is this a group re	
	Applic dition	F Name and address of principal officer: LISSA ROSENTHAL-YOF	FE	for subordinates	
	pendi	<sup>19</sup> SAME AS C ABOVE		<b>H(b)</b> Are all subordinates in	
11	ax-ex	empt status: 🚺 501(c)(3) 📃 501(c) ( ) (insert no.) 📃 4947(a)(1) d	or 527		list. See instructions
	Vebsi			H(c) Group exemption	
		organization: 🚺 Corporation 🔄 Trust 🔄 Association 🔄 Other	L Year		State of legal domicile: DC
	art I	Summary	1		
	1	Briefly describe the organization's mission or most significant activities: SEE I	PART I	II, LINE 1.	
S		, , , , , , , , , , , , , , , , , , , ,		•	
Governance	2	Check this box if the organization discontinued its operations or dispos	ed of more	than 25% of its net ass	ets.
ver	3			3	8
	4	Number of independent voting members of the governing body (Part VI, line 1b)			8
ა ა	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a)			0
Activities &	6	Total number of volunteers (estimate if necessary)			9
Ę	- 7 a	Total unrelated business revenue from Part VIII, column (C), line 12			0.
Ă		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
				Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		1,775,180.	2,195,053.
Revenue	9	Program service revenue (Part VIII, line 2g)		65,403.	57,055.
svel	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		157,391.	199,994.
å		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		12,131.	14,469.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,010,105.	2,466,571.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		356,413.	442,107.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		523,877.	556,844.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Den	h	Total fundraising expenses (Part IX, column (D), line 25) 62,75	50.		
Ĕ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,417,078.	1,909,439.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,297,368.	2,908,390.
		Revenue less expenses. Subtract line 18 from line 12		-287,263.	-441,819.
L S	10		Be	ginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		6,865,046.	7,100,431.
Ass	21	Total liabilities (Part X, line 26)		620,110.	566,841.
Net	22	Net assets or fund balances. Subtract line 21 from line 20		6,244,936.	6,533,590.
Pa	art II	Signature Block		- , , ,	
Und	er pena	Ities of perjury, Laclare that I have examined this return, including accompanying schedules	and stateme	ents, and to the best of my	knowledge and belief, it is
	-	t, and compute Declaration of preparer (other than officer) is based on all information of wh			<b>u</b> ,
		11971a		July 8, 2	024
Sig	n	Signature of officer		Date	•= ·
Her		LISSA ROSENTHAL-YOFFE, EXECUTIVE DIRECTOR			
	-	Type or print name and title			
		Print/Type preparer's name Preparer's signature	[	Date Check	PTIN
Paid	I	ELIZABETH W. HELLER Rubard b. Locas	ti le	6/27/2024 self-employ	P00397829
	arer	Firm's name GELMAN, ROSENBERG & FREEDMAN			2-1392008
	Only	Firm's address 4550 MONTGOMERY AVE SUITE 800N			
200	<b>,</b>	BETHESDA, MD 20814-2930		Phone no. 30	1-951-9090
		AS discuss this return with the preparer shown above? See instructions			

LHA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23

_	FOUNDATION FOR ADVANCEMENT IN 990 (2023) CONSERVATION 23-7424418 Page 2
	1990 (2023) CONSERVATION 23-7424418 Page 2 rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
•	TO UNDERTAKE AND UNDERWRITE PROGRAMS AND INITIATIVES TO ADVANCE THE
	CONSERVATION PROFESSION IN ALL ITS FACETS, TO SUPPORT CONSERVATION
	EDUCATION AND CAREER DEVELOPMENT, AND TO APPLY THE EXPERTISE OF THE
	PROFESSION IN ADDRESSING THE NATION'S ARTISTIC, CULTURAL, AND HISTORIC
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$1, 596, 583. including grants of \$72, 530. ) (Revenue \$6, 930.
	OUTREACH - THE COLLECTIONS ASSESSMENT FOR PRESERVATION (CAP) PROGRAM IS
	ADMINISTERED BY FAIC UNDER A COOPERATIVE AGREEMENT WITH THE INSTITUTE
	OF MUSEUM AND LIBRARY SERVICES (IMLS). PARTICIPATING MUSEUMS RECEIVE
	SUPPORT FOR A GENERAL CONSERVATION ASSESSMENT FROM A QUALIFIED
	COLLECTIONS ASSESSOR AND A BUILDING ASSESSOR. THE TWO ASSESSORS WORK
	COLLABORATIVELY TO PROVIDE INSTITUTIONS WITH RECOMMENDATIONS FOR
	IMPROVED COLLECTIONS CARE. THIRTY-EIGHT MUSEUMS RECEIVED SUPPORT IN
	2023.
	IN 2014, FAIC BEGAN OPERATING CONNECTING TO COLLECTIONS CARE, AN ONLINE
	COMMUNITY AND PROFESSIONAL DEVELOPMENT RESOURCE FOR SMALL AND MID-SIZED
	MUSEUMS, WITH FUNDING FROM IMLS. THIS COMMUNITY OFFERS AN AVERAGE OF 12
4b	(Code:         ) (Expenses \$
	PROFESSIONAL DEVELOPMENT & EDUCATION - WORKSHOPS AND EDUCATIONAL
	SESSIONS ARE A KEY PART OF FAIC'S PROGRAMS. IN ADDITION TO OFFERING
	WORKSHOPS AT THE AIC ANNUAL MEETING, WHICH DRAWS 800+ ATTENDEES EACH
	YEAR, FAIC PRODUCES PROFESSIONAL DEVELOPMENT PROGRAMS THROUGHOUT THE
	YEAR AT VARIOUS LOCATIONS. THESE EVENTS RANGE FROM WEEKLONG, LAB-BASED
	WORKSHOPS ON SPECIFIC TREATMENT TECHNIQUES TO ON-LINE PROGRAMS ON
	EQUITY AND INCLUSION TOPICS. FAIC CREATED NEW CURRICULA TO FILL GAPS IN
	TRAINING, INCLUDING A SERIES OF ONLINE COURSES. IN 2023, FAIC PRESENTED
	13 IN PERSON AND ONLINE EVENTS THAT REACHED 752 PROFESSIONALS. FAIC AWARDED \$276,318 IN PROFESSIONAL DEVELOPMENT SCHOLARSHIPS AND
	POST-GRADUATE FELLOWSHIPS IN 2023.
	FOST-GRADORIE FEDDOWSHIPS IN 2023:
4.0	(Code:) (Expenses \$201,957. including grants of \$22,342. ) (Revenue \$
40	EMERGENCY PREPAREDNESS, RESPONSE, & RECOVERY - FAIC MANAGES SEVERAL
	EMERGENCY INITIATIVES THAT SUPPORT EFFORTS IN ALL PHASES OF DEALING
	WITH EMERGENCIES, FROM PREPAREDNESS TO RESPONSE AND RECOVERY. AN ANNUAL
	MAYDAY CAMPAIGN ENCOURAGES COLLECTING INSTITUTIONS TO UNDERTAKE
	EMERGENCY PLANNING ACTIVITIES DURING THE MONTH OF MAY. A TEAM OF OVER
	ONE HUNDRED TRAINED PROFESSIONALS CALLED THE NATIONAL HERITAGE
	RESPONDERS (NHR) PROVIDES EXPERT ASSISTANCE TO INSTITUTIONS THAT
	EXPERIENCE DAMAGE FROM EMERGENCIES. THE ALLIANCE FOR RESPONSE (AFR)
	PROGRAM IS A NATIONAL INITIATIVE THAT DEVELOPS AND TRAINS REGIONAL
	RESPONSE TEAMS THAT INCLUDE CULTURAL INSTITUTIONS AND LOCAL EMERGENCY
	PROFESSIONALS IN 36 LOCATIONS AROUND THE COUNTRY. IN 2023, FAIC
	PROVIDED TRAINING FOR AN AFR NETWORK IN MASSACHUSETTS AND HELPED LAUNCH
4d	Other program services (Describe on Schedule O.)
-	(Expenses \$ 105,203. including grants of \$ 70,917.) (Revenue \$ 12,363.)
4e	Total program service expenses 2,495,557.
4e	Total program service expenses     2,493,337.       Form 990 (202

		FOUNDATION	FOR	ADVANCEMENT	IN
Form 990 (					
Part IV	Che	ecklist of Required Schedule	es		

			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		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? 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? If "Yes," complete Schedule D, Part 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? If "Yes," complete			37
	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?			v
40	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		v	
	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, VII, 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,	44.	х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	<u>11a</u>	<u></u>	
D		11b	х	
~	assets reported in Part X, line 16? <i>If</i> "Yes," <i>complete Schedule D, Part VII</i> Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total		- 11	
U	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
Ь	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			
ŭ	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		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	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	_	77	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	X	(20
332003	12-21-23	Form	390	(2023)

332003 12-21-23

FOUNDATION	FOR	ADVANCEMENT	тΝ
LOONDELLON	T OK		TTA

CONSERVATION

Form 990 (2023)

Pai	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			x
04-	Schedule J	23		_ <u> </u>
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	24a		x
h	Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	2-10		
•	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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		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			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>			
a	"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? <i>If</i>			
	"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		Х
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			
	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		v	
05 -	Part V, line 1	34	Х	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	<u>35a</u>		
D	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?	555		
00	If "Yes," complete Schedule R, Part V, line 2	36	х	
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?			
_	Note: All Form 990 filers are required to complete Schedule O	38	х	
Par	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
<b>1</b> a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 177			
b				
С			х	
33000	(gambling) winnings to prize winners?	1c		l (2023)
JJ2004	4 12-21-23	1.0111		(2023)

Form	990 (2023) CONSERVATION 23-7424	418	Page 5
Par	t 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 2a 0		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b	If "Yes," enter the name of the foreign country		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>	<u>X</u>
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<u> </u>
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit		
	any contributions that were not tax deductible as charitable contributions?	<u>6a</u>	<u> </u>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts		
	were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		77
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	<u> </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		
	to file Form 8282?	7c	X
	If "Yes," indicate the number of Forms 8282 filed during the year7d		77
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<u> </u>
-	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
-	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the		
	sponsoring organization have excess business holdings at any time during the year? N/A	8	
9	Sponsoring organizations maintaining donor advised funds.		
	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a	
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b	
10	Section 501(c)(7) organizations. Enter:		
	Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a	-	
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	-	
11	Section 501(c)(12) organizations. Enter:		
	Gross income from members or shareholders N/A 11a	1	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against		
10-	amounts due or received from them.)	10-	
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year $\frac{N/A}{12b}$	12a	
		-	
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? N/A	13a	
a	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	154	
h	Enter the amount of reserves the organization is required to maintain by the states in which the		
D	organization is licensed to issue qualified health plans		
<u>د</u>	Enter the amount of reserves on hand		
14a		14a	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	<u> </u>
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? $N/A$	17	
	If "Yes," complete Form 6069.		
332005	12-21-23	Form	<b>990</b> (2023)

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332005 12-21-23

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Part VI	Governance, Management, and Disclosure. F	or each "Yes" response to lines 2 through 7b below, and for a "No" res	ponse
	to line 8a, 8b, or 10b below, describe the circumstances, pro		
	Check if Schedule O contains a response or note to any line	in this Part VI	Χ

				_		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		8			
	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 0.						
b	Enter the number of voting members included on line 1a, above, who are independent	1b		8			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	any other				
	officer, director, trustee, or key employee?			2	2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e direc	t supervision				
	of officers, directors, trustees, or key employees to a management company or other person?			3	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?		ł		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	ets?		5	5		X
6	Did the organization have members or stockholders?			6	3	X	<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point	one or				
	more members of the governing body?			7	a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, st	ockho	lders, or				
	persons other than the governing body?			7	b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	2	0				
а	The governing body?			8	a	X	
b	Each committee with authority to act on behalf of the governing body?			8	b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read						
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	<u></u>		9	•		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	venue	Code.)				
						Yes	No
	Did the organization have local chapters, branches, or affiliates?			10	)a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such ch	apters	, affiliates,				
				10			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	/ befoi	re filing the form?	11	la	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12		X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12	2b	X	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	,				<b>v</b>	
	on Schedule O how this was done				2c	X	
13	Did the organization have a written whistleblower policy?				3	X	
14	Did the organization have a written document retention and destruction policy?			1	4	Х	
15	Did the process for determining compensation of the following persons include a review and approva	l by in	dependent				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				-	v	
a	The organization's CEO, Executive Director, or top management official				5a	X	x
b	Other officers or key employees of the organization			15	b		
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.						
168	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen						x
	taxable entity during the year?			16	ba		
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat		-				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ						
<b>S</b> 00	exempt status with respect to such arrangements?			16	D		<u> </u>
		<u> </u>					
17			T (	N			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, ar	10 990	-1 (section 501(c)(a	s)s on	iy) a	vallar	JIE
	for public inspection. Indicate how you made these available. Check all that apply.	-					
40	Own website Another's website X Upon request Other (explain		,		<b>o</b> '		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co	ITTIICT (	or interest policy, a	ia tin	anci	a	
00	statements available to the public during the tax year.	die en					
20	State the name, address, and telephone number of the person who possesses the organization's boo LISSA ROSENTHAL-YOFFE – (202)452-9545	oks and	u records				
	727 15TH STREET, NW, 500, WASHINGTON, DC 20005						
				Г	arm	990	(2023)
JJ2006	5 12-21-23 <b>7</b>			r(	וווו		(2023)
	I I						

