### EXTENSION GRANTED TO FEBRUARY 15, 2024

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A	For the	$^{ m e}$ 2022 calendar year, or tax year beginning $^{ m APR}$ $^{ m 1}$ , $^{ m 2022}$ and ending	MAR 31, 2023	•		
В	Check if applicable		D Employer identifi			
		e:				
	Addres change	ENVIRONMENTAL DEFENSE CENTER				
	Name change	Doing business as	77-00619	94		
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)  Room/si	uite <b>E</b> Telephone numbe	r		
	Final return/	906 CAPDEN SUPERU	(805) 96			
	termin- ated		G Gross receipts \$	2,919,585.		
	Ameno		H(a) Is this a group re			
	Applic	F Name and address of principal officer:ALEX KATZ	for subordinates			
	pendir	906 GARDEN STREET, SANTA BARBARA, CA 9310		—		
T	Tax-exe		<b>─</b>   ` ′	list. See instructions		
_	Websit		H(c) Group exemption			
		·-·		State of legal domicile: CA		
	art I	Summary	our or rottmations =   [.	· · · · · · · · · · · · · · · · · · ·		
_	1	Briefly describe the organization's mission or most significant activities: SINCE 19	77 WE HAVE EM	POWERED		
Governance	-	COMMUNITY BASED ORGANIZATIONS TO ADVANCE ENV	IRONMENTAL PR	OTECTION.		
nai	2	Check this box if the organization discontinued its operations or disposed of n				
Ve	3	Number of voting members of the governing body (Part VI, line 1a)		12		
		Number of independent voting members of the governing body (Part VI, line 1b)		12		
o V		Total number of individuals employed in calendar year 2022 (Part V, line 2a)		14		
itie	6	Total number of volunteers (estimate if necessary)		135		
Activities	72	Total unrelated business revenue from Part VIII, column (C), line 12		0.		
ĕ	'	Net unrelated business taxable income from Form 990-T, Part I, line 11		0.		
_	+ -	Net differenced business taxable income from 1 offit 930-1, 1 art 1, life 11	Prior Year	Current Year		
	٥	Contributions and grants (Part VIII, line 1h)	1,603,300.	1,709,072.		
ne	8		127,090.	187,688.		
Revenue	9	Program service revenue (Part VIII, line 2g)	357,188.	59,850.		
Be	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	163,740.	140,736.		
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,251,318.	2,097,346.		
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0.	0.		
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.			
	I	Benefits paid to or for members (Part IX, column (A), line 4)	1,304,737.			
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)  Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  162,479.	1,304,737.	0.		
en	16a	Professional fundraising fees (Part IX, Column (A), line 1 (e)	0.	0.		
EXC	- b		323,791.	408,938.		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,628,528.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	622,790.	1,632,230. 465,116.		
	<u>  19</u>	Revenue less expenses. Subtract line 18 from line 12	Beginning of Current Year			
Net Assets or				End of Year		
SSe	일 <b>20</b>	Total assets (Part X, line 16)	6,540,400.	6,743,428.		
etA	21	Total liabilities (Part X, line 26)	106,468.	105,613.		
	22	Net assets or fund balances. Subtract line 21 from line 20 Signature Block	6,433,932.	6,637,815.		
_						
	-	Ities of perjury, I declare that I have examined this return, including accompanying schedules and sta		y knowledge and belief, it is		
tru	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer nas any knowledge.			
		Signature of officer	I Date			
Sig			Dato			
He	ere	ALEX KATZ, EXECUTIVE DIRECTOR  Type or print name and title				
			Date Check	II PTIN		
ь.		Print/Type preparer's name  OUD T GT BY AT DEFEN OD A	if			
Pa		CHRISLEY N. REED, CPA	self-employ			
	eparer	Firm's name MCGOWAN GUNTERMANN	Firm's EIN 9	5-3680171		
US	e Only	Firm's address 200 E CARRILLO STREET, SUITE 300		05) 060 0175		
_		SANTA BARBARA, CA 93101-7141	Phone no. (8	05) 962-9175		
Ma	av the IF	RS discuss this return with the preparer shown above? See instructions		X Yes No		

Pai	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: THE ORGANIZATION PROTECTS AND ENHANCES THE LOCAL ENVIRONMENT THROUGH
	EDUCATION, ADVOCACY AND LEGAL ACTION.
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? Yes No 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 \$ 313,831 • including grants of \$ ) (Revenue \$ 46,922 • )
	SANTA BARBARA CHANNEL (ISSUES REGARDING OCEAN WATER QUALITY, CHANNEL
	ISLANDS NATIONAL PARK AND MARINE SANCTUARY, OFFSHORE OIL AND WIND
	DEVELOPMENT, MARINE MAMMALS AND OTHER WILDLIFE, MARINE PROTECTED AREAS
	[MPAS]): SERVED AS THE CONSERVATION REPRESENTATIVE ON THE CHANNEL
	ISLANDS NATIONAL MARINE SANCTUARY ADVISORY COUNCIL AND CHAIRED THE
	CONSERVATION WORKING GROUP; CO-CHAIRED THE SANTA BARBARA MPA
	COLLABORATIVE; OBTAINED APPROVAL BY THE INTERNATIONAL MARITIME
	ORGANIZATION TO EXPAND AREAS TO BE AVOIDED AND EXTEND SHIPPING LANES TO
	REDUCE THE RISK OF SHIP STRIKES ON WHALES; WORKED TO REDUCE IMPACTS OF
	·
	SHIP STRIKES THROUGH VESSEL SPEED REDUCTIONS; PREVAILED IN LITIGATION
	(COURT OF APPEALS) PROHIBITING FRACKING FROM PLATFORMS OFFSHORE
	CALIFORNIA; ADVOCATED FOR INCREASED ENVIRONMENTAL PROTECTIONS IN THE
4b	(Code:) (Expenses \$
	OPEN SPACE AND WILDLIFE PRESERVATION (ISSUES REGARDING ENDANGERED
	SPECIES, HABITATS, WATERSHEDS, AGRICULTURAL AND OPEN SPACE LANDS):
	OPPOSED CITY OF SOLVANG'S APPLICATION TO DRILL NEW WELLS THAT THREATEN
	ENDANGERED STEELHEAD IN THE SANTA YNEZ RIVER; FILED LAWSUIT CHALLENGING
	U.S. FOREST SERVICE'S APPROVAL OF LOGGING PROJECT AT REYES PEAK IN THE
	LOS PADRES NATIONAL FOREST; RECEIVED FAVORABLE RULING IN THE NINTH
	CIRCUIT COURT OF APPEALS DIRECTING THE BUREAU OF RECLAMATION AND SANTA
	MARIA VALLEY WATER DISTRICT TO OPERATE TWITCHELL DAM IN A MANNER
	CONSISTENT WITH THE ENDANGERED SPECIES ACT; SUPPORTED GOLETA MEASURE B
	TO RAISE FUNDS FOR CREEK RESTORATION; SUBMITTED SCOPING COMMENTS
	REGARDING THE FOREST SERVICE'S PROPOSED "ECOLOGICAL RESTORATION"
	LOGGING PROJECT; SETTLED CASE INVOLVING HOUSING PROJECT TO PROTECT LOS
4c	(Code: ) (Expenses \$ 502,129 • including grants of \$ ) (Revenue \$ 75,075 • )
	CLIMATE AND ENERGY (ISSUES REGARDING OIL AND GAS DEVELOPMENT, CLIMATE
	CHANGE, RENEWABLE ENERGY): DEFEATED EXXONMOBIL PROPOSAL TO RESTART
	OFFSHORE PLATFORMS AND TRUCK OIL; OPPOSED PROPOSAL TO RESTART DAMAGED
	PLAINS PIPELINE; WON NINTH CIRCUIT COURT OF APPEALS DECISION
	PROHIBITING FRACKING FROM OFFSHORE PLATFORMS; INVESTIGATED APPLICATION
	OF GENERAL CONSERVATION PLAN FOR OIL AND GAS ACTIVITIES IN SANTA
	BARBARA COUNTY; COMMENTED ON THE BUREAU OF OCEAN ENERGY MANAGEMENT'S
	DRAFT ENVIRONMENTAL IMPACT STATEMENT REGARDING PLATFORM
	DECOMMISSIONING; OPPOSED PROPOSED AQUIFER EXEMPTION THAT THREATENS
	DRINKING WATER FOR 150,000 RESIDENTS OF NORTHERN SANTA BARBARA COUNTY.
	DATIMING WAITE FOR 130,000 RESIDENTS OF MORIHERN SANTA DARDARA COUNTY.
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 188,298 • including grants of \$ ) (Revenue \$ 28,153 •)
4e	Total program service expenses 1,255,323.