FOUNDATION	FOR	ADVANCEMENT	IN
CONSERVATIO	ON		

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

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

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

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

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

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

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

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

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

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

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

(A)	(B)	J			C)			(D)	(E)	(F)
Name and title	Average	Position (do not check more than						Reportable	Reportable	Estimated
	hours per	box	, unles	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		cer an I	id a d	irecto I	or/trus T	tee)	from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	or dir	e			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	truste		e	bensi		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tri	ional		ploye	t com		1099-NEC)		and related
	line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) LISSA ROSENTHAL-YOFFE	18.75									
EXECUTIVE DIRECTOR	18.75			Х				0.	142,800.	4,425.
(2) DANIELLE AMATO-MILLIGAN	1.00									
DIR., THEN PRES. (TRANS. @ 5/2023)	0.00	Х		Х				0.	0.	0.
(3) PETER TRIPPI	1.00									
PRES., THEN VP (TRANS. @ 5/2023)	0.00	Х		Х				0.	0.	0.
(4) THOMAS F.R. CLARESON	1.00									
VP, THEN SECRETARY (TRANS. @ 5/2023)	0.00	Х		Х				0.	0.	0.
(5) INGRID BOGEL	1.00									
SECRETARY (UNTIL 5/2023)	0.00	Х		Х				0.	0.	0.
(6) ELMER EUSMAN	1.00									
TREASURER	2.00	Х		Х				0.	0.	0.
(7) SUZANNE DAVIS	1.00									
DIRECTOR	3.00	Х						0.	0.	0.
(8) DEBRA HESS NORRIS	1.00									
DIRECTOR	0.00	Х						0.	0.	0.
(9) CORINA ROGGE	1.00									
DIRECTOR	2.00	Х						0.	0.	0.
(10) ANITA SAGGURTI	1.00									
DIRECTOR (FROM 11/2023)	0.00	х						0.	0.	0.
		-								
		-								
		-								
222007 10 01 02	L	1	1	1	1	-	1	1	1	Eorm <b>990</b> (2023)

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Form 990 (2023)

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Form	FOUNDATIC 990 (2023) CONSERVAT		DV	AN	ICE	ME	NT	]	<b>EN</b>	23-7	4244	418	Page <b>8</b>
	t VII Section A. Officers, Directors, Trus		oloy	ees,	and	l Hig	ghes	t C	ompensated Employee			110	i ugo e
	(A) Name and title	(B) Average hours per week	(do box	not c , unle	(C Pos heck ss per	<b>C)</b> itior more rson i		one an	(D) Reportable compensation from	(E) Reportable compensatio from related	on	Esti amo	<b>(F)</b> mated ount of ther
		(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organization (W-2/1099-MK 1099-NEC)	SC/	fro orga and	ensation m the nization related nizations
			•										
	Subtotal Total from continuation sheets to Part VI								0.	142,80	00.	4	<u>,425.</u> 0.
	Total (add lines 1b and 1c)								0.	142,8	-	4	,425.
2	Total number of individuals (including but n compensation from the organization	ot limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$100,	000 of reportable	•		0
3	Did the organization list any <b>former</b> officer, line 1a? If "Yes," complete Schedule J for si			•	-	-		_		•	[	3	Yes No
4	For any individual listed on line 1a, is the su and related organizations greater than \$150	m of reportabl	e cc	mpe	ensa	tion	and	otł	ner compensation from th	ne organization		4	X
5	Did any person listed on line 1a receive or a rendered to the organization? <i>If</i> "Yes." com	iccrue comper	isati	on fi	rom	any	unre	late	ed organization or individ	lual for services		5	X
<u>Sec</u>	tion B. Independent Contractors Complete this table for your five highest con	mpensated inc	lepe	nde	nt co	ontra	acto	s tł	hat received more than \$	100.000 of com		ion fror	n
	the organization. Report compensation for t											(C)	
<u></u>	ہم Name and business NARD UNI ، CENTER FOR G		тс	7	NTA	TV	ст		Description of s		C	ompens	
	CARD UNI. CENTER FOR G 37 CAMBRIDGE ST., CAMBR						51		RESILIENCE RI			142	,330.
2	Total number of independent contractors (ir	•	ot lir	niteo	d to	thos 1		ted	above) who received mo	ore than			
	\$100,000 of compensation from the organiz	Lation					<u> </u>					Form 9	<b>90</b> (2023)