232003 12-13-22

# Form 990 (2022) ENVIRONMENTAL DEFENSE CENTER Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	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		х
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	Х	
_	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	4	25	
5	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?  If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		х	
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Λ	
	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?			
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		1 43
D	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		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? 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,			<u> </u>
	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		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х

# Form 990 (2022) ENVIRONMENTAL DEFENSE CENTER Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	<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			X
	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24c		
Ч	any tax-exempt bonds?  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	214		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			7.
	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? If			
а	"Yes," complete Schedule L, Part IV	28a		х
h	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b?//			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash 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		Х
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		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	00		X
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
34	Part V, line 1	34		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			l
	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?		v	
Pai	Note: All Form 990 filers are required to complete Schedule O	38	Х	
· a	Check if Schedule O contains a response or note to any line in this Part V			
	Shook is Solidadio Solitatino a response of note to any line in this rate v		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a		- 55	
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	1

# 022) ENVIRONMENTAL DEFENSE CENTER Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

				Yes	No		
<b>2</b> a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1.4					
	filed for the calendar year ending with or within the year covered by this return	2a 14		v			
_	If at least one is reported on line 2a, did the organization file all required federal employment tax return	าร?	2b	X	Х		
3a			3a				
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule (		3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		4-		Х		
<b>L</b>	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		21		
D	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	Populate (EBAB)					
50	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	·	5a		Х		
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year?		5b		X		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c				
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		- 00				
ou	any contributions that were not tax deductible as charitable contributions?		6a	Х			
b	If "Yes," did the organization include with every solicitation an express statement that such contribution						
-	were not tax deductible?		6b	Х			
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and serv	vices provided to the payor?	7a	Х			
b			7b	Х			
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	is required					
	to file Form 8282?		7c		X		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d					
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontract?	7e		X		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?	7f		X		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 8899 as required?	7g				
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?						
8	$\textbf{Sponsoring organizations maintaining donor advised funds.} \ Did \ a \ donor \ advised \ fund \ maintained$	by the					
	sponsoring organization have excess business holdings at any time during the year?		8				
9 Sponsoring organizations maintaining donor advised funds.							
а			9a				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b				
10	Section 501(c)(7) organizations. Enter:						
a		10a					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b					
11	```	11a					
a b	Gross income from other sources. (Do not net amounts due or paid to other sources against	i i a					
	·	11b					
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a				
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	l					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> </u>					
а	Is the organization licensed to issue qualified health plans in more than one state?		13a				
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.						
b	Enter the amount of reserves the organization is required to maintain by the states in which the						
	organization is licensed to issue qualified health plans	13b					
С	Enter the amount of reserves on hand	13c					
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule		14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner						
	excess parachute payment(s) during the year?		15		X		
	If "Yes," see the instructions and file Form 4720, Schedule N.				37		
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 act						
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17				
	If "Yes," complete Form 6069.						

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

	Check if Schedule O contains a response or note to any line in this Part VI			X				
Sec	tion A. Governing Body and Management							
			Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year							
	If there are material differences in voting rights among members of the governing body, or if the governing							
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.							
b	Enter the number of voting members included on line 1a, above, who are independent 1b 12							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other							
	officer, director, trustee, or key employee?	2		X				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision							
	of officers, directors, trustees, or key employees to a management company or other person?	3		X				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X				
5								
6	Did the organization have members or stockholders?	6		Х				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or							
	more members of the governing body?	7a		X				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or							
	persons other than the governing body?	7b		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		77					
а	The governing body?	8a	<u>X</u>					
b	Each committee with authority to act on behalf of the governing body?	8b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	_		37				
<del></del>	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)							
40-	Did the same in the second should be set on the second should be set on the second state of the second should be set on the second should be second should be set on the second should be second should should be second should should should be second should sho	40-	Yes	No X				
	Did the organization have local chapters, branches, or affiliates?	10a						
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	10h						
44.	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 11a	Х					
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe on Schedule O the process, if any, used by the organization to review this Form 990.	па						
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х					
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X					
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120						
·	on Schedule O how this was done	12c	Х					
13	Did the organization have a written whistleblower policy?	13	X					
14	Did the organization have a written document retention and destruction policy?	14	X					
15	Did the process for determining compensation of the following persons include a review and approval by independent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a	Х					
	Other officers or key employees of the organization	15b	Х					
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.							
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a							
	taxable entity during the year?	16a		Х				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation							
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's							
	exempt status with respect to such arrangements?	16b						
Sec	tion C. Disclosure							
17	List the states with which a copy of this Form 990 is required to be filed CA							
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)	s only	avail	able				
	for public inspection. Indicate how you made these available. Check all that apply.							
	X Own website Another's website X Upon request Other (explain on Schedule O)							
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finar	ncial					
	statements available to the public during the tax year.							
20	State the name, address, and telephone number of the person who possesses the organization's books and records							
	ACCOUNTING MANAGER - (805) 963-1622							