FOUNDATION	FOR	ADVANCEMENT	IN
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Check if Schedule C contains a response or note to any line in this Pertuit.           (A)           Total revenue           Note: Contained campaigns           Image: Contained c				2023) CONSERVATION				23-7424	418 Page <b>9</b>
Image: Second	Pa	rt V		Statement of Revenue					
Total revenue         Perieta exclusion           Total revenue         Dureated or exempt in autoin or evenue				Check if Schedule O contains a response	or note to any lin	(			
Bit I         Federated campaigns         In         In <thin< th="">         In         In         In<!--</td--><td></td><td></td><td></td><td></td><td></td><td></td><td>Related or exempt</td><td>Unrelated</td><td>Revenue excluded from tax under</td></thin<>							Related or exempt	Unrelated	Revenue excluded from tax under
Solution         Description         To           b         Americaning ownin         To	o o	1	a	Federated campaigns 1a					
Business Code         Description           2 a         WORKSHOPS         900099         57,055.         57,055.           4	ant								
Business Code         Description           2 a         WORKSHOPS         900099         57,055.         57,055.           4	ng G								
Business Code         Description           2 a         WORKSHOPS         900099         57,055.         57,055.           4	ifts ar A			<b>a</b>	24,100.				
Business Code         Description           2 a         WORKSHOPS         900099         57,055.         57,055.           4	s, G Mila				692,360.				
Business Code         Description           2 a         WORKSHOPS         900099         57,055.         57,055.           4	iö								
Business Code         Description           2 a         WORKSHOPS         900099         57,055.         57,055.           4	but				478,593.				
Business Code         Description           2 a         WORKSHOPS         900099         57,055.         57,055.           4	dti		g	Noncash contributions included in lines 1a-1f					
generation         2 a WORKSHOPS         900099         57,055.         57,055.           b	a C		h	Total. Add lines 1a-1f		2,195,053.			
90         90<									
g Total. Add lines 2a21         57,055.           3         Investment income (including dividends, interest, and other similar amounts)         114,521.           4         income from investment of tax exempt bond proceeds         114,521.           5         Royaties         0. Real           6 a Gross rents         6a         0. Real           6 a Gross rents         6a         0. Real           6 a Gross rents         6a         0. Real           7 a Gross amount from sals of assets other than investory         0. Securities         0. Other           7 a Gross income from fundraising events of Calin or (loss)         0. Securities         0. Other           7 a Gross income from fundraising events of Calin or (loss)         7a         85,473.         85,473.           8 a Gross income from fundraising events of contributions reported on line 10. See         8a         9a         9a           9 a Gross income from gaming activities. See Part IV, line 19         9a         9a         9a         9a           9 a Gross income from gaming activities. See Part IV, line 19         11a, 848.         11a, 348.         11a, 343.           9 a Gross income from gaming activities. See Part IV, line 19         10a         11a, 848.         12a, 363.         2, 106.           9 a Gross alor in from gaming activities         10a <td>e</td> <td>2</td> <td>а</td> <td>WORKSHOPS</td> <td>900099</td> <td>57,055.</td> <td>57,055.</td> <td></td> <td></td>	e	2	а	WORKSHOPS	900099	57,055.	57,055.		
g Total. Add lines 2a21         57,055.           3         Investment income (including dividends, interest, and other similar amounts)         114,521.           4         income from investment of tax exempt bond proceeds         114,521.           5         Royaties         0. Real           6 a Gross rents         6a         0. Real           6 a Gross rents         6a         0. Real           6 a Gross rents         6a         0. Real           7 a Gross amount from sals of assets other than investory         0. Securities         0. Other           7 a Gross income from fundraising events of Calin or (loss)         0. Securities         0. Other           7 a Gross income from fundraising events of Calin or (loss)         7a         85,473.         85,473.           8 a Gross income from fundraising events of contributions reported on line 10. See         8a         9a         9a           9 a Gross income from gaming activities. See Part IV, line 19         9a         9a         9a         9a           9 a Gross income from gaming activities. See Part IV, line 19         11a, 848.         11a, 348.         11a, 343.           9 a Gross income from gaming activities. See Part IV, line 19         10a         11a, 848.         12a, 363.         2, 106.           9 a Gross alor in from gaming activities         10a <td>ervi</td> <td></td> <td>b</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	ervi		b						
g         Total. Add lines 2a21         57,055.           3         Investment income (including dividends, interest, and other similar amounts)         114,521.         114,521.           4         income from investment of tax exempt bond proceeds         114,521.         114,521.           5         Royaties         0. Real         (ii) Personal           6 a         Gross rents         6a         0. Real         (ii) Personal           6 a         Gross rents         6a         0. Real         (ii) Personal           7 a         Gross amount from sals of assets other than inventory         1         1         1           7 a         Gross mount from sals of assets other than inventory         1         1         1         1           9 a         Gross income from fundraising events (not including \$\$	n Se		С						
g Total. Add lines 2a21         57,055.           3         Investment income (including dividends, interest, and other similar amounts)         114,521.           4         income from investment of tax exempt bond proceeds         114,521.           5         Royaties         0. Real           6 a Gross rents         6a         0. Real           6 a Gross rents         6a         0. Real           6 a Gross rents         6a         0. Real           7 a Gross amount from sals of assets other than investory         0. Securities         0. Other           7 a Gross income from fundraising events of Calin or (loss)         0. Securities         0. Other           7 a Gross income from fundraising events of Calin or (loss)         7a         85,473.         85,473.           8 a Gross income from fundraising events of contributions reported on line 10. See         8a         9a         9a           9 a Gross income from gaming activities. See Part IV, line 19         9a         9a         9a         9a           9 a Gross income from gaming activities. See Part IV, line 19         11a, 848.         11a, 348.         11a, 343.           9 a Gross income from gaming activities. See Part IV, line 19         10a         11a, 848.         12a, 363.         2, 106.           9 a Gross alor in from gaming activities         10a <td>Jran Bev</td> <td></td> <td>d</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Jran Bev		d						
g Total. Add lines 2a21         57,055.           3         Investment income (including dividends, interest, and other similar amounts)         114,521.           4         income from investment of tax exempt bond proceeds         114,521.           5         Royaties         0. Real           6 a Gross rents         6a         0. Real           6 a Gross rents         6a         0. Real           6 a Gross rents         6a         0. Real           7 a Gross amount from sals of assets other than investory         0. Securities         0. Other           7 a Gross income from fundraising events of Calin or (loss)         0. Securities         0. Other           7 a Gross income from fundraising events of Calin or (loss)         7a         85,473.         85,473.           8 a Gross income from fundraising events of contributions reported on line 10. See         8a         9a         9a           9 a Gross income from gaming activities. See Part IV, line 19         9a         9a         9a         9a           9 a Gross income from gaming activities. See Part IV, line 19         11a, 848.         11a, 348.         11a, 343.           9 a Gross income from gaming activities. See Part IV, line 19         10a         11a, 848.         12a, 363.         2, 106.           9 a Gross alor in from gaming activities         10a <td>roç</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	roç								
3         Investment income (including dividends, interest, and other similar amounts)         114,521.         114,521.           4         Income from investment of tax exempt bond proceeds         114,521.         114,521.           5         Royaties         (i) Real         (ii) Personal         114,521.           6         a Gross rents         6a         (i) Real         (ii) Personal           6         a Gross rents         6a         (ii) Securities         (iii) Personal           7         a Gross amount from sales of assets other than inventory         iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	Δ.					57 055			
1114,521.         12,55,688. <t< td=""><td>_</td><td></td><td>g</td><td></td><td></td><td>57,055.</td><td></td><td></td><td></td></t<>	_		g			57,055.			
4         Income from investment of fax-exempt bond proceeds		3				114 521.			114 521.
S         Royatties         (i) Real         (ii) Personal           6a         Cross rents         6a         6a         6a           6a         Cross rents         6a         6a         6a         6a           6b         6c         6c         6c         6c         6c           7         Gross amount from sales of assets other than inventory b         (i) Securities         (ii) Other         7a         66 1, 161.           7a         57 5, 68 8.         7c         85, 473.         85, 473.         85, 473.           8 a         Gross income from fundraising events including \$ of contributions reported on line 1c). See         8a         85, 473.         85, 473.           9 a         Gross income from gaming activities. See Part IV, line 18         8a         9a         9a         9a           9 a         Gross alse of inventory, less returns and allowances         9b         9a         9a         9a           10 a         Orses sales of inventory, exercises         Basiness Code         9a		4		,					,
6 a Gross rents       6 a         b Less: rental expenses       6 b         c Rental income or (loss)       6 c         d Net rental income or (loss)       6 c         a Gross amout from sales of assets other than inventory       10. Securities         b Less: cost or other basis and sales expenses       0. Securities         c Gain or (loss)       7 a Gross income from sales of assets other than inventory         b Less: cost or other basis and sales expenses       7 a S 5, 473.         d Net gain or (loss)       7 c 8 5, 473.         d Net gain or (loss)       7 c 8 5, 473.         a Gross income from fundraising events (not including \$									
b         Less: rental expenses         8b         c           c         Rental income or (loss)         Gc         Image: Construction of Construction		-		(i) Real					
b         Less: rental expenses         6b         c           c         Rental income or (loss)		6	а	Gross rents 6a					
d         Net rental income or (loss)			b	Less: rental expenses 6b					
7 a Gross amount from sales of assets other than inventory       7a 60 Securities (ii) Other 7a 661, 161.         b Less: cost or other basis and sales expenses       7c 85, 473.         c Gain or (loss)       7c 85, 473.         a Gross income from fundraising events (not including § of contributions reported on line 1c). See Part IV, line 18       8a         b Less: circit expenses       a Gross income from fundraising events       8a         g Gross income from gaming activities       8a         g Gross income from gaming activities       9a         g a Gross income or (loss) from gaming activities       9a         g a Gross income or (loss) from gaming activities       9a         g a Gross income or (loss) from gaming activities       9a         g a Gross income or (loss) from sales of inventory       12, 363.       12, 363.         c Net income or (loss) from sales of inventory       12, 363.       12, 363.			с	Rental income or (loss) 6c					
assets other than inventory b         Ta         661,161. Tb         Ta         Fa			d						
Bit Less: cost or other basis and sales expenses         Tb 575, 688.           c Gain or (loss)         Tc 85, 473.           d Net gain or (loss)         85, 473.           a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18         85, 473.           b Less: direct expenses         8b           c Net income or (loss) from fundraising events         9a           g Gross income from gaming activities. See Part IV, line 19         9a           g Gross sincome from gaming activities. See Part IV, line 19         9a           g Gross sincome from gaming activities. See Part IV, line 19         9a           g Gross sincome from gaming activities. See Part IV, line 19         9a           g Gross sincome from gaming activities. See Part IV, line 19         9a           g Gross sales of inventory, less returns and allowances         11, 848.           b Less: cost of goods sold         10b - 515.           c Net income or (loss) from sales of inventory         12, 363.           t a OTHER INCOME         900099           b		7	а		(ii) Other				
and sales expenses         Th 575,688.           c         Gain or (loss)         To         85,473.           d         Net gain or (loss)         85,473.         85,473.           d         Net gain or (loss)         of         85,473.         85,473.           a         Gross income from fundraising events (not including \$ of         of         0           a         Gross income from fundraising events         0         0           b         Less: direct expenses         8a         8a           c         Net income or (loss) from fundraising events         9a         9a           g         Gross income from gaming activities. See         9a         9a         9a           b         Less: direct expenses         9b         0         0         0           c         Net income or (loss) from gaming activities. See         9a         9b         0         0           c         Net income or (loss) from gaming activities. See         9a         9b         0         0           c         Net income or (loss) from gaming activities         10a         11,848.         0         0           d         All other revenue         000099         2,106.         2,106.         0         2,106. <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>									
c       Gain or (loss)       7c       85,473.       85,473.         d       Net gain or (loss)			b						
a       Net gan or (loss)       65,473.       65,473.         a       Gross income from fundraising events (not including \$of contributions reported on line 1c). See       8a       8a         b       Less: direct expenses       8b       8b       9a         c       Net income or (loss) from fundraising events       9a       9a         part IV, line 19       9a       9a       9a         b       Less: direct expenses       9a       9a         c       Net income or (loss) from gaming activities       9a       9a         c       Net income or (loss) from gaming activities       9a       9a         c       Net income or (loss) from sales of inventory.       11, 848.       10a       11, 848.         b       Less: cost of goods sold       10b       -515.       12, 363.       12, 363.         c       Net income or (loss) from sales of inventory       12, 363.       12, 363.       2, 106.         source       d       All other revenue       900099       2, 106.       2, 106.         e       Total revenue. See instructions       2, 466, 571.       69, 418.       0.       202, 100.	anue		_						
8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a       8a       8a         b Less: direct expenses 8b       8b       6b       6c         9 a Gross income from gaming activities. See Part IV, line 19 9a       9a       9a       9a         b Less: direct expenses 9b       9a       9a       9a       6c         c Net income or (loss) from gaming activities. See Part IV, line 19 9a       9a       9a       9a         b Less: direct expenses 9b       9b       6c       6c       6c         c Net income or (loss) from gaming activities 0a       6c       6c       6c         c Net income or (loss) from gaming activities 0a       6c       6c       6c         b Less: cost of goods sold 0b       7bb       7515.       6c       6c         c Net income or (loss) from sales of inventory 12,363.       12,363.       12,363.       6c         g       6d       6d       900099       2,106.       2,106.       2,106.         c Net income of loss from sales of inventory	eve					85 473.			85 473.
contributions reported on line 1c). See       Ba         Part IV, line 18       Ba         b Less: direct expenses       Bb         c Net income or (loss) from fundraising events       -         9 a Gross income from gaming activities. See       9a         Part IV, line 19       9a         b Less: direct expenses       9b         c Net income or (loss) from gaming activities. See       9a         Part IV, line 19       9a         b Less: direct expenses       9b         c Net income or (loss) from gaming activities       -         10 a Gross sales of inventory, less returns and allowances       11, 848.         b Less: cost of goods sold       10b       -515.         c Net income or (loss) from sales of inventory       12, 363.       12, 363.         stincome or (loss) from sales of inventory       12, 363.       2,106.         c       -       -       -         d All other revenue       -       -       -         e Total. Add lines 11a-11d       2,106.       -       202,100.         12       Total revenue. See instructions       2,466,571.       69,418.       0.       202,100.	er H					0071701			
contributions reported on line 1c). See       Ba         Part IV, line 18       Ba         b Less: direct expenses       Bb         c Net income or (loss) from fundraising events       Image: contribution of the set of	Ğ	Ũ	-						
Part IV, line 18       8a         b       Less: direct expenses       8b         c       Net income or (loss) from fundraising events       9a         9 a       Gross income from gaming activities. See Part IV, line 19       9a         b       Less: direct expenses       9a         c       Net income or (loss) from gaming activities       9a         c       Net income or (loss) from gaming activities       0         10 a       Gross sales of inventory, less returns and allowances       10a       11,848.         b       Less: cost of goods sold       10b       -515.         c       Net income or (loss) from sales of inventory       12,363.       12,363.         t       0THER       INCOME       900099       2,106.         b	-								
b       Less: direct expenses       Bb         c       Net income or (loss) from fundraising events				Part IV, line 18 8a					
9 a Gross income from gaming activities. See Part IV, line 19       9a         b Less: direct expenses       9b         c Net income or (loss) from gaming activities       0         10 a Gross sales of inventory, less returns and allowances       10a       11,848.         b Less: cost of goods sold       10b       -515.         c Net income or (loss) from sales of inventory       12,363.       12,363.         return or (loss) from sales of inventory       12,363.       2,106.         a OTHER INCOME       900099       2,106.       2,106.         b Less: cost of loce instructions       2,466,571.       69,418.       0.       202,100.			b						
Part IV, line 19       9a         b Less: direct expenses       9b         c Net income or (loss) from gaming activities       -         10 a Gross sales of inventory, less returns and allowances       10a       11,848.         b Less: cost of goods sold       10b       -515.         c Net income or (loss) from sales of inventory       12,363.       12,363.         11 a OTHER INCOME       900099       2,106.       2,106.         b c d All other revenue       2,106.       2,202,100.									
b       Less: direct expenses       9b       Image: set of the		9	а						
c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory 11 a OTHER INCOME b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions c Net income or (loss) from sales of inventory 2,106. 14 All other revenue 2,466,571. 69,418. 0. 202,100.									
10 a Gross sales of inventory, less returns and allowances       10a 11,848. 10b -515.       10a 11,848. 10b -515.         b Less: cost of goods sold       10b -515.         c Net income or (loss) from sales of inventory       12,363.         11 a OTHER INCOME       900099         b c c d All other revenue       900099         e Total. Add lines 11a-11d       2,106.         12 Total revenue. See instructions       2,466,571.				· · · · · · · · · · · · · · · · · · ·					
and allowances       10a       11,848.         b       Less: cost of goods sold       10b       -515.         c       Net income or (loss) from sales of inventory       12,363.       12,363.         11 a       OTHER INCOME       Business Code       900099       2,106.         b									
b       Less: cost of goods sold       10b       -515.         c       Net income or (loss) from sales of inventory       12,363.       12,363.         11 a       OTHER INCOME       Business Code       2         b       -       900099       2,106.       2,106.         c       -       -       -       -         d       All other revenue       -       -       -         e       Total. Add lines 11a-11d       2,106.       -       -         12       Total revenue. See instructions       2,466,571.       69,418.       0.       202,100.		10	a	-	11.848.				
c       Net income or (loss) from sales of inventory       12,363.       12,363.         11 a       OTHER INCOME       900099       2,106.         b       -       -       -         c       -       -       -         d       All other revenue       -       -         e       Total. Add lines 11a-11d       2,106.       -         12       Total revenue. See instructions       2,466,571.       69,418.       0.       202,100.			b						
Business Code       2,106.         b       900099       2,106.         c       4       4         d       All other revenue       2,106.         e       Total. Add lines 11a-11d       2,106.         12       Total revenue. See instructions       2,466,571.       69,418.       0.       202,100.				•		12,363.	12,363.		
e Total. Add lines 11a-11d         2,106.           12 Total revenue. See instructions         2,466,571.         69,418.         0.         202,100.				· / ···	Business Code				
e Total. Add lines 11a-11d         2,106.           12 Total revenue. See instructions         2,466,571.         69,418.         0.         202,100.	suo:	11	а	OTHER INCOME	900099	2,106.			2,106.
e Total. Add lines 11a-11d         2,106.           12 Total revenue. See instructions         2,466,571.         69,418.         0.         202,100.	ane		b						
e Total. Add lines 11a-11d         2,106.           12 Total revenue. See instructions         2,466,571.         69,418.         0.         202,100.	Sev(								
12         Total revenue. See instructions         2,466,571.         69,418.         0.         202,100.	Mis								
			e				69 /19	0	202 100
	332000		21-			<u>н, тоо, ј / т •</u>	09,410.		

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# FOUNDATION FOR ADVANCEMENT IN CONSERVATION

23-7424418 Page 10

	Check if Schedule O contains a respons	e or note to any line in t	his Part IX		X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	235,459.	235,459.		
2	Grants and other assistance to domestic	149,100.	149,100.		
3	individuals. See Part IV, line 22 Grants and other assistance to foreign	140,100.	,100.		
Ū	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	57,548.	57,548.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	73,612.	25,028.	42,695.	5,889.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	392,682.	292,694.	82,561.	17,427.
8	Pension plan accruals and contributions (include				
Ū	section 401(k) and 403(b) employer contributions)	17,190.	12,184.	4,178.	828.
9	Other employee benefits	<u>17,190.</u> 38,356.	<u>12,184.</u> 26,705.	4,178. 9,745.	828 1,906 1,745
10	Payroll taxes	35,004.	23,908.	9,351.	1,745.
11	Fees for services (nonemployees):				
а	Management				
b	Legal				
с	Accounting	36,683.	4,500.	32,183.	
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	17,199.		17,199.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)	1,247,659.	1,194,060.	39,436.	14,163.
12	Advertising and promotion	504.		504.	
13	Office expenses	51,965.	38,606.	8,988.	<u>4,371</u> 9,256
14	Information technology	95,837.	67,691.	18,890.	9,256
15	Royalties			10.005	
16	Occupancy	94,260.	80,031.	12,025.	<u>2,204</u> 645.
17	Travel	195,609.	186,988.	7,976.	645.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	69,784.	61,798.	7,524.	462.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	6,206.		6,206.	
23	Insurance	8,637.	7,333.	1,102.	202.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	MISCELLANEOUS	52,516.	1,060.	51,456.	
b	DUES	31,862.	28,644.	126.	3,092.
с	BAD DEBT	560.			560.
d	STAFF DEVELOPMENT	158.		158.	
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	2,908,390.	2,493,337.	352,303.	62,750.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form <b>990</b> (2023

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332010 12-21-23

Form 990 (2023)

Part IX Statement of Functional Expenses

Form 990 (2023)

FOUNDATION	FOR	ADVANCEMENT	IN
CONSERVATIO	ON		

	FOUNDATION FOR ADVANCEMENT IN			
Form 990	(2023) CONSERVATION		23-	7424418 Page 11
Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			
		<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1	Cash - non-interest-bearing	50,449.	1	84,375.
2	Savings and temporary cash investments	41,221.	2	26,665.
3	Pledges and grants receivable, net	839,055.	3	628,353.
4	Accounts receivable, net	22,838.	4	897.
5	Loans and other receivables from any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons		5	
6	Loans and other receivables from other disqualified persons (as defined			
	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
<u>ح</u> ک	Notes and loans receivable, net		7	
5				

	5	Loans and other receivables normany current of	IOIIIIEI	officer, director,				
		trustee, key employee, creator or founder, subst	antial c	ontributor, or 35%				
		controlled entity or family member of any of thes	e perso	ns			5	
	6	Loans and other receivables from other disqualif	ied pers	sons (as defined				
		under section 4958(f)(1)), and persons described	in sect	ion 4958(c)(3)(B)			6	
ts	7	Notes and loans receivable, net					7	
Assets	8	Inventories for sale or use			3,830.	8	4,346.	
Ä	9	Prepaid expenses and deferred charges			9	8,194.		
	10a	Land, buildings, and equipment: cost or other						
		basis. Complete Part VI of Schedule D	10a	18,850.				
	b	Less: accumulated depreciation	10b	18,850.		0.	10c	0.
	11	Investments - publicly traded securities			2,44	8,439.	11	2,547,800.
	12	Investments - other securities. See Part IV, line 1	1		3,33	5,558.	12	3,675,341.
	13	Investments - program-related. See Part IV, line 1				13		
	14	Intangible assets				14		
	15	Other assets. See Part IV, line 11				3,656.	15	124,460.
	16	Total assets. Add lines 1 through 15 (must equa	3)	6,86	5,046.	16	7,100,431.	
	17	Accounts payable and accrued expenses				9,526.	17	48,270.
	18	Grants payable		4	5,550.	18	31,040.	
	19	Deferred revenue					19	
	20	Tax-exempt bond liabilities					20	
	21	Escrow or custodial account liability. Complete F	Part IV o	of Schedule D			21	
ŝ	22	Loans and other payables to any current or form	er office	er, director,				
litie		trustee, key employee, creator or founder, subst						
Liabilities		controlled entity or family member of any of thes	e perso	ins			22	
	23	Secured mortgages and notes payable to unrela	ted thir	d parties			23	
	24	Unsecured notes and loans payable to unrelated	l third p	arties			24	
	25	Other liabilities (including federal income tax, page	yables t	o related third				
		parties, and other liabilities not included on lines	17-24).	Complete Part X				
		of Schedule D				5,034.	25	487,531.
	26	Total liabilities. Add lines 17 through 25			62	0,110.	26	566,841.
<i>(</i> -		Organizations that follow FASB ASC 958, che	ck here					
ces		and complete lines 27, 28, 32, and 33.						
lan	27	Net assets without donor restrictions				1,986.	27	399,157.
Ba	28	Net assets with donor restrictions		<u></u>	5,76	2,950.	28	6,134,433.
pur		Organizations that do not follow FASB ASC 9	58, che	ck here				
ц		and complete lines 29 through 33.						
so	29	Capital stock or trust principal, or current funds					29	
Net Assets or Fund Balances	30	Paid-in or capital surplus, or land, building, or eq	uipmen	t fund			30	
As	31	Retained earnings, endowment, accumulated ind	come, c	r other funds			31	
Net	32	Total net assets or fund balances				4,936.	32	6,533,590.
	33	Total liabilities and net assets/fund balances		6,86	5,046.	33	7,100,431.	
								Form <b>990</b> (2023)

Form 990 (2023)

332011 12-21-23

FOUNDATION	FOR	ADVANCEMENT	IN
CONSERVATIO	)N		

	990 (2023) CONSERVATION	<u>23-</u>	7424418	Pag	<sub>ge</sub> 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,466		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,908		
3	Revenue less expenses. Subtract line 2 from line 1	3	-441		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	6,244		
5	Net unrealized gains (losses) on investments	5	730	),4'	73.
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	6,533	3,59	<u> 90.</u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
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?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	Separate basis X 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	,			1
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				1
	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 requi	red audi	t		1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	Х	

Form **990** (2023)

332012 12-21-23

Public Charity Status and Public Support  Description data  Public Charity Status and Public Support  Support  Public Charity Status and Public Support  Su	SCHEDULE A		DULE A		Dublic Cho	rity Status an		lie Cr	unnart		OMB No. 1545-0047		
Constraints of the tensor     Constraints of Constraints of Constraints of Constraints of Constraints	(Fo	orm 99	90)			•					2023		
Interest Binner         Option With good for instructions and the latest information.         Imspection           Name of the organization         CONSERVATION         Employer identification number 23 – 7424418           Part I         Reason for Public Charity Status. (All organizations must complete this part) See instructions.         The organization is not a private foundation bocause its. (For lines 1 through 12, check only one box)         A chuch, convention of churches, or association of churches described in section 170(b)(1)(A)(b).         A chuch accompetitive hospital service organization described in section 170(b)(1)(A)(b).         A chuch, convention of churches, or association of churches described in section 170(b)(1)(A)(b).         A chuch, convention of churches, or association of churches described in section 170(b)(1)(A)(b).         A chuch, convention of churches, or association of churches described in section 170(b)(1)(A)(b).           A naganization operated in conjunction with a hospital described in section 170(b)(1)(A)(b).         A described in section 170(b)(1)(A)(b).           A naganization operated in conjunction with a hospital described in section 170(b)(1)(A)(b).         A community that conside approximation described in section 170(b)(1)(A)(b).           A naganization described in section 170(b)(1)(A)(b). (Complete Part II)         A community that described in section 170(b)(1)(A)(b).           A naganization described in section 170(b)(1)(A)(b)(b). (Complete Part II)         A community that and grant college of signitum (see instructions. Enter the name, chy, and state of the college or university:           B A conguination describe					• •				or a section		2023		
Name of the organization         FOUNDATION         FOUNDATION         Employer identification number 23 - 7424418           Part         Reason for Public Ohrry Status. (u) organizations must complete this part.) See instructions.         Employer identification number 23 - 7424418           Part         Reason for Public Ohrry Status. (u) organization described in section 700b(1940b).         A churches, or association of aburches described in section 700b(1940b).           A Aburch, convention of durches, or associatization described in section 770b(1940b).         A horganization operated in conjunction with a hospital described in section 770b(1940b).           A medical research organization operated in conjunction with a hospital described in section 770b(1940b).         A faderal, stata, or local government or governmental unit described in section 770b(1940b).           A community trust described in section 770b(1940b).         Complete Part II.)           B A community trust described in section 770b(1940b).         Complete Part II.)           B A acommunity trust described in section 770b(1940b).         Complete Part II.)           B A acommunity trust described in section 770b(1940b).         Complete Part II.)           B A angenization described on section 770b(1940b).         Complete Part II.)           B A angenization described in section 770b(1940b).         Complete Part II.)           B A acommunity trust described in section 770b(1940b).         Complete Part II.)           B A acommunity trust described in section 7					Α	ttach to Form 990 or Fo	rm 990-E	Ζ.					
CONSERVATION     23 - 7424418     Constructions     CONSERVATION     CONSERVATION     CONSTRUCTION								latest inf	ormation.	Employor	•		
Part II       Reason for Public Charity Status. ( <i>Mi</i> organizations must complete this part is sensitivations.)         The organization in ort à pinted foundation because this if for lines 1 through 12, check only one box).         A Achurch, convention of churches, or association of churches described in section 1700/(1)(A)(ii).         A Anoto described in section 1700/(1)(A)(ii).         A modical research organization observation organization described in section 1700/(1)(A)(iii).         A modical research organization observation organization described in section 1700/(1)(A)(iii).         A modical research organization observation or povermental unit described in section 1700/(1)(A)(iii).         B A conganization on portated for the benefit of a college or university owned or operated by a governmental unit described in section 1700/(1)(A)(V).         C A no organization that normally receives austontial part of its support from a governmental unit of from the general public described in section 1700/(1)(A)(V).         B A comparization that normally receives austontial part of its support from outributions, membership fees, and gross receipts from activities related to its exempt functions, subject to estal an exection 500/(a)(2).         C An organization described in section 1700/(1)(A)(V).         An organization organized and operated exclusively to test for public safety. See section 500/(a)(2).         C an organization organized and operated exclusively to test for public safety. See section 500/(a)(2).         An organization organized and operated exclusively to test for public safety. See section 500/(a)(2). </th <th>INAI</th> <th>ne or</th> <th>ule olganizatio</th> <th></th> <th></th> <th>ADVANCEMENT</th> <th>TIN</th> <th></th> <th></th> <th></th> <th></th>	INAI	ne or	ule olganizatio			ADVANCEMENT	TIN						
The organization is not a private foundation because it is: (For lines 1 through 12, check only one box)	Pa	art I	Reason			(All organizations must c	omplete th	nis part.) S	ee instruction		5 /424410		
1       A church, convention of churches, or association of churches described in section 170(b) (1/A)(ii).         2       A school described in section 170(b) (1/A)(iii). (Attach Schedule E) (Form 990).)         3       A hospital or a cooperative hospital service organization described in section 170(b) (1/A)(iii). Enter the hospital's name, city, and state:         6       An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b) (1/A)(iii). Complete Part II.)         7       M norganization that formally receives a substatial part of its support fom a governmental unit or from the general public described in section 170(b) (1/A)(vi). (Complete Part II.)         8       A community trust described in section 170(b) (1/A)(vi). (Complete Part II.)         9       An arganization that roomally receives a substatial part of its support from contributions, membership (ease, and goas receipts from active section sol(a)(3/A) (3/A)													
3       A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:         5       An organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state:         7       An organization that nomally receives a substantial part of its support from a governmental unit described in section 170(b)(1)(A)(v). (Complete Part II.)         8       A community fueld described in section 170(b)(1)(A)(v). (Complete Part II.)         9       An agrinultural research organization described in section 170(b)(1)(A)(v). (Complete Part II.)         9       An agrinultural research organization described in section 170(b)(1)(A)(v). (Complete Part II.)         9       An agrinultural research organization described in section 170(b)(1)(A)(v). (Complete Part II.)         10       An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its swapt trutomics, subject to certain exceptions; and (2) no more than 31 1/3% of its support from gross investment income and unrelated business traable income (less section 509(c)). (2) complete Part III.)         11       An organization reparated acclusively to test for public safety. See section 509(c)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and appart to granization agrination agrinagrination agrination agrination agrinagrination agrination agrin		Ŭ		•		<b>.</b> .		,	l)(A)(i).				
4       A medical research organization operated in conjunction with a hospital described in section 170(b)(1(A)(iii)). Enter the hospital's name, city, and state:         5       An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(v).         7       Man organization operated for the benefit of a college or university owned or operated by a governmental unit of support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part II.)         8       A community trust described in section 170(b)(1)(A)(v). (Complete Part II.)         9       A a gonization that normally receives a substantial part of its support from contributions, membership fees, and grant college or university:         10       An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to lis everent functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization affer June 30, 1975.         12       An organization organization operated exclusively of the benefit ot, perform the functions of, or to carry out the purposes of one or more publicly supported organization additive of supporting organization and complete files 11 (2).         11       An organization organization operated, supervised, or controlled by its supported organization affect the supporting organization additive of supporting organization additi the supported organization(s), by having contines (1). Yope (1),	2		A school dese	cribed in <b>secti</b>	ion 170(b)(1)(A)(ii).	Attach Schedule E (Forn	า 990).)						
<ul> <li>city, and state:</li></ul>	3		A hospital or	a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	i).				
S       An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(V).         8       A debrail, state, or local government or governmental unit described in section 170(b)(1)(A)(V). (Complete Part II).         9       An organization that normally receives a substantial part of its support form a governmental unit or form the general public described in section 170(b)(1)(A)(V). (Complete Part II).         9       An organization that normally receives (1) more than 33 1/3% of its support form contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxabile income (see section 501(a)(1).         10       An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxabile exclusively to test for public safety. See section 509(a)(2).         11       An organization organization discribed in section 501(a) from businesses acquired by the organization adjanction adjanctic organization organization expansization supervised on section 509(a)(2). See section 509(a)(2). Check the box on lines 124, 124, and 122.         12       An organization organization supervised or controlled the discribes the type of supporting organization supervised or controlled by its supported organization(s), typically by giving the supported organization(s) that describes the type of supporting or	4		A medical res	earch organiza	ation operated in co	njunction with a hospital	described	in sectio	n 170(b)(1)(A	)(iii). Enter	the hospital's name,		
section 1700(b)(1)(A)(v). (Complete Part II.)         6       A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).         7       An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(v). (Complete Part II.)         9       An agricultural research organization described in section 170(b)(1)(A)(v). (Complete Part II.)         9       An agricultural research organization described in section 170(b)(1)(A)(v). (Complete Part II.)         9       An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions. Subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (ses section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)         11       An organization organized and operated exclusively to test for public safety. See section 509(a)(2). Cock the box on innes 12a through 12d that describes the bype of supporting organization and complete Ines 12a, 12d, and 12g.         12       An organization organization organization operated. supervised, or ontrolled by its supported organization(b), typically by giving the supporting organization sequerised on controlled in connection with its supported organization (b), the organization operated.         13       Type II. A supporting organization appretived or controlled in connection with its supported organization(b), the guery by giving the support				-									
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9       An agricultural research organization described in section 170(b)(1(A)(b) operated in conjunction with a land-grant college or university or a non-land-grant college of the support form contributions. Enter the name, city, and state of the college or university or a non-land-grant college of the support form contributions. Subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III)         10       An organization organized and operated exclusively to test for public safety. See section 509(a)(3).         12       An organization organized and operated exclusively to test for public safety. See section 509(a)(3). Check the box on lines 124 through 124 that describes the type of supporting organization and complete lines 12e, 12t, and 12g.         a       Type I.A supporting organization operated, supervised, or controlled by its supported organization(s), by having containation (s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization supervised or controlled in connection with its supported organization(s), by having containation (s) the organization operated in connection with its supported organization(s). Type III A supporting organization operated in connection with its supported organization(s) the power to regularly must astify a distribution requirement of the supporting organization operated in connection with its supported organization(s) that is not functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. A supporting organization operated in connection with its supported organization(s) that is	8		-		-	(1)(A)(vi), (Complete Par	ни)						
or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:							,	ed in conju	inction with a	land-grant	college		
10       An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). Complete Part III.)         11       An organization organized and operated exclusively to test for public safety. See section 509(a)(4).         12       An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organization describes in section 509(a)(4). See section 509(a)(2). Check the box on lines 12a through 12d that describes the type of supporting organization to support organization (5), typically by giving the supporting organization organization operated, supervised, or controlled by its support organization(s), typically by giving the supporting organization supervised or controlled in connection with its support organization(s), by having control or management of the supporting organization vested in connection with its supported organization(s), they and the supporting organization (s) (see instructions). You must complete Part IV, Sections A and C.         c       Type III functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. A supporting organization (s) centrolared in the same persons that control or manage the supported organization(s) that is not functionally integrated. A supporting organization operated in connection with its supported organization(s) that is supported organization(s) (see instructions). You must comple			-	-				-		-	-		
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organization(s). You must complete Part IV, Sections A and C. c  Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d  Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization) (ii) Sthe organization generally must satisfy a support (see instructions)) (ii) Name of supported (iii) EIN (iii) EIN (iii) Sthe organization is support (see instructions)) (ii) Name of supported (iii) EIN (iii) Sthe organization) (iii) Sthe organization about the supported organization) (iv) Is the organization (see instructions)) (iv) Is the orga	k				-				-		-		
c       Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.         d       Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.         e       Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.         f       Enter the number of supported organizations         g       Provide the following information about the supported organization(s).         (i) Name of supported       (ii) ZiN of organization (s).         (iii) Name of supported       (iii) ZiN of organization (s).         (iv) Amount of monetary organization       (v) Amount of other support (see instructions)         support (see instructions)       Image organization (see instructions)         (v) Amount of monetary organization       (v) Amount of monetary support (see instructions)         support (see instructions)       Image organization (see instructions)         (v) Amount of monetary organization       (v) Amount of monetary support (see instructions)         u       u       u							ame perso	ns that co	ntrol or manag	ge the supp	ported		
its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) Is the organization listed organization (iv) Amount of monetary support (see instructions) (v) Amount of monetary support (see instructions) (v) Amount of monetary support (see instructions) (v) Amount of monetary support (see instructions) (vi) Amount of monetary (vi) Amount of monetary (vi) Amo			¬ ~	.,	•								
d       Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.         e       Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.         f       Enter the number of supported organizations         g       Provide the following information about the supported organization(s).         (i) Name of supported organization about the supported organization (described on lines 1-10) above (see instructions))       (iv) Is the organization listed (v) Amount of monetary support (see instructions)       (v) Amount of other support (see instructions)         organization       (ii) EIN       (iii) Type of organization (described on lines 1-10) above (see instructions))       (v) Amount of monetary support (see instructions)       support (see instructions)         upport (see instructions)       upport (see instructions)       upport (see instructions)       upport (see instructions)       upport (see instructions)	C			-	• •					ly integrate	ed with,		
that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.  e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (described on lines 1-10 above (see instructions)) Yes No (iv) Amount of monetary support (see instructions) (vi) Amount of comparization (described on lines 1-10 above (see instructions)) Yes No (vi) Amount of monetary support (see instructions) (vi) Amount of monetary organization (described on lines 1-10 above (see instructions)) Ves No (vi) Amount of monetary support (see instructions) (vi) Amount of monetary suppo				•	. , .	· ·			-	ted organi:	zation(s)		
requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.  e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (described on lines 1-10 (described on lin	·	•	_ ,	-	•	0 0 1				0	( )		
e       Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.         f       Enter the number of supported organizations         g       Provide the following information about the supported organization(s).         (i) Name of supported organization organization       (ii) Type of organization (described on lines 1-10 above (see instructions))         in your governing document?       (v) Amount of monetary support (see instructions)         version       (vi) Sthe organization (described on lines 1-10 above (see instructions))         in your governing document?       (vi) Amount of monetary support (see instructions)         version       (vi) Sthe organization (described on lines 1-10 above (see instructions))         version       version         u       u         u       u         u       u         u       u         u       u         u       u         u       u         u       u         u       u         u       u         u       u         u       u         u       u         u       u         u       u      <					• •	<b>v</b>	-						
f Enter the number of supported organizations	e	•	_							II, Type III			
g       Provide the following information about the supported organization (i) Name of supported organization       (ii) Type of organization (described on lines 1·10) above (see instructions))       (iv) Is the organization listed in your governing document?       (v) Amount of monetary support (see instructions)       (vi) Amount of other support (see instructions)         Image: the support of			functionally	integrated, or	Type III non-functio	nally integrated supporti	ng organiz	ation.					
(i) Name of supported organization organization       (iii) EIN       (iii) Type of organization (described on lines 1.10 above (see instructions))       (iv) Is the organization listed in your governing document?       (v) Amount of monetary support (see instructions)       (vi) Amount of other support (see instructions)         Yes       No	f	Ente	er the number o	of supported a	organizations								
in your governing document?     support (see instructions)       organization     (described on lines 1-10 above (see instructions))     in your governing document?       Yes     No	<u>ç</u>			<u> </u>			(iv) is the orga	inization listed		monetan	(vi) Amount of other		
			.,			(described on lines 1-10	in your governi	ng document?		-			
Image: Second						above (see instructions))	165						
Image: Second													
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# FOUNDATION FOR ADVANCEMENT IN CONSERVATION