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A)	(B)	l ge		((	<b>C)</b>		iout	(D)	(E)	(F)
Name and title	Average hours per	(do	Position (do not check more than one box, unless person is both an				one	Reportable compensation	Reportable compensation	Estimated amount of
	week	offic	officer and a director					from	from related	other
	(list any	or director						the	organizations	compensation
	hours for related	e or d	stee			Highest compensated employee		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	truste	nal tru		oyee	ompei		1099-NEC)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	and related
	below	Individual trustee	Institutional trustee	Officer	Key employee	hest c ployee	Former			organizations
(1) LINDA KROP	line) 40.00	lnd	lns	#	Ke	훈등	휸			
(I) LINDA KROP CHIEF COUNSEL	40.00					Х		142,965.	0.	25,250.
(2) OWEN BAILEY	40.00					^		142,903.	0.	23,230.
FORMER EXECUTIVE DIRECTOR	40.00			х				27,113.	0.	2,811.
(3) DAVE DAVIS	2.00							27,113.	•	2,011.
DIRECTOR		х						0.	0.	0.
(4) DANIEL EMMETT	2.00									
DIRECTOR		х						0.	0.	0.
(5) JUDY PIRKOWITSCH	2.00							-		
DIRECTOR		Х						0.	0.	0.
(6) RICHARD FRANCIS	2.00									
DIRECTOR		Х						0.	0.	0.
(7) DIANE WONDOLOWSKI	5.00									
TREASURER		Х		Х				0.	0.	0.
(8) JIM SALZMAN	2.00									
DIRECTOR		Х						0.	0.	0.
(9) ROB TADLOCK	5.00									
PRESIDENT		Х		Х				0.	0.	0.
(10) VIJAYA JAMMALAMADAKA	2.00								_	
AT LARGE		Х		Х				0.	0.	0.
(11) LEANNE SCHLINGER	2.00									
DIRECTOR		Х						0.	0.	0.
(12) LEE HELLER	2.00	,,							0	0
DIRECTOR	F 00	Х						0.	0.	0.
(13) SABRINA VENSKUS	5.00	<b>.</b> ,		7.7					0	0
VICE PRESIDENT	2.00	Х		Х				0.	0.	0.
(14) CHRISTINA MCGINNIS	2.00	х						0.	0.	0.
01RECTOR (15) GERARDO AYALA	2.00	Δ						0.	0.	0.
DIRECTOR	2.00	Х						0.	0.	0.
(16) LAUREN TRUJILLO	5.00							· ·	0.	
SECRETARY	3.00	Х		х				0.	0.	0.
(17) DAVID POWDRELL	2.00			<u> </u>						<u></u>
DIRECTOR		х						0.	0.	0.
	1				L	_			<u>.</u>	- 000

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A) Name and title	(B) Average hours per week	box	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				h an	( <b>D</b> ) Reportable compensation from	(E)  Reportable compensation from related		on amo		
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organization (W-2/1099-MIS 1099-NEC)	zations com 99-MISC/ fi -NEC) org an		compensation from the organization and related organizations	
		<u> </u>											
		-											
		<u> </u>											
1b Subtotal		<u> </u>					<u> </u>	170,078.		0.	2	8,0	61.
<ul> <li>c Total from continuation sheets to Part</li> <li>d Total (add lines 1b and 1c)</li> <li>2 Total number of individuals (including but</li> </ul>								170,078.	0,000 of reportab	0.			
compensation from the organization										ı		Yes	No
3 Did the organization list any <b>former</b> office line 1a? <i>If</i> "Yes," complete Schedule J for	such individual										3		Х
<ul> <li>4 For any individual listed on line 1a, is the and related organizations greater than \$1</li> <li>5 Did any person listed on line 1a receive or</li> </ul>	50,000? <i>If</i> "Yes,	" co	mple	ete S	Sche	edul	e J f	for such individual			4	Х	
rendered to the organization? If "Yes," co Section B. Independent Contractors	· · · · · · · · · · · · · · · · · · ·				-						5		X
Complete this table for your five highest of the organization. Report compensation for the organization.								n the organization's tax		npens			
(A) Name and busines	s address	N	INC	3				( <b>B)</b> Description of s	ervices	С	ompe	) nsatio	n
							_						
2 Total number of independent contractors	(including but r		mite	d to	tho	se li	ster	d above) who received m	ore than				
\$100,000 of compensation from the organ		.0111		J 10		0		a abovo, who received in	.oro triairi		F	990 <i>(</i>	2000)

Form 990 (2022) ENVIRONI
Part VIII Statement of Revenue

		Check if Schedule O	contains a respor	nse or note to any li	ne in this Part \/III			
		Officer if Octredule O	contains a respon	ise of flote to arry in	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt		Revenuè éxcluded
						function revenue	business revenue	
<u> </u>								sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a					
S a	b	Membership dues	1b					
S, (	С	Fundraising events	1c	50,523.				
当当		Related organizations						
S,E		Government grants (contr						
Sign		All other contributions, gifts,			_			
je ti	•	similar amounts not included		1,658,549.				
호텔	_		· · · · · · · · · · · · · · · · · · ·	126,214.				
g p	_	Noncash contributions included in			1,709,072.			
9 0	n	Total. Add lines 1a-1f			1,109,014.			
			ıa	Business Code	107 600	107 600		
<u>8</u>	2 a	LEGAL SERVICE	iS	_ 541100	187,688.	187,688.		
e Z	b							
Program Service Revenue	С	:						
ev ev	d							
<u>9</u> 6	е							
4	f	All other program service	revenue					
	a	Total. Add lines 2a-2f			187,688.			
$\neg$	3	Investment income (include			,			
	Ü				75,297.			75,297.
	4				7372370			7572574
	4	Income from investment of	· ·	· ·				
	5	Royalties						
			(i) Real	(ii) Personal				
	6 a	Gross rents	6a					
	b	Less: rental expenses	6b					
	С	Rental income or (loss)	6c					
	d	Net rental income or (loss)	)					
	7 a	Gross amount from sales of	(i) Securitie	es (ii) Other				
		assets other than inventory	<sub>7a</sub> 675,22	7.				
	b	Less: cost or other basis			_			
ē		and sales expenses	75 690 . 67	4.				
eu	_	Gain or (loss)	70 - 15 44	7.				
ě	ا	Not goin or (loss)	10 10 11	· •	-15,447.			-15,447.
her Revenue		Net gain or (loss)			13,117			13,447.
	8 a	Gross income from fundraisin						
Ò			,523. of					
		contributions reported on	-	070 201				
		Part IV, line 18		8a 272,301.				
	b	Less: direct expenses		<sub>8b</sub> 131,565.				
	С	Net income or (loss) from	fundraising even	ts	140,736.			140,736.
	9 a	Gross income from gamin	g activities. See					
		Part IV, line 19	-	9a				
	b	Less: direct expenses		9b				
		Net income or (loss) from						
		Gross sales of inventory, I	· ·					
	.o u	and allowances		10a				
		Less: cost of goods sold		10b				
$\dashv$	С	Net income or (loss) from	sales of inventor					
S.				Business Code				
e e o	11 a			_				
en la	b			_				
Miscellaneous Revenue	С							
Ĭ,	d	All other revenue						
_		Total. Add lines 11a-11d						
	12	Total revenue. See instruction			2,097,346.	187,688.	0.	200,586.