23-7424418 Page 2

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

Sec	ction A. Public Support													
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	<b>(c)</b> 2021	(d) 2022	(e) 2023	(f) Total							
1	Gifts, grants, contributions, and													
	membership fees received. (Do not													
	include any "unusual grants.")	2914670.	1193351.	1651498.	1775180.	2195053.	9729752.							
2	Tax revenues levied for the organ-													
	ization's benefit and either paid to													
	or expended on its behalf													
3	The value of services or facilities													
	furnished by a governmental unit to													
	the organization without charge	0014670	1100051	1651400	1005100	0105050	0700750							
	Total. Add lines 1 through 3	2914670.	1193351.	1651498.	1775180.	2195053.	9729752.							
5	The portion of total contributions													
	by each person (other than a													
	governmental unit or publicly													
	supported organization) included													
	on line 1 that exceeds 2% of the													
	amount shown on line 11,						1760040							
_	column (f)         1760249.           6 Public support. Subtract line 5 from line 4.         7969503.													
	Ction B. Total Support. Subtract line 5 from line 4.						1909505.							
		(a) 2010	(1-) 2020	(a) 2021	(4) 2022	(a) 2022								
	ndar year (or fiscal year beginning in) Amounts from line 4	(a)2019 2914670.	(b) 2020 1193351.	(c) 2021 1651498.	(d) 2022 1775180.	(e) 2023 2195053.	(f) Total 9729752.							
	Gross income from interest,	2514070.	1199991.	1051450.	1,,2100.	2199099.	51251521							
0														
	dividends, payments received on													
	securities loans, rents, royalties, and income from similar sources	50,713.	43,105.	101,092.	71,903.	114,521.	381,334.							
9	Net income from unrelated business	50,715.	45,105.	101,052.	,1,505.	114,521.	501,551.							
3	activities, whether or not the													
	business is regularly carried on													
10	Other income. Do not include gain													
10	or loss from the sale of capital													
	assets (Explain in Part VI.)	3,351.	177.	-8.	877.	2,106.	6,503.							
11	Total support. Add lines 7 through 10	0,0011					10117589.							
	Gross receipts from related activities,	etc. (see instructio	uns)			12	378,260.							
	First 5 years. If the Form 990 is for th	,	,											
	organization, check this box and <b>stor</b>	-												
Sec	ction C. Computation of Publi													
	Public support percentage for 2023 (I			column (f))		14	78.77 %							
	Public support percentage from 2022		-			15	80.14 %							
	<b>33 1/3% support test - 2023.</b> If the o					ore, check this bo>								
	stop here. The organization qualifies	as a publicly suppo	orted organization				X							
b	33 1/3% support test - 2022. If the o	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box							
	and stop here. The organization qual	ifies as a publicly s	supported organization	ation										
17a	17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more,													
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop he	<b>re.</b> Explain in Part	VI how the organiz	ation							
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pu	blicly supported o	rganization									
b	10% -facts-and-circumstances test	- 2022. If the org	anization did not o	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is <sup>-</sup>	10% or							
	more, and if the organization meets the													
	organization meets the facts-and-circu				• •									
18	Private foundation. If the organization	n did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a									
						Schedule A	(Form 990) 2023							

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Schedule A (Form 990) 2023

Part II

FOUNDATION	FOR	ADVANCEMENT	IN
CONSERVATIO	ON		

# Schedule A (Form 990) 2023 CONSERVATION Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	3 (f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support			•	L	•	I
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	3 (f) Total
9 Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13</b> Total support. (Add lines 9, 10c, 11, and 12.)						
<b>14 First 5 years.</b> If the Form 990 is for t	he organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) orgar	ization,
						·····
Section C. Computation of Publ						
<b>15</b> Public support percentage for 2023			column (f))		15	%
16 Public support percentage from 202					16	%
Section D. Computation of Inve						
17 Investment income percentage for 2					17	%
<b>18</b> Investment income percentage from					18	%
19a 33 1/3% support tests - 2023. If the						ine 17 is not
more than 33 1/3%, check this box a						
<b>b 33 1/3% support tests - 2022.</b> If the						
line 18 is not more than 33 1/3%, ch						tion
20 Private foundation. If the organizati	on ala not check a	box on line 14, 19	a, or 19b, check t	his box and see in		
332023 12-21-23		16	5		Sched	lule A (Form 990) 2023

# FOUNDATION FOR ADVANCEMENT IN CONSERVATION

1

Yes No

#### Schedule A (Form 990) 2023 CONS Part IV Supporting Organizations

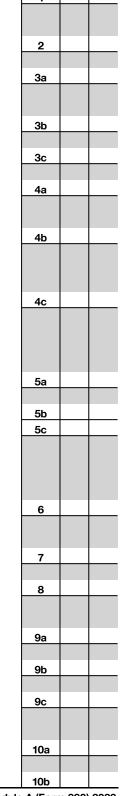
(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and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

## Section A. All Supporting Organizations

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

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332024 12-21-23



Schedule A (Form 990) 2023

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	FOUNDATION FOR ADVANCEMENT IN			
Sche	edule A (Form 990) 2023 CONSERVATION 23	-742441	8 Pa	age <b>5</b>
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one of more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officer directors, or trustees at all times during the tax year? <i>If</i> " <i>No</i> ," <i>describe in</i> <b>Part VI</b> <i>how the supported organization(s)</i>			110
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supporte organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the ye	ar (see instructions).
---	---	------------------------

- The organization satisfied the Activities Test. Complete line 2 below. а
- b The organization is the parent of each of its supported organizations. Complete line 3 below.

с	The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instructions).
	 5 11 5 ,	Beeching (eee method a geven method a geven method a fill)

- Activities Test. Answer lines 2a and 2b below. 2
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes." then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes." explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- Parent of Supported Organizations. Answer lines 3a and 3b below. 3

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard. 332025 12-21-23

3b Schedule A (Form 990) 2023

2a

2b

За

Yes No

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18

	FOUNDATION FOR ADVANCEM	ENT I	N	
Sch	edule A (Form 990) 2023 CONSERVATION			23-7424418 Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orgai	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970 ( explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	complete	e Sections A through E.	
Sec	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C - Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	y integrat	ed Type III supporting org	anization (see

instructions).