### Part IX | Statement of Functional Expenses

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

	Check if Schedule O contains a respons	se or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
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	760,686.	615,395.	85,958.	59,333.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	401 250	210 200	F1 44.6	24 600
9	Other employee benefits	401,372.	318,328.	51,416.	31,628.
10	Payroll taxes	61,234.	49,538.	6,919.	4,777.
11	Fees for services (nonemployees):				
а	Management				
b	Legal	25 210	00 040	2 721	2 721
С	Accounting	37,310.	29,848.	3,731.	3,731.
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	20 100		22 120	
f	······	32,120.		32,120.	
g	Other. (If line 11g amount exceeds 10% of line 25,	140 (55	110 500	14 066	14 000
	column (A), amount, list line 11g expenses on Sch O.)	140,655.	112,523.	14,066.	14,066. 13,793.
12	Advertising and promotion	13,793.			13,793.
13	Office expenses	28,083.	22 467	2,808.	2 000
14	Information technology	40,003.	22,467.	4,000.	2,808.
15	Royalties	42,493.	33,996.	4,248.	1 210
16	Occupancy	8,457.	8,379.	39.	4,249.
17	Travel	0,437.	0,313.	33.	33.
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest Payments to affiliates				
21	Payments to affiliates	16,548.	13,238.	1,655.	1,655.
22 23	. ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	8,866.	3,446.	4,989.	431.
23 24	Other expenses. Itemize expenses not covered	0,0001	3/1100	1/3030	1311
24	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.)  DUES & PUBLICATIONS	19,989.	15,991.	1,999.	1,999.
a b	FUNDRAISING	13,659.	10,0010	±,,,,,,•	13,659.
b	FELLOWSHIPS/STIPENDS	8,813.	8,813.		13,033.
c d	MISCELLANEOUS	7,744.	4,854.	2,337.	553.
e e	All other expenses	30,408.	18,507.	2,143.	9,758.
25	Total functional expenses. Add lines 1 through 24e	1,632,230.	1,255,323.	214,428.	162,479.
26	Joint costs. Complete this line only if the organization	_, , 2	_,,		
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
22201	12-13-22				Form <b>990</b> (2022)

Form 990 (2022)
Part X Balance Sheet

Pa	rt X	Balance Sheet				
		Check if Schedule O contains a response or note t	o any line in this Part X .			
				(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		25,337.		23,914.
	2	Savings and temporary cash investments			2	1,666,611.
	3	Pledges and grants receivable, net		3		
	4	Accounts receivable, net		4	47,320.	
	5	Loans and other receivables from any current or fo				
		trustee, key employee, creator or founder, substan				
		controlled entity or family member of any of these		5		
	6	Loans and other receivables from other disqualified				
		under section 4958(f)(1)), and persons described in	n section 4958(c)(3)(B)		6	
ţ	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
Ř	9	Prepaid expenses and deferred charges			9	8,485.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D1	0a 882,67			
	b	Less: accumulated depreciation1	ob 444,97		10c	437,701.
	11	Investments - publicly traded securities	4,644,124.	11	4,559,397.	
	12	Investments - other securities. See Part IV, line 11		12		
	13	Investments - program-related. See Part IV, line 11		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal I	ine 33)		_	6,743,428.
	17	Accounts payable and accrued expenses		91,463.	17	99,230.
	18	Grants payable		18		
	19	Deferred revenue	15,005.	19	6,383.	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Par	t IV of Schedule D		21	
es	22	Loans and other payables to any current or former	officer, director,			
≣		trustee, key employee, creator or founder, substan	tial contributor, or 35%			
Liabilities		controlled entity or family member of any of these			22	
_	23	Secured mortgages and notes payable to unrelate			23	
	24	Unsecured notes and loans payable to unrelated the	hird parties		24	
	25	Other liabilities (including federal income tax, payal				
		parties, and other liabilities not included on lines 17	7-24). Complete Part X			
		of Schedule D			25	105 613
	26	Total liabilities. Add lines 17 through 25		106,468.	26	105,613.
S		Organizations that follow FASB ASC 958, check	here X			
nce		and complete lines 27, 28, 32, and 33.		F 060 031		F 241 002
ala	27	Net assets without donor restrictions			27	5,241,083.
B	28	Net assets with donor restrictions		1,365,101.	28	1,396,732.
Ë		Organizations that do not follow FASB ASC 958	, check here			
ō		and complete lines 29 through 33.			_	
ets	29	Capital stock or trust principal, or current funds			29	
\SS(	30	Paid-in or capital surplus, or land, building, or equip			30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated inco			31	6 627 01F
ž	32	Total net assets or fund balances			32	6,637,815.
	33	Total liabilities and net assets/fund balances		<u></u> 6,540,400.	33	6,743,428.

Ра	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				46.	
2	Total expenses (must equal Part IX, column (A), line 25)	2	1	,63			
3	Revenue less expenses. Subtract line 2 from line 1	3				16.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4				32. 33.	
5	Net unrealized gains (losses) on investments						
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	,63	7,8	<u> 15.</u>	
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII					X	
					Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?			2b	Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis	۶,				
	consolidated basis, or both:						
	X Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	i,				
	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	nedule	Ο.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the						
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За		Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired au	ıdit				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b			

Form **990** (2022)

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

Open to Public

Employer identification number

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

Name of the organization

Open to Public Inspection

OMB No. 1545-0047

ENVIRONMENTAL DEFENSE CENTER 77-0061994 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X 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)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the 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 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 organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. 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. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

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

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1997478.	1651760.	1361026.	1603300.	1709072.	8322636.
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	1005450	1.651560	1261006	1.602200	100000	000000
	Total. Add lines 1 through 3	1997478.	1651760.	1361026.	1603300.	1709072.	8322636.
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,						1067730
_	column (f)						1867730. 6454906.
	Public support. Subtract line 5 from line 4.						0454900.
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2010	(a) 2020	(4) 2021	(a) 2022	(f) Total
	Amounts from line 4	1997478.	(b) 2019 1651760.	(c) 2020 1361026.	(d) 2021 1603300.	(e) 2022 1709072.	8322636.
	Gross income from interest.	13371701	10317001	13010201	10033001	1,030,20	03220301
0	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	62,361.	77,541.	67,162.	76,200.	75,297.	358,561.
9	Net income from unrelated business	02,002	, 0 == 0	01,12020	,	7072210	
Ū	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	<b>Total support.</b> Add lines 7 through 10						8681197.
	Gross receipts from related activities,	etc. (see instruction	ons)			12	831,355.
	First 5 years. If the Form 990 is for th			fourth, or fifth tax	year as a section 5	501(c)(3)	
	organization, check this box and stop						
	tion C. Computation of Publ						
	Public support percentage for 2022 (					14	74.36 %
15	Public support percentage from 2021	Schedule A, Part	II, line 14			15	74.99 <u>%</u>
16a	33 1/3% support test - 2022. If the o	•		•		•	
	stop here. The organization qualifies						
b	33 1/3% support test - 2021. If the c						
	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances tes	•					·
	and if the organization meets the fact		•	•		•	
	meets the facts-and-circumstances to	ū	·				
b	10% -facts-and-circumstances tes	_					IU% Or
	more, and if the organization meets the				-		
10	organization meets the facts-and-circ						
าช	Private foundation. If the organization	n dia not check a	box on line 13, 16a	a, 160, 1/a, or 1/k	o, cneck this box a	na see instruction	<u>s</u>

### 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.)

Se	ction A. Public Support	· · · · · ·	,				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	<u> </u>					
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	<u> </u>					
3	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			1			
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support		1	,			
	endar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	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.)	<del> </del>			-		
	Total support. (Add lines 9, 10c, 11, and 12.)			<u>l</u>		<u> </u>	<u> </u>
14	First 5 years. If the Form 990 is for the	e organization's fi	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	tion,
<u></u>	check this box and stop here						<u></u>
	ction C. Computation of Publ					Liel	
	Public support percentage for 2022 (I					15	%
	Public support percentage from 2021 ction D. Computation of Investigation					16	%
	Investment income percentage for 20					17	04
						18	%
	Investment income percentage from 2 a 33 1/3% support tests - 2022. If the						17 is not
196	more than 33 1/3%, check this box a						
L	33 1/3% support tests - 2021. If the						
	line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation If the organization						

### Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

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

		Yes	No
	1		
	•		
	2		
	3a		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	•		
	6		
	7		
	8		
	j		
	9a		
	9b		
	9с		
	10a		
	-		
	10b		
iule	A (Forr	n 990)	2022

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		
С	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 or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	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,			
0	supervised, or controlled the supporting organization.	2		<u> </u>
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			
800	the supported organization(s). tion D. All Type III Supporting Organizations	1	ш	Ь
360	tion b. All Type III Supporting Organizations		· ·	
	Did the consideration and ideas and of the constant and an article by the last develop of the CON constant of the		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	1		
2	organization's governing documents in effect on the date of notification, to the extent not previously provided?  Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
2	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> 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 <b>Part VI</b> 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 yea(see instructions).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see ins	truction	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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.	2a		<u> </u>
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.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а				
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
h	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.

Sche	edule A (Form 990) 2022 ENVIRONMENTAL DEFENSE (	CENTER	1	77-0061994 Page 6
	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Orga		Ŭ
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust on	Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	st complete	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion 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		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B. line 8. column A)	3		

emergency temporary reduction (see instructions). \_\_ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

5

6

Schedule A (Form 990) 2022

5

Enter greater of line 2 or line 3. Income tax imposed in prior year

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

Pa	art V Type III Non-Functionally Integrated (	509(a)(3) Supporting Orga	anizations <sub>(continued)</sub>	
Sect	tion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes	1	
2	Amounts paid to perform activity that directly furthers ex	empt purposes of supported		
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt pur	poses of supported organization	ns <b>3</b>	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required	- provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to whi	ch the organization is responsive	Э	
	(provide details in Part VI). See instructions.		8	
9	Distributable amount for 2022 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	
		(i)	(ii)	(iii)

Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2022			
а	From 2017			
b	From 2018			
С	From 2019			
d	From 2020			
е	From 2021			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2022 distributable amount			
i	Carryover from 2017 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2022 distributable amount			
С	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
а	Excess from 2018			
b	Excess from 2019			
С	Excess from 2020			
d	Excess from 2021			
е	Excess from 2022			

Schedule A (Form 990) 2022

#### SCHEDULE C (Form 990)

Department of the Treasury Internal Revenue Service

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public

Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

	of organ	nization	tions. Complete Part III.		Emp	loyer identification number
			MENTAL DEFENSE			77-0061994
Par	t I-A	Complete if the org	janization is exempt un	der section 501(c)	or is a section 527 of	organization.
2	Political o	campaign activity expendit	eation's direct and indirect polit ures gn activities		9	<b></b>
Par	t I-B	Complete if the org	janization is exempt un	der section 501(c)	(3).	
			incurred by the organization ur			<u> </u>
2	Enter the	amount of any excise tax	incurred by organization mana	gers under section 4955	5	<u> </u>
3	f the org	anization incurred a sectio	n 4955 tax, did it file Form 472	0 for this year?		Yes No
b	f "Yes,"	describe in Part IV.				
Par	t I-C	Complete if the org	janization is exempt un	der section 501(c)	, except section 501	(c)(3).
1	Enter the	amount directly expended	d by the filing organization for s	ection 527 exempt fund	ction activities	<b></b>
			ization's funds contributed to o	•		
						<u> </u>
		•	s. Add lines 1 and 2. Enter here			
ı	ine 17b				(	
			1120-POL for this year?			
			nployer identification number (I			
		,	tion listed, enter the amount pa omptly and directly delivered to	5 5		•
		· ·	additional space is needed, pro		•	ato sogregated faria of a
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
		(a) Name	(b) Address	(C) LIN	filing organization's	contributions received and
					funds. If none, enter -0-	
						delivered to a separate political organization.
						If none, enter -0