Schedule A (Form 990) 2023

332026 12-21-23

15350627 745960 15525

	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizatione		3-/424418 Page 7
		a)(s) supporting Orga	inzations (continu	ued)	
	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exer			1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity	· · · · · ·		2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	6	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions ( <i>describe in</i> <b>Part VI</b> ). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.	· · · · · · · · · · · · · · · · · · ·		7	
8	Distributions to attentive supported organizations to which the	e organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6				
10	Line 8 amount divided by line 9 amount	(i)	(::)	10	/:::)
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2023	ns	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
с	From 2020				
d	From 2021				
е	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if			T	
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2019				
b	Excess from 2020				
C	Excess from 2021				
d	Excess from 2022				
е	Excess from 2023				

Schedule A (Form 990) 2023

	(5	FOUNDATION FOR CONSERVATION	ADVANCEMENT		23-7424418 Page 8
Part VI	Part IV, Section A, lines 1, line 1; Part IV, Section D,	<b>mation.</b> Provide the explana 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b lines 2 and 3; Part IV, Section E 8; and Part V, Section E, lines 2	), 9c, 11a, 11b, and 11c; E, lines 1c, 2a, 2b, 3a, ar	line 10; Part II, line 17a or 17 Part IV, Section B, lines 1 and d 3b; Part V, line 1; Part V, So	o; Part III, line 12; d 2; Part IV, Section C, ection B, line 1e; Part V,
332028 12-21-2	23				Schedule A (Form 990) 2023

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

# Schedule B

## (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Organization type (check one):

FO

# Schedule of Contributors

\*\* PUBLIC DISCLOSURE COPY

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

IN

OMB No. 1545-0047

# 2023

Employer identification number

FOUNDATION	FOR	ADVANCEMENT
CONSERVATIO	ON	

23-7424418

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

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

### **General Rule**

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

### Special Rules

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

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

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

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

Schedule B (Form 990) (2023)

FOUNDATION FOR ADVANCEMENT IN CONSERVATION			23-7424418
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 contributior	(d) Type of contribution
1		\$886,5	37.       Person       X         Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Is Type of contribution
2		\$768,7	82. Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Is Type of contribution
3		\$244,8	64.       Person       X         Payroll       Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) ns Type of contribution
4_		\$100,0	00. (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) ns Type of contribution
5		\$65,0	00. (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023)

Name of organization

Page **2** Employer identification number

323452 12-26-23

	3 (Form 990) (2023)		Page <b>3</b>
Name of or FOUND	ganization ATION FOR ADVANCEMENT IN		Employer identification number
	RVATION		23-7424418
Part II	Noncash Property (see instructions). Use duplicate copies of Part II i	f additional space is needed	i.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions)	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions)	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions)	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	
		     \$	

323453 12-26-23

Schedule B (Form 990) (2023)

## 15350627 745960 15525

	B (Form 990) (2023)				Page 4
	organization				Employer identification number
	ATION FOR ADVANCEMENT IN	N			
Part III	RVATION Exclusively religious, charitable, etc., contribution	ons to organizations describ	ed in section 50	1(c)(7) (8) or (10) t	$\frac{23-7424418}{1000}$
· are m	from any one contributor. Complete columns (a)	through (e) and the following	line entry. For or	ganizations	
	completing Part III, enter the total of exclusively religious, or Use duplicate copies of Part III if additional s	charitable, etc., contributions of <b>\$1</b> Space is needed.	,000 or less for th	e year. (Enter this info.	once.) Ψ
(a) No.			<i>c</i> i	( )) D	
from Part I	(b) Purpose of gift	(c) Use of gi	ft	(d) Des	cription of how gift is held
		(e) Transfe	er of aift		
		(0)	. er gitt		
	Transferee's name, address, a	nd ZIP + 4	R	elationship of tra	ansferor to transferee
(a) No.					
from Part I	(b) Purpose of gift	(c) Use of gi	ft	(d) Des	cription of how gift is held
		(e) Transfe	er of gift		
			a or girt		
	Transferee's name, address, a	nd ZIP + 4	R	elationship of tra	ansferor to transferee
(a) No.		I		<i>(</i> ) =	
from Part I	(b) Purpose of gift	(c) Use of gi	ft	(d) Des	cription of how gift is held
		(e) Transfe	er of gift		
			-		
	Transferee's name, address, a	nd ZIP + 4	R	elationship of tra	ansferor to transferee
(a) No. from	(b) Purpose of gift	(c) Use of gi	#	(d) Dos	cription of how gift is held
Part I				(d) Des	
		(e) Transfe	er of gift		
	Transferee's name, address, a	nd ZIP + 4	R	elationship of tra	ansferor to transferee
323454 12-26	6-23				Schedule B (Form 990) (2023)

15350627 745960 15525

SC			Supple	menta	al Financial	St	atements	S		OMB No. 1	545-0047
	n 990)		Complete in	f the orga	nization answered "	Yes'	" on Form 990,			202	23
Depart	ment of the Treasury		Part IV, line 6,		), 11a, 11b, 11c, 11d, Attach to Form 990.	11e	e, 11f, 12a, or 12	2b.		Open to	Public
Interna	Revenue Service				0 for instructions an	-	e latest informa	ation.		Inspect	
Nam	e of the organizatio	on	FOUNDATION FOR	R ADV	ANCEMENT IN					identificatio 3 - 7 4 2 4 4	
Par	t I Organiza	tior	s Maintaining Donor	Advise	d Funds or Othe	r Si	milar Funds	or Ac			
			wered "Yes" on Form 990,							e e in prese in a	
					(a) Donor ad	vised	d funds	()	<b>)</b> Funds and	d other accou	unts
1			year				1				
2	Aggregate value of contributions to (during year)										
3			nts from (during year)				L12,000. 350,723.				
4			of year					م ما 4 ، ، م ما			
5	-		orm all donors and donor ac roperty, subject to the orga		-					X Yes	No
6			orm all grantees, donors, an							103	
•	0		and not for the benefit of th		9	0					
	impermissible priva	ate b	enefit?		, 		· · ·			X Yes	No No
Par	t II Conserva	atio	n Easements. Complet	e if the or	ganization answered	"Yes	" on Form 990, I	Part IV,	ine 7.		
1	Purpose(s) of conse	ervat	ion easements held by the	organizatio	on (check all that app	ly).					
	Preservation	of la	nd for public use (for examp	ole, recrea	tion or education)		Preservation of	f a histo	rically impor	tant land area	a
	Protection of	fnati	ural habitat				Preservation of	f a certif	ed historic s	structure	
	Preservation		•								
2	Complete lines 2a t day of the tax year.		igh 2d if the organization he	eld a qualif	fied conservation con	tribu	ition in the form	of a con I		isement on th at the End of th	
			votion accomenta						2a		
a b			vation easements						2a 2b		
c											
d											
			sted in the National Registe		• •				2d		
3											
	year										
4			e property subject to conser		-						
5	•		ave a written policy regardi	•		oecti	on, handling of			<u> </u>	<u> </u>
<u> </u>	,		nent of the conservation eas								
6	Stall and volunteer	nou	rs devoted to monitoring, in	ispecting,	nandling of violations	s, and	a enforcing cons	servation	reasements	during the y	ear
7	Amount of expense	es in	curred in monitoring, inspec	tina hand	lling of violations and	1 enf	orcing conserva	tion eas	ements duri	na the vear	
•		00 11	surred in morntoning, inspec	ang, nane			oroning conserva			ng the year	
8	Does each conserv	atior	n easement reported on line	2d above	e satisfy the requireme	ents	of section 170(h	)(4)(B)(i)			
	and section 170(h)(									Yes	No No
9	In Part XIII, describ	e ho	w the organization reports o	conservatio	on easements in its re	even	ue and expense	stateme	ent and		
	balance sheet, and	l incl	ude, if applicable, the text o	f the footr	note to the organization	on's i	financial stateme	ents tha	t describes t	he	
Der	organization's acco	ounti	ng for conservation easeme	nts.				hay C:			
Par			s Maintaining Collec			rea	isures, or Ol	ner Si	milar ASS	els.	
4.			organization answered "Yes								
Ia	-		ed, as permitted under FAS es, or other similar assets he							Orks	
			XIII the text of the footnote	•							
b	· •		ed, as permitted under FAS						sheet works	of	
	-		or other similar assets held								
			nounts relating to these iter	-	,	,			•	,	
	•	•	on Form 990, Part VIII, line 1						\$		
	(ii) Assets included	d in l	Form 990, Part X						\$		
2	If the organization r	recei	ved or held works of art, his	storical tre	asures, or other simila	ar as	sets for financia	l gain, p	rovide		
	-		equired to be reported unde		-						
а			orm 990, Part VIII, line 1								
			<u>1 990, Part X</u>								000) 0000
	-	auc	tion Act Notice, see the In	structions	s tor form 990.				Scheo	dule D (Form	990) 2023
332051	09-28-23				26						

		ION FOR ADV	VANCEMENT	IN						
	dule D (Form 990) 2023 CONSERV					2	3 - 74	24418	S Pa	age <b>2</b>
Par	t III Organizations Maintaining C							(contin	ued)	
3	Using the organization's acquisition, accession collection items (check all that apply).	on, and other records	s, check any of the f	ollowing that m	ake sign	iificant us	e of its			
а	Public exhibition	d	Loan or exc	hange program						
b	Scholarly research	е		0.0						
с	c Preservation for future generations									
4	Provide a description of the organization's co	ollections and explair	how they further th	e organization's	s exemp	t purpose	in Part	XIII.		
5	During the year, did the organization solicit o									
	to be sold to raise funds rather than to be ma		,	,				Yes		No
Par	t IV Escrow and Custodial Arrang						art IV. li			
	reported an amount on Form 990, Par		g				,	,		
1a	Is the organization an agent, trustee, custodi	an. or other intermed	liarv for contribution	is or other asset	ts not ind	cluded				
	on Form 990, Part X?		•					Yes		No
b	If "Yes," explain the arrangement in Part XIII						···· <u> </u>			
			iernig tablet					Amount		
c	Beginning balance					1c				
	Additions during the year					1d				
	Distributions during the year					1e				
f	Ending balance					16 1f				
	Did the organization include an amount on Fo					· · · · · ·		Yes		No
	If "Yes," explain the arrangement in Part XIII.				-	•	····· ∟			
Par										
		(a) Current year	(b) Prior year	(c) Two years t		) Three yea	ars back	(e) Four	vears	back
10	Ia         Beginning of year balance         4,260,063.         4,969,148.         4,588,259.         4,072,180.									340.
										825.
	Net investment earnings, gains, and losses		,01,000.	515,	/ . / .		-,			
	Grants or scholarships									
е	Other expenditures for facilities	165,175.	154,217.	263,8	898	1.8/	1 318		188	985.
	and programs	105,175.	154,217.	203,0	590.	100	0,318.		100,	905.
	Administrative expenses	4,886,142.	1 260 062	4,969,3	1 4 0	1 500	2 2 5 0		072	100
-	End of year balance		4,260,063.		140.	4,500	8,259.	4,	072,	180.
2	Provide the estimated percentage of the curr			)) held as:						
а	Board designated or quasi-endowment	.0000	_%							
b	Permanent endowment 68.2300	%								
С	Term endowment 31.7700									
	The percentages on lines 2a, 2b, and 2c show									
3a	Are there endowment funds not in the posse	ssion of the organiza	tion that are held ar	nd administered	for the			Г	V.	N
	organization by:								Yes	No
	(i) Unrelated organizations?							3a(i)		<u>X</u>
	(ii) Related organizations?							3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organiza							3b		
4	Describe in Part XIII the intended uses of the		wment funds.							
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answered	d "Yes" on Form 990			art X, lin	e 10.				
	Description of property	(a) Cost or o basis (investn		or other (other)	• •	umulated eciation		(d) Bool	c valu	е
10	Land		-, 2000	( ·····)						
	Land									
	Buildings						-+			
	Leasehold improvements						-+			
	Equipment		1	8,850.	1	L8,850				0.
	Other									0.
iotal	. Add lines 1a through 1e. (Column (d) must e	<u>qual Form 990. Part .</u>	<u>X, line 10c, column</u>	<u>(B))</u>	<u></u>			D /7	000	
						S	chedule	D (Form	990)	2023

FOUNDATION	FOR	ADVANCEMENT	IN
CONSERVATIO	ON		

Schedule D (Form 990) 2023 CONSERVATION	1	23	-7424418 Page 3
Part VII Investments - Other Securities			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line 1	1b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) TIFF MULTIASSET FUND -			
(B) NON PUBLICLY TRADED	3,675,341.	END-OF-YEAR MARKET	VALUE
(C)	5707575110		11101
(D)			
(E)			
(F)			
(G)			
(H)	0.000.044		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	3,675,341.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	l-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total (Oct (b) must angel Form 000, Dart V, line 10, act (D))			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B)) Part IX Other Assets			
	n Form 000 Dart IV line 1	1d Soc Form 000 Part V line 15	
Complete if the organization answered "Yes" c		Td. See Form 990, Part A, line 15.	(h) Deels welve
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col.	<i>(B</i> ))		
Part X Other Liabilities			
Complete if the organization answered "Yes" of	n Form 990. Part IV. line 1	1e or 11f. See Form 990. Part X. line 25	
(-) December of the Hits			(b) Book value
(1) Federal income taxes (2) DUE TO AIC			487,531.
			407,331.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 25, col.	<i>(B)</i> )		487,531.
<ol> <li>Liability for uncertain tax positions. In Part XIII, provide the second s</li></ol>			
organization's liability for uncertain tax positions under l			

Schedule D (Form 990) 2023

332053 09-28-23

	FOUNDATION FOR ADVANCEMEN	I. TN				
	dule D (Form 990) 2023 CONSERVATION				7424418	Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statem		Revenue per Re	turn		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.				
1	Total revenue, gains, and other support per audited financial statements			1	3,180,	680.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments		730,473. 1,350.			
b	Donated services and use of facilities		1,350.			
С	Recoveries of prior year grants					
d	Other (Describe in Part XIII.)					
е	Add lines 2a through 2d			2e	731,	823.
3	Subtract line 2e from line 1			3	2,448,	857.
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		<u>17,199.</u> 515.			
b	Other (Describe in Part XIII.)	4b	515.			
С	Add lines <b>4a</b> and <b>4b</b>			4c	, 17 2,466	714.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	2,466,	571.
Pa	t XII Reconciliation of Expenses per Audited Financial Staten	nents With	Expenses per H	leturi	n	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12					
1	Total expenses and losses per audited financial statements			1	2,892,	026.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a	1,350.			
b	Prior year adjustments	<b>2</b> b				
С	Other losses	2c				
d	Other (Describe in Part XIII.)	2d				
е	Add lines 2a through 2d			2e		350.
3	Subtract line 2e from line 1			3	2,890,	676.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	17,199.			
b	Other (Describe in Part XIII.)	4b	515.			
с	Add lines 4a and 4b			4c		714.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	2,908,	390.
Pa	rt XIII Supplemental Information					

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 V, LINE 4:

PERMANENT ENDOWMENTS MAINTAINED BY THE ORGANIZATION REMAIN IN PERPETUITY

AND THE EARNINGS MAY BE USED TO FUND PROFESSIONAL DEVELOPMENT PROGRAMS AND

ACTIVITIES, SCHOLARSHIPS, AND GRANTS IN ACCORDANCE WITH DONOR INTENT FOR

USE OF THE ENDOWMENT EARNINGS.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

## COST OF GOODS SOLD REPORTED AS AN EXPENSE ON THE

515.