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

Schedule C (Form 990) 2022

Part	II-A Complete if section 501(I		on is exer	npt under sectio	n 501(c)(3) and fil	ed Form 5768 (el	ection under					
<b>A</b> Ch			ago to on offi	liated group (and list in	Dort IV and affiliated	Laraun mambar'a nam	a addraga FIN					
<b>A</b> Ch	· ·	•	•	•	i Part IV each amiliated	group member's nam	e, address, EIN,					
R Ch	expenses, and share of excess lobbying expenditures).  Check if the filing organization checked box A and "limited control" provisions apply.											
3 011	<u> </u>	Limits on Lol	bying Expe	•		(a) Filing organization's totals	<b>(b)</b> Affiliated group totals					
1a <sup>-</sup>	Total lobbying expenditur	es to influence pu	blic opinion (	grassroots lobbying)								
b T	Total lobbying expenditur	es to influence a l	egislative boo	dy (direct lobbying)		1,764.						
С	Total lobbying expenditur	es (add lines 1a a	nd 1b)			1,764.						
d (	Other exempt purpose ex	penditures				1,256,321.						
e T	Total exempt purpose exp	oenditures (add lir	es 1c and 1c	l)		1,258,085.						
f_L	Lobbying nontaxable amo	ount. Enter the am	ount from the	e following table in bot	h columns.	200,809.						
Ľ	If the amount on line 1e, co	lumn (a) or (b) is:	The lob	bying nontaxable am	ount is:							
1	Not over \$500,000		20% of	the amount on line 1e.								
	Over \$500,000 but not ov		1	0 plus 15% of the exc								
	Over \$1,000,000 but not o		1	0 plus 10% of the exc	, ,							
	Over \$1,500,000 but not o	over \$17,000,000	1	0 plus 5% of the exce	ss over \$1,500,000.							
L	Over \$17,000,000		\$1,000,0	000.								
		1/ 1 050/				50,202.						
-	Grassroots nontaxable an	•	,			30,202.						
	Subtract line 1g from line Subtract line 1f from line					0.						
	f there is an amount othe	,		ling 1i did the organiz								
	reporting section 4911 ta					Γ	Yes No					
<u>'</u>	eporting section 4911 tax	x loi tilis year: .		raging Period Under	Section 501(h)		<u> 163                                   </u>					
	(Some organiz		a section 5		have to complete all	of the five columns b	elow.					
		Lot	bying Exper	nditures During 4-Yea	ar Averaging Period							
	Calendar year (or fiscal year beginning i	n) <b>(a</b> )	2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) Total					
	Lobbying nontaxable amo	ount 18	88,307.	191,124.	201,717.	200,809.	781,957.					
	Lobbying ceiling amount (150% of line 2a, column(	e))					1,172,936.					
с	Total lobbying expenditur	es	3,146.	5,565.	2,656.	1,764.	13,131.					
	Grassroots nontaxable an		17,077.	47,781.	50,429.	50,202.	195,489.					
	Grassroots ceiling amoun (150% of line 2d, column						293,234.					
f (	Grassroots lobbying expe	enditures										

Schedule C (Form 990) 2022

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(k	o)
	e lobbying activity.	Yes No		Amount	
_	Division the constraint the filling agreement on attenuated influence forcing patients at the con-				
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	5047 )/5			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6)	on 501(c)(5	o), or se	ection	
	501(c)(6).			Yes	No
_	Mayor and betantially all (000/ as mayor) dues a specific of specific labels are small as a			162	NO
1	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?				
2 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4)			ection	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered				e 3. is
	answered "Yes."	·	,	,	,
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				
	expenses for which the section 527(f) tax was paid).				
а	Current year		. 2a		
	Carryover from last year				
	Total		l _		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and ${\bf p}$	oolitical			
	expenditures next year?		4		
5	Taxable amount of lobbying and political expenditures. See instructions		5		
Par					
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-A	, lines 1	and 2 (See	
instru	actions); and Part II-B, line 1. Also, complete this part for any additional information.				

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

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

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

ENVIRONMENTAL DEFENSE CENTER

Employer identification number 77-0061994

Pai	t I Organizations Maintaining Donor Advise	ed Funds or Other Similar Fund	s or Accounts.Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advi	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be	e used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	e conferring
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organizat	ion (check all that apply).	
	Preservation of land for public use (for example, recrea	ation or education) Preservation o	f a historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired		
	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by th	e organization during the tax
	year		
4	Number of states where property subject to conservation ea		
5	Does the organization have a written policy regarding the pe		
	violations, and enforcement of the conservation easements in		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cor	nservation easements during the year
_			
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserv	ation easements during the year
	Does each conservation easement reported on line 2(d) above	us satisfy the requirements of section 17	O/6\/4\/D\/i\
8		-	
9	and section 170(h)(4)(B)(ii)?		
9	balance sheet, and include, if applicable, the text of the foot	·	
	organization's accounting for conservation easements.	note to the organization's illiancial staten	nerits that describes the
Pai	t III Organizations Maintaining Collections o	f Art. Historical Treasures. or C	Other Similar Assets.
	Complete if the organization answered "Yes" on Form		
	If the organization elected, as permitted under FASB ASC 95		and balance sheet works
	of art, historical treasures, or other similar assets held for pul		
	service, provide in Part XIII the text of the footnote to its fina		
b	If the organization elected, as permitted under FASB ASC 95		
-	art, historical treasures, or other similar assets held for public		
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		
_	the following amounts required to be reported under FASB A		a. 3a, p. 61100
а	Revenue included on Form 990, Part VIII, line 1		\$
h	Assets included in Form 990, Part Y		φ

Par	rt III   Organizations Maintaining (	Collections of A	rt, Historical Tr	easures, c	or Othe	r Simila	ar Asse	<b>ts</b> (continu	ied)
3	Using the organization's acquisition, access	sion, and other record	ls, check any of the	following tha	t make si	ignificant	use of its		
	collection items (check all that apply):								
а	Public exhibition	d	Loan or excl	hange progra	am				
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's of	collections and explain	n how they further th	he organizati	on's exen	npt purpo	se in Parl	XIII.	
5	During the year, did the organization solicit	or receive donations	of art, historical trea	sures, or oth	er similar	assets		_	
	to be sold to raise funds rather than to be m							Yes	No_
Par	rt IV Escrow and Custodial Arrar		ete if the organizatio	n answered '	'Yes" on	Form 990	, Part IV,	line 9, or	
	reported an amount on Form 990, Pa	art X, line 21.							
1a	Is the organization an agent, trustee, custoo						_	7	
	on Form 990, Part X?						L	Yes	X No
b	If "Yes," explain the arrangement in Part XII	and complete the fo	llowing table:						
						$\vdash$		Amount	
	Beginning balance								
	Additions during the year								
	Distributions during the year								
	Ending balance					. <b>1</b> f		T	<del></del>
	Did the organization include an amount on F		•			ty?	L	Yes	No
	If "Yes," explain the arrangement in Part XII								
Par	rt V Endowment Funds. Complete	T		(c) Two year			pare hack	(e) Four y	vaare hack
4.	Desiration of control of	(a) Current year	(b) Prior year			-	03,445.		
	Beginning of year balance	4,686,739. 100,000.	4,082,466.		7,735.				801,234.
		-234,727.	469,000. 135,273.		L,486. 2,017.		66,314. 43,142.	1,0	99,968.
	Net investment earnings, gains, and losses	-234,727.	133,273.	302	2,017.		45,142.		33,300.
	Grants or scholarships								
е	. '			4.5	3,772.		58,882.		40,798.
f	and programs Administrative expenses			1	3,772.		30,002.		40,750.
g	End of year balance	4,552,012.	4,686,739.	4 082	2,466.	3 0	67,735.	2 (	903,445.
2	Provide the estimated percentage of the cu				-,	-,-	.,,		
		69.0000	%	i)) ricia as.					
	Permanent endowment 24.0000	%	_′°						
	7 0000								
_	The percentages on lines 2a, 2b, and 2c she	<b>-</b>							
За	Are there endowment funds not in the poss		ation that are held a	nd administe	red for th	ne			
	organization by:	J						Y	res No
	(i) Unrelated organizations							3a(i)	X
	(ii) Related organizations							3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organiz							3b	
4	Describe in Part XIII the intended uses of th		wment funds.						
Par	rt VI Land, Buildings, and Equipr	nent.							
	Complete if the organization answere	ed "Yes" on Form 990	), Part IV, line 11a. S	See Form 990	, Part X,	line 10.			
	Description of property	(a) Cost or o		or other	(c) Ac	cumulate	ed	(d) Book	value
		basis (investr		` '	dep	reciation			
	Land			8,242.					,242.
	Buildings		48	4,646.	3	887,49	99.	<u>97</u>	,147.
	Leasehold improvements					44.			
	Equipment			7,275.		44,9		2	,312.
	Other			2,509.		12,5	09.	125	701
Total	I. Add lines 1a through 1e. (Column (d) must	equal Form 990, Part	X, column (B), line 1	0c.)				437	,701.

Part VII Investments - Other Securities.			- rago
Complete if the organization answered "Yes"	on Form 990, Part IV, line		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)  Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990 Part IV line	a 11c See Form 990 Part Y line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	1-of-vear market value
	(b) Book value	(o) Mothed of Valuation. Cost of the	a or your market value
(1) (2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		e 11d. See Form 990, Part X, line 15.	
(a) l	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line	15)		
Part X Other Liabilities.	<del>;</del> 13.)		
Complete if the organization answered "Yes"	on Form 990 Part IV line	e 11e or 11f See Form 990 Part X line 25	i
1. (a) Description of liability	511 7 51111 555, F 41 CTV, III 10		(b) Book value
(1) Federal income taxes			(-)
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	25.)		
2. Liability for uncertain tax positions. In Part XIII, provide			that reports the

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

Schedule D (Form 990) 2022

2,097,346.

5

Sche	edule D (Form 990) 2022 ENVIRONMENTAL DEFENSE CENTER	77-	0061994	Page 4				
Pai	Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.							
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.							
1	Total revenue, gains, and other support per audited financial statements	1	1,803,	992				
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:							
а	Net unrealized gains (losses) on investments							

d Other (Describe in Part XIII.) -261,234.e Add lines 2a through 2d 2e 2,065,226. Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1: 32,120. a Investment expenses not included on Form 990, Part VIII, line 7b **b** Other (Describe in Part XIII.) 32,120. c Add lines 4a and 4b

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

**b** Donated services and use of facilities c Recoveries of prior year grants

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

1	Total expenses and losses per audited financial statements	1	1,600,110.		
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
		2b			
		2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d	2e	0.		
3	Subtract line 2e from line 1			3	1,600,110.
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	32,120.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b		4c	32,120.	
_5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,632,230.		

#### Part 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:

ENDOWMENT FUNDS TO BE INVESTED IN ACCORDANCE WITH THE INVESTMENT POLICY OF THE CORPORATION FOR THE PURPOSE OF PROVIDING CONSISTENT INCOME TO SUPPORT THE PROGRAMS AND PROJECTS OF THE ORGANIZATION, AS DETERMINED APPROPRIATE BY THE BOARD.

#### PART X, LINE 2:

THE CENTER IS EXEMPT FROM TAXES ON INCOME UNDER INTERNAL REVENUE CODE SECTION 501(C)(3) AND CALIFORNIA REVENUE AND TAXATION CODE 23701(D), THEREFORE NO AMOUNTS FOR INCOME TAXES ARE REFLECTED IN THE ACCOMPANYING FINANCIAL STATEMENTS. THE CENTER IS NOT A PRIVATE FOUNDATION FOR INCOME TAX PURPOSES. THE CENTER IS NOT AWARE OF ANY TRANSACTIONS THAT WOULD

Part XIII Supplemental Information (continued)
AFFECT ITS TAX-EXEMPT STATUS.
THE CENTER EVALUATES UNCERTAIN TAX POSITIONS, WHEREBY THE EFFECT OF THE
UNCERTAINTY WOULD BE RECORDED IF THE OUTCOME WAS CONSIDERED PROBABLE AND
REASONABLY ESTIMABLE. AS OF MARCH 31,2023, THE CENTER HAD NO UNCERTAIN TAX
POSITIONS REQUIRING ACCRUAL.
THE CENTER FILES TAX RETURNS IN CALIFORNIA AND U.S. FEDERAL JURISDICTIONS.
THE CENTER IS NO LONGER SUBJECT TO U.S. FEDERAL, STATE AND LOCAL TAX
EXAMINATIONS BY TAXING AUTHORITIES FOR YEARS BEFORE 2019 AND 2018,
RESPECTIVELY.
PART XI, LINE 2D - OTHER ADJUSTMENTS:
COSTS OF DIRECT BENEFITS TO DONORS

#### SCHEDULE G (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Employer identification number

Schedule G (Form 990) 2022

2022

Open to Public Inspection

ENVIRON	MENTAL DEFENSE CEN	TER	_		77-0061	994		
Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.								
Indicate whether the organization rais	e Solicitat f Solicitat g Special  or oral agreement with any individual tart VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (inclu	non-g gover aising ding o	overnment grants rnment grants events  fficers, directors, tru fundraising services?	stees, or Yes			
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		or control of		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No					
Total								
List all states in which the organization or licensing.	on is registered or licensed to solicit	contrib	outions	s or has been notified	d it is exempt from r	egistration		

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

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

		of fundraising event contributions and gr			<u> </u>	pis greater than \$5,000.		
			(a) Event #1	<b>(b)</b> Event #2	(c) Other events NONE	(d) Total events (add col. (a) through		
			AUCTION			col. (c))		
ē			(event type)	(event type)	(total number)	. "		
Revenue	1	Gross receipts	322,824.			322,824.		
	2	Less: Contributions	50,523.			50,523.		
	3	Gross income (line 1 minus line 2)	272,301.			272,301.		
	4	Cash prizes						
	5	Noncash prizes						
Direct Expenses	6	Rent/facility costs	23,341.			23,341.		
rect Ex	7	Food and beverages	12,250.			12,250.		
⊡	١.							
	8	Entertainment				95,974.		
	9	Other direct expenses				131,565.		
		Direct expense summary. Add lines 4 throug	. ,			140,736.		
11 Net income summary. Subtract line 10 from line 3, column (d)   Part III   Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than								
		\$15,000 on Form 990-EZ, line 6a.	answered res offrom	1990, 1 art IV, line 19, 01	eported more than			
		ψ10,000 011 0111 000 LE, iiilo 0α.		(b) Pull tabs/instant		(d) Total gaming (add		
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))		
eve.								
ď	1	Gross revenue						
ses	2	Cash prizes						
Exper	3	Noncash prizes						
Direct Expenses	4	Rent/facility costs						
	_	Other disease and assessment						
	15	Other direct expenses	V 0/	V 0/	V 0/			
	_	Nali vista av Jahav	Yes %	Yes %	Yes %			
	ľ	Volunteer labor	∟ No	│	No			
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)					
	8	Net gaming income summary. Subtract line 7	7 from line 1, column (d)					
		ter the state(s) in which the organization cond						
		the organization licensed to conduct gaming a				L Yes L No		
b	lf "	No," explain:						
	_							
	_							
		ere any of the organization's gaming licenses r			year?	Yes No		
b	lf "	Yes," explain:						