### FINANCIAL STATEMENTS AND NETTED AGAINST REVENUE

ON FORM 990, PART VIII, LINE 10B.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

332054 09-28-23

	OUNDATION FOR ADVANCEMEN ONSERVATION tion (continued)	T IN 23-7424418 Page 5
COST OF GOODS SOLD RE	PORTED AS AN EXPENSE ON 7	THE 515.
FINANCIAL STATEMENTS	AND NETTED AGAINST REVEN	UE
ON FORM 990, PART VII	I, LINE 10B.	
		Schedule D (Form 990) 2023

15350627 745960 15525

SCHEDULE F	Stateme	nt of Act	ivities Outside the Un	ited Sta	ites 🗆	OMB No. 1545-0047
(Form 990)	Complete if the		2023			
	2011p1010 11 110	- gamzation a	Attach to Form 990.			<b>LULJ</b> Open to Public
Department of the Treasury Internal Revenue Service	Go to w	ww.irs.gov/Form	1990 for instructions and the latest in	formation.		nspection
Name of the organization					Employer id	entification number
FOUNDATION FOR	ADVANCEM	ENT IN				
CONSERVATION					23-7424	
		ctivities Out	side the United States. Comple	te if the orgar	ization answer	ed "Yes" on
Form 990, Part I						
-	•		ds to substantiate the amount of its grar the selection criteria used to award the g			X Yes No
the grantees engionity i	or the grants of a			grants of assis		
2 For grantmakers. Desc	cribe in Part V the	organization's	procedures for monitoring the use of its	grants and ot	her assistance	outside the
United States.		0	C C	0		
3 Activities per Region. (T	he following Part		an be duplicated if additional space is ne	eded.)		
(a) Region	(b) Number of	(c) Number of employees,	(d) Activities conducted in the region		vity listed in (d)	(f) Total expenditures
	offices in the region	agents, and	(by type) (such as, fundraising, pro- gram services, investments, grants to		gram service, e specific type	for and
	in the region	independent contractors	recipients located in the region)		(s) in the regior	investments
		in the region	recipients located in the regiony			in the region
			GRANTS TO RECIPIENTS			
EUROPE	0	0	LOCATED IN THE REGION			7,000.
MIDDLE EAST AND			GRANTS TO RECIPIENTS			
NORTH AFRICA	0	o	LOCATED IN THE REGION			8,000.
			GRANTS TO RECIPIENTS			
SOUTH AMERICA	0	0	LOCATED IN THE REGION			1,000.
			GRANTS TO RECIPIENTS			
NORTH AMERICA	0	0	LOCATED IN THE REGION			38,150.
EAST ASIA AND THE			GRANTS TO RECIPIENTS			
PACIFIC	0	0	LOCATED IN THE REGION			3,398.
	0					5,550.
2 a Subtatal	0	0				57,548.
<b>3 a</b> Subtotal <b>b</b> Total from continuation						57,540.
sheets to Part I	0	0				0.
c Totals (add lines 3a						
and 3b)	0	0				57,548.

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

Schedule F (Form 990) 2023

LHA 332071 11-29-23

332072 11-29-23

## FOUNDATION FOR ADVANCEMENT IN

Schedule F (Form 990) 2023 CONSERVATION

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

23-7424418

<b>1</b> (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FM\ appraisal, other)
			KRESS CONSERVATION					
		NORTH AMERICA	FELLOWSHIP GRANT	37,000.	WIRE TRANSFER	0.		
2 Enter total number of			recognized as charities by the t					

exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

Page 2

Schedule F (Form 990) 2023

CONSERVATION

23-7424418

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

### Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	<b>(e)</b> Manner of cash disbursement	<b>(f)</b> Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
PROFESSIONAL DEVELOPMENT &							
KRESS INTERNATIONAL TRAVEL							
SCHOLARSHIPS	EUROPE	7	7,000.	WIRE	0.		
STOUT & KRESS INTERNATIONAL TRAVEL SCHOLARSHIPS	MIDDLE EAST AND NORTH AFRICA	7	8,000.	WIRE	0.		
PROFESSIONAL DEVELOPMENT &							
KRESS INTERNATIONAL TRAVEL	EAST ASIA AND THE						
SCHOLARSHIPS	PACIFIC	3	3,398.	WIRE	0.		
HORTON SCHOLARSHIP	NORTH AMERICA	1	1,150.	WIDE	0.		
			1,130.				
PROFESSIONAL DEVELOPMENT							
SCHOLARSHIP	SOUTH AMERICA	1	1,000.	WIRE	0.		

Schedule F (Form 990) 2023

Page 3

Scheo	dule F (Form 990) 2023 CONSERVATION	23-7424418	Page 4
Par			
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)	X Yes	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2023

332074 11-29-23

Schedule F (Form 990) 2023 Part V Supplemental Information

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

PART I, LINE 2:

GRANTS TO INDIVIDUALS OUTSIDE THE UNITED STATES:

CONSERVATION

GRANT AND SCHOLARSHIP RECIPIENTS ARE SELECTED THROUGH A RATING SYSTEM

PROVIDED BY A PANEL OF AT LEAST THREE INDEPENDENT EXPERTS IN APPROPRIATE

FIELDS. PROJECTS AND BUDGETS ARE EVALUATED AGAINST PUBLISHED CRITERIA.

RECIPIENTS ARE REQUIRED TO SUBMIT A REPORT OF THEIR ACTIVITY, INCLUDING

DETAILS OF EXPENDITURES. AWARDS FOR ATTENDANCE AT AIC OR FAIC EVENTS ARE

CHECKED AGAINST ROSTERS. PUBLICATION FELLOWSHIPS ARE AWARDED IN THREE

PAYMENTS - AN INITIAL PAYMENT OF 1/3 UPON SELECTION; 1/3 ON SUBMISSION OF

APPROXIMATELY 1/2 THE MANUSCRIPT, AND THE FINAL 1/3 UPON RECEIPT AND

REVIEW OF THE COMPLETED MANUSCRIPT.

GRANTS TO ORGANIZATIONS OUTSIDE THE UNITED STATES:

GRANT AND SCHOLARSHIP RECIPIENTS ARE SELECTED THROUGH A RATING SYSTEM

PROVIDED BY A PANEL OF AT LEAST THREE INDEPENDENT EXPERTS IN APPROPRIATE

FIELDS. PROJECTS AND BUDGETS ARE EVALUATED AGAINST PUBLISHED CRITERIA.

RECIPIENT ORGANIZATIONS ARE REQUIRED TO SUBMIT A REPORT OF THEIR

ACTIVITY, INCLUDING DETAILS OF EXPENDITURES, CONTACT INFORMATION FOR

PARTICIPANTS AND EVENT EVALUATIONS (IF APPLICABLE).

332075 11-29-23

SCHEDULE I       Grants and Other Assistance to Organizations,         (Form 990)       Governments, and Individuals in the United States         Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.										
Department of the Treasury Internal Revenue Service		Go to www.irs	Attach to Form a.gov/Form990 for		ation.		Open to Public Inspection			
Name of the organization FOUNDATION CONSERVAT		ANCEMENT IN					Employer identification number $23 - 7424418$			
Part I General Information on Grants ar	nd Assistance									
<ol> <li>Does the organization maintain records to criteria used to award the grants or assis</li> <li>Describe in Part IV the organization's pro</li> </ol>	tance?				-					
Part II Grants and Other Assistance to E recipient that received more than \$	Oomestic Organiz	ations and Domestic	<b>Governments.</b> C	omplete if the orga	anization answered "Y	es" on Form 990, Part	IV, line 21, for any			
<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance			
SOCIETY TO PRESERVE THE MILLVALE MURALS OF MAXO VANKA - 24 MARYLAND AVE PITTSBURGH, PA 15209	25-1659238	501(C)(3)	37,000.	0.			CONSERVATION FELLOWSHIP			
UCLA FOUNDATION 10889 WILSHIRE BOULEVARD, SUITE 110 LOS ANGELES, CA 90024	95-2250801	501(C)(3)	37,000.	0.			CONSERVATION FELLOWSHIP			
AUTRY MUSEUM OF THE AMERICAN WEST 4700 WESTERN HERITAGE WAY LOS ANGELES, CA 90027	95-3947744	501(C)(3)	37,000.	0.			CONSERVATION FELLOWSHIP			
CLEMSON UNIVERSITY-WARREN LASCH CONSERVATION CENTER - 391 COLLEGE AVENUE SUITE 302 - CLEMSON, SC 29634	57-6000254	gov't	37,000.	0.			CONSERVATION FELLOWSHIP			
ART INSTITUTE OF CHICAGO 111 S. MICHIGAN AVENUE CHICAGO, IL 60603	36-2167725	501(C)(3)	37,000.	0.			CONSERVATION FELLOWSHIP			
REGENTS UNIV. OF CALIFORNIA LOS ANGELES - BOX 957089, 1125 MURPHY HALL, 405 HILGARD AVE - LOS ANGELES, CA 90095	95-6006143	501(C)(3)	5,066.	0.			CONSERVATION GRANT			
<ul> <li>2 Enter total number of section 501(c)(3) ar</li> <li>3 Enter total number of other organizations</li> </ul>	nd government org	anizations listed in the	- 1			I	7			

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

Schedule I (Form 990) 2023

FOUNDATION FOR AI	VANCEMENT IN
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CONSERVATION Schedule I (Form 990)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ESERVATION MARYLAND							
LTIMORE, MD 21211	52-0609575	501(C)(3)	8,000.	0.			CONSERVATION GRANT

Schedule I (Form 990)

Schedule I (Form 990) 2023

CONSERVATION

23-7424418

Page 2

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

(a) Type of grant or assistance	<b>(b)</b> Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
KRESS PUBLICATION GRANT	5	70,000.	0.		
NEH HIT CONVENING EVENT TRAVEL STIPENDS	44	52,503.	0.		
MAHR TRAINING STIPEND	2	377.	0.		
NEH AFR MICROGRANT	3	4,450.	0.		
PROFESSIONAL DEVELOPMENT SCHOLARSHIP	4	4,000.	0.		

PART I, LINE 2:

GRANTS TO INDIVIDUALS IN THE UNITED STATES:

GRANT AND SCHOLARSHIP RECIPIENTS ARE SELECTED THROUGH A RATING SYSTEM

PROVIDED BY A PANEL OF AT LEAST THREE INDEPENDENT EXPERTS IN APPROPRIATE

FIELDS. PROJECTS AND BUDGETS ARE EVALUATED AGAINST PUBLISHED CRITERIA.

RECIPIENTS ARE REQUIRED TO SUBMIT A REPORT OF THEIR ACTIVITY, INCLUDING

DETAILS OF EXPENDITURES. AWARDS FOR ATTENDANCE AT AIC OR FAIC EVENTS ARE

CHECKED AGAINST ROSTERS. PUBLICATION FELLOWSHIPS ARE AWARDED IN THREE

#### PAYMENTS - AN INITIAL PAYMENT OF 1/3 UPON SELECTION; 1/3 ON SUBMISSION OF

Schedule I (Form 990) CONSERVATION	23-7424418					
Part III Continuation of Grants and Other Assistance to Domes	tic Individuals	(Schedule I (Form 99	90), Part III.)	r	1	
<b>(a)</b> Type of grant or assistance	(b) Number of recipients	<b>(c)</b> Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash as	sistance
GAEHDE SCHOLARSHIP	1.	1,330.	0.			
HORTON SCHOLARSHIP	2.	2,200.	0.			
STOUT SCHOLARSHIP	9.	9,030.	0.			
NEH PROFESSIONAL DEVELOPMENT SCHOLARSHIP	5.	4,210.	0.			
KRESS INTERNATIONAL TRAVEL GRANT	1.	1,000.	0.			

Schedule I (Form 990)

Schedule I (Form 990) CONSER

APPROXIMATELY 1/2 THE MANUSCRIPT, AND THE FINAL 1/3 UPON RECEIPT AND REVIEW

OF THE COMPLETED MANUSCRIPT.

GRANTS TO ORGANIZATIONS IN THE UNITED STATES:

GRANT AND SCHOLARSHIP RECIPIENTS ARE SELECTED THROUGH A RATING SYSTEM

PROVIDED BY A PANEL OF AT LEAST THREE INDEPENDENT EXPERTS IN APPROPRIATE

FIELDS. PROJECTS AND BUDGETS ARE EVALUATED AGAINST PUBLISHED CRITERIA.

RECIPIENT ORGANIZATIONS ARE REQUIRED TO SUBMIT A REPORT OF THEIR ACTIVITY,

INCLUDING DETAILS OF EXPENDITURES, CONTACT INFORMATION FOR PARTICIPANTS AND

EVENT EVALUATIONS (IF APPLICABLE).

Schedule I (Form 990)

332291 04-01-23 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.



23 - 7424418

CONSERVATION

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

ΤN

PRESERVATION PRIORITIES.

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

FOUNDATION FOR ADVANCEMENT

FREE WEBINARS AND TWO LOW-COST COURSES PER YEAR. THE PROGRAM ALSO

SUPPORTS A MODERATED FORUM WITH MORE THAN 3,600 SUBSCRIBERS THAT

PROVIDES COLLECTIONS CARE GUIDANCE TO MUSEUM STAFF.

FAIC HOSTS THE KNOWLEDGE-SHARING PLATFORM CONSERVATION ONLINE (COOL)

INCLUDING THE INTERNATIONALLY GLOBAL CONSERVATION FORUM (FORMERLY KNOWN

AS THE CONSERVATIONDISTLIST) WITH OVER 11,000 SUBSCRIBERS.

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

A NEW REGIONAL AFR NETWORK IN NEW HAMPSHIRE.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

RESEARCH & PUBLICATIONS - FAIC PUBLISHES INFORMATION OF INTEREST TO THE

CONSERVATION AND PRESERVATION COMMUNITIES ON ITS WEB PAGES, SUCH AS

SURVEY RESULTS AND OTHER RESEARCH. FAIC VIDEOS ON DISASTER RESPONSE AND

OTHER TOPICS ARE MADE AVAILABLE THROUGH FAIC'S LEARNING PORTAL AND ON

THE AIC YOUTUBE ACCOUNT. FAIC IS PARTNERING WITH THE NATIONAL ENDOWMENT

FOR THE HUMANITIES TO CONDUCT THE "HELD IN TRUST" PROJECT, WHICH

EXAMINES THE CURRENT STATE OF AND FUTURE RECOMMENDATIONS FOR

CONSERVATION AND PRESERVATION IN ADVANCE OF THE 250TH ANNIVERSARY OF

THE SIGNING OF THE DECLARATION OF INDEPENDENCE. AS HELD IN TRUST'S

 FIRST OUTCOME, FAIC IS DEVELOPING CLIMATE RESILIENCE RESOURCES FOR

 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990) 2023

 LHA
 332211 11-14-23

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Schedule O (Form 990) 2023	Page <b>2</b>
Name of the organization FOUNDATION FOR ADVANCEMENT IN CONSERVATION	Employer identification number $23 - 7424418$
CULTURAL HERITAGE, AN ONLINE TOOLKIT TO HELP CULTURAL ORGA	NIZATIONS
ASSESS THE IMPACT OF CLIMATE CHANGE ON THEIR SITE AND IMPR	OVE THEIR
RESILIENCY. THE STICH LIFE CYCLE ASSESSMENT PROJECT LOOKS	AT COMMON
PROCESSES AND ACTIVITIES OF COLLECTING INSTITUTIONS AND TH	EIR
ENVIRONMENTAL AND HEALTH IMPACTS. FAIC PUBLISHES THE FIELD	GUIDE TO
EMERGENCY RESPONSE AND THE EMERGENCY RESPONSE AND SALVAGE	WHEEL,
ESSENTIAL RESOURCES FOR COLLECTING INSTITUTIONS AFTER DISA	STERS. FAIC
ADMINISTERS THE FAIC/SAMUEL H KRESS CONSERVATION PUBLICATI	ON
FELLOWSHIPS, WHICH HAVE RESULTED IN AT LEAST 32 NEW PUBLIC	ATIONS SINCE
1994. FAIC ALSO OPERATES AN ORAL HISTORY PROJECT, WHICH DO	CUMENTS THE
HISTORY OF CONSERVATION THROUGH INTERVIEWS.	
EXPENSES \$ 105,203. INCLUDING GRANTS OF \$ 70,917. REVEN	UE \$ 12,363.

FORM 990, PART VI, SECTION A, LINE 6:

THE ORGANIZATION HAS ONE MEMBER, THE AMERICAN INSTITUTE FOR CONSERVATION OF HISTORIC AND ARTISTIC WORKS.

FORM 990, PART VI, SECTION A, LINE 7A:

THE SOLE MEMBER APPOINTS THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 7B:

THE MEMBER HAS THE SOLE AUTHORITY TO MODIFY THE BYLAWS OF THE ORGANIZATION,

ADOPT NEW BYLAWS IN PLACE OF ANY PROVISIONS DELETED, AND TO APPROVE ANY

DECISIONS DEEMED NECESSARY AND/OR REQUIRED BY LAW.

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

THE FORM 990 IS PREPARED BY AN OUTSIDE CPA AND REVIEWED AND APPROVED BY

MANAGEMENT. THE EXECUTIVE DIRECTOR REVIEWS, APPROVES, AND SIGNS THE RETURN. 332212 11-14-23 42

15350627 745960 15525

2023.04000 FOUNDATION FOR ADVANCEMEN 15525\_\_1

Schedule O (Form 990) 202									Page <b>2</b>
Name of the organization FOUNDATION FOR ADVANCEMENT IN						Employer identification number			
CONSERVATION						23-7424418			
A COPY IS PROV	VIDED TO	THE 1	BOARD	OF	DIRECTORS	ELECTRONICALLY	PRIOR	то	FILING
WITH THE IRS.									

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

THE ORGANIZATION REQUIRES ANNUAL DISCLOSURE OF POTENTIAL OR ACTUAL CONFLICTS OF INTEREST. EACH YEAR, FAIC BOARD MEMBERS, OFFICERS, AND KEY EMPLOYEES ARE PROVIDED A COPY OF THE CONFLICT OF INTEREST POLICY. EACH BOARD MEMBER AFFIRMS ON A WRITTEN FORM THAT THEY HAVE RECEIVED A COPY OF THE CONFLICT OF INTEREST POLICY, HAVE READ AND UNDERSTAND THE POLICY, AND AGREE TO COMPLY WITH THE POLICY. IN ADDITION, ANY POTENTIAL OR ACTUAL CONFLICTS OF INTEREST ARE ADDRESSED DURING THE YEAR AS NEEDED AND APPROPRIATE ACTION IS TAKEN BY THE BOARD OF DIRECTORS. AS A MATTER OF POLICY, THE ORGANIZATION DOES NOT ALLOW TRANSACTIONS BETWEEN THE ORGANIZATION AND INTERESTED PARTIES WHICH COULD RESULT IN AN ACTUAL OR PERCEIVED CONFLICT OF INTEREST.

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

THE EXECUTIVE DIRECTOR OF THE ORGANIZATION IS A PAID EMPLOYEE OF THE
AMERICAN INSTITUTE FOR CONSERVATION OF HISTORIC AND ARTISTIC WORKS (AIC), A
RELATED 501(C)(6) ORGANIZATION. THE ORGANIZATION SHARES ALL STAFF,
FACILITIES AND OTHER COSTS WITH AIC. THE COMPENSATION OF THE ORGANIZATION'S
EXECUTIVE DIRECTOR IS ESTABLISHED BY THE BOARD OF DIRECTORS OF HER
EMPLOYER, AIC, AND WAS ORIGINALLY ESTABLISHED BASED ON MARKET BASED DATA AT
THE TIME OF HIRE FOR EXECUTIVE DIRECTORS OF ORGANIZATIONS OF SIMILAR SIZE
AND SCOPE AND WITHIN BUDGETARY CONSTRAINTS OF THE ORGANIZATION. THE AIC
ALLOCATES THE SALARY AND BENEFITS OF THE EXECUTIVE DIRECTOR BETWEEN THE
ORGANIZATIONS BASED ON TIMESHEETS. THE LAST COMPENSATION REVIEW TOOK PLACE
DECEMBER 2023.
332212 11-14-23 Schedule O (Form 990) 2023

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Schedule O (Form 990) 202	23				Page 2
Name of the organization	FOUNDATION	FOR	ADVANCEMENT	IN	Employer identification number
	23-7424418				

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

AL, AR, CA, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, OR, PA, RI, SC, TN, UT

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

THESE DOCUMENTS ARE NOT MADE PUBLICLY AVAILABLE UNLESS REQUIRED BY LAW OR

AT THE DISCRETION OF THE BOARD OF DIRECTORS.

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

INSTRUCTOR FEES:

PROGRAM SERVICE EXPENSES59,126.MANAGEMENT AND GENERAL EXPENSES0.FUNDRAISING EXPENSES0.

TOTAL EXPENSES

ASSESSMENT FEES:

PROGRAM SERVICE EXPENSES	595,851.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	595,851.

OTHER :

PROGRAM SERVICE EXPENSES	437,526.
MANAGEMENT AND GENERAL EXPENSES	38,000.
FUNDRAISING EXPENSES	13,900.
TOTAL EXPENSES	489,426.

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59,126.

Schedule O (Form 990) 2023 Name of the organization FOUNDATION FOR ADVANCEMENT IN CONSERVATION	Page Employer identification numbe 23-7424418
TECHNICAL SUPPORT STAFF:	
PROGRAM SERVICE EXPENSES	9,557.
MANAGEMENT AND GENERAL EXPENSES	1,436.
FUNDRAISING EXPENSES	263.
TOTAL EXPENSES	11,256.
PUBLIC RELATIONS:	
PROGRAM SERVICE EXPENSES	92,000.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	92,000.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,247,659.
332212 11-14-23	Schedule O (Form 990) 202

SCHEDULE I (Form 990)	Com	Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.										
Name of the o		OR ADVANCEMENT IN					er identifi - 74244					
Part I Ide	entification of Disregarded Entities. Com	plete if the organization answered "Yes	s" on Form 990, Part IV, line 3	3.								
<b>(a)</b> Name, address, and EIN (if applicable) of disregarded entity		(b) Primary activity	(c) Legal domicile (state o foreign country)	(d) Total incol	(e) me End-of-year a	ssets Direc		<b>(f)</b> controlling ntity	9			
Part II Ide	entification of Related Tax-Exempt Orgar ganizations during the tax year.	nizations. Complete if the organization	answered "Yes" on Form 990	D, Part IV, line 34, b	because it had one o	r more relate	ed tax-exe	mpt				
	(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile (state or foreign country)	(d) Exempt Code section	npt Code Public charity		ntrolling ty	enti	rolled ity?			
23-7291856	NSTITUTE FOR CONSERVATION - , 727 15TH STREET NW, STE. 500, , DC 20005	MEMBERSHIP ORGANIZATION	DISTRICT OF COLUMBIA	501(C)(6)		/A		Yes	No X			
	ork Reduction Act Notice, see the Instruct						hedule R					

332161 09-28-23 LHA

## Schedule R (Form 990) 2023 CONSERVATION

## 23-7424418 Page 2

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

		-																			
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(I	h)	(i)	(j)	(k)										
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	egal nicile Direct controlling Prec (rel entity exclusion	(state or entity (related, unrelated,	Share of total income	Share of total income		Share of total Share of end-of-year assets	income end-of-year		ortionate ations?	Code V-UBI amount in box 20 of Schedule	Genera manag partn	<sup>il or</sup> Percentage <sup>ing</sup> ownership							
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	10										
										+											
											+										

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

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

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.						
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?					
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X		
b	Gift, grant, or capital contribution to related organization(s)	1b		X		
с	Gift, grant, or capital contribution from related organization(s)	1c	X			
d	Loans or loan guarantees to or for related organization(s)	1d		X		
	Loans or loan guarantees by related organization(s)	1e		Х		
f	Dividends from related organization(s)	1f		Х		
g	Sale of assets to related organization(s)	1g		Х		
	Purchase of assets from related organization(s)	1h		X		
i	Exchange of assets with related organization(s)	1i		X		
j	Lease of facilities, equipment, or other assets to related organization(s)	1j		X		
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		X		
	Performance of services or membership or fundraising solicitations for related organization(s)	11		X		
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		X		
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X			
o	Sharing of paid employees with related organization(s)	10	X			
р	Reimbursement paid to related organization(s) for expenses	1p	X			
	Reimbursement paid by related organization(s) for expenses	1q	X			
r	Other transfer of cash or property to related organization(s)	1r	X			
S	Other transfer of cash or property from related organization(s)	1s		Х		

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

<b>(a)</b> Name of related organization	<b>(b)</b> Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining amount involved
(1) AMERICAN INSTITUTE FOR CONSERVATION	с	24,100.	ACTUAL COST
(2) AMERICAN INSTITUTE FOR CONSERVATION	N	185,628.	ACTUAL COST
(3) AMERICAN INSTITUTE FOR CONSERVATION	0	556,843.	ACTUAL COST
(4) AMERICAN INSTITUTE FOR CONSERVATION	Р	853,353.	ACTUAL COST
(5) AMERICAN INSTITUTE FOR CONSERVATION	Q	48,561.	ACTUAL COST
(6) AMERICAN INSTITUTE FOR CONSERVATION	R	50,000.	ACTUAL COST

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

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

(a)	(b)	(c)	(d)	(e	)	(f)	(g)	0	ו)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income	(e) Are a partners 501(c) orgs	all s sec.	Share of	Share of		opor- nate	Code V-UBI	General	Percentage
of entity		(state or foreign	Predominant income (related, unrelated, excluded from tax under sections 512-514)	501(c) orgs	)(3) .?	total		alloca	tions?	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	managin partner?	ownership
		country)	sections 512-514)	Yes		income	assets	Yes	No	(Form 1065)	Yes No	
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# FOUNDATION FOR ADVANCEMENT IN CONSERVATION

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

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