Sch	ledule G (Form 990) 2022 ENVIRONMENTAL DEFENSE CENTER //-	1001	994	Page 3
11	Does the organization conduct gaming activities with nonmembers?		Yes	☐ No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?		Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:			
	The organization's facility	13a		%
	An outside facility	13b		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		1	,,
•	The file half and address of the person who propares the organization of garming openial events been and records.			
	Name			
	Address			
	Address			
45.	Does the examination have a contract with a third party from whom the examination receives gaming revenue?		Yes	□ No
158	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	–	163	NO
	TO THE REAL PROPERTY OF THE PR			
Ľ	o If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount			
	of gaming revenue retained by the third party \$			
C	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	· · · · · · · · · · · · · · · · · · ·			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
17	Mandatory distributions:			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
•			Yes	□ No
	retain the state gaming license?	—	163	INO
I.	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
Da	organization's own exempt activities during the tax year \$	.4.111.15		05 405
L a	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	at III, li	nes 9,	an, inp,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
		-		

Schedule G	G (Form 990)	ENVIRONMENTAL	DEFENSE	CENTER	77-0061994 <sub>Pag</sub>	e <b>4</b>
Part IV	G (Form 990)  Supplemental Info	rmation (continued)				

#### SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

2022

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

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

ENVIRONMENTAL DEFENSE CENTER

Employer identification number 77-0061994

Pa	art I Questions Regarding Compensation					
			Yes	No		
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,					
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.					
	First-class or charter travel Housing allowance or residence for personal use					
	Travel for companions Payments for business use of personal residence					
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees					
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)					
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or					
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b				
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,					
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2				
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's					
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to					
	establish compensation of the CEO/Executive Director, but explain in Part III.					
	Compensation committee Written employment contract					
	Independent compensation consultant  X Compensation survey or study					
	Form 990 of other organizations  Approval by the board or compensation committee					
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing					
	organization or a related organization:					
a	Receive a severance payment or change-of-control payment?	4a		X		
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X		
С	Participate in or receive payment from an equity-based compensation arrangement?	4c				
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.					
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation					
J	contingent on the revenues of:					
9		5a		х		
h	The organization? Any related organization?	5b		X		
J	If "Yes" on line 5a or 5b, describe in Part III.					
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation					
U	contingent on the net earnings of:					
9		6a		х		
a h	The organization? Any related organization?	6b		X		
D	Any related organization?  If "Yes" on line 6a or 6b, describe in Part III.	JD				
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments					
•	not described on lines 5 and 6? If "Yes," describe in Part III	7		х		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the					
•	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		х		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in					
•	Regulations section 53.4958-6(c)?	9				

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

Schedule J (Form 990) 2022

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

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

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

	(B) Breakdown of W	J-2 and/or 1099-MIS compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) LINDA KROP	(i)	142,965.	0.	0.	5,353.	19,897.	168,215.	0.
CHIEF COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(ii)							
	(i)							
	(ii)							
	(i) (ii)							
	(i) (ii)							
	(i)							
	(ii)							
	[(II)							

Part III   Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.
PART I, LINE 3:
THE BOARD REVIEWS THE EXECUTIVE DIRECTOR AND CHIEF COUNSEL COMPENSATION
ANNUALLY. THE COMPENSATION IS REVIEWED FOR REASONABLENESS BY COMPARISON
USING SALARY SURVEYS.

#### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

Name of the organization ENVIRONMENTAL DEFENSE CENTER Employer identification number 77-0061994

Pai	rt I Types of Property							
		(a) Check if applicable	(b) Number of contributions or	(c) Noncash contribution amounts reported on	(d) Method of de noncash contribu		•	· Q
		арріючью	items contributed	Form 990, Part VIII, line 1g	Tioriodori cortilide	itioii ai	mount	
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	X	5	75,691.	MARKET VALU	E		
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts Other ( AUCTION ITEMS )	X	201	93 163	FAIR MARKET	772	TILE	
25 26	` ———— ′	- 71	201	J3,103 <b>.</b>	TAIR PARKET	V Z 1	поп	
27	Other () Other ()							
28	Other (							
29	Number of Forms 8283 received by the organiz	zation durin	I o the tax vear for c	contributions				
	for which the organization completed Form 828		,					
				,			Yes	No
30a	During the year, did the organization receive by	/ contribution	on any property rep	oorted in Part I, lines 1 throu	gh 28, that it			
	must hold for at least 3 years from the date of t							
	exempt purposes for the entire holding period?		•	•		30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p	oolicy that re	equires the review	of any nonstandard contribu	ıtions?	31	Х	
32a	Does the organization hire or use third parties of							
	contributions?					32a		Х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in co	olumn (c) fo	r a type of propert	y for which column (a) is che	cked,			
	describe in Part II.							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

Schedule M	(Form 990) 2022	ENVIRONMENTAL DEFENSE	CENTER	77-0061994	Page 2
Part II	Supplemental is reporting in Part this part for any ac	Information. Provide the information req t I, column (b), the number of contributions, the dditional information.	quired by Part I, lines 30b, 32b, and 33, ne number of items received, or a comb	and whether the organizat	tion olete

#### SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization

ENVIRONMENTAL DEFENSE CENTER

Employer identification number 77-0061994

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

OUR PROGRAM AREAS INCLUDE CLIMATE AND ENERGY, OPEN SPACE AND WILDLIFE,

CLEAN WATER AND SANTA BARBARA CHANNEL. WE PRIMARILY WORK WITHIN SANTA

BARBARA, VENTURA AND SAN LUIS OBISPO COUNTIES. EDC IS ORGANIZED AS A

SEC. 501(C)(3) NONPROFIT CORPORATION, AND PROVIDES LEGAL COUNSEL TO

OTHER NONPROFIT ORGANIZATIONS. WE REMAIN THE ONLY SUCH PUBLIC INTEREST

ENVIRONMENTAL LAW FIRM BETWEEN LOS ANGELES AND SAN FRANCISCO, AND

THRIVE ON THE SUPPORT OF COMMUNITY MEMBERS FROM WITHIN OUR REGION AND

BEYOND.

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

UPDATED CHANNEL ISLANDS NATIONAL MARINE SANCTUARY MANAGEMENT PLAN;

SUPPORTED DESIGNATION OF THE PROPOSED CHUMASH HERITAGE NATIONAL MARINE

SANCTUARY; SOUGHT THOROUGH ENVIRONMENTAL REVIEW OF OFFSHORE WIND

LEASING; COMMENTED ON MPA DECADAL MANAGEMENT REVIEW; COMMENTED ON THE

CALIFORNIA ENERGY COMMISSION'S PERMITTING ROADMAP FOR OFFSHORE WIND

PROJECTS.

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

CARNEROS CREEK AND ENVIRONMENTALLY SENSITIVE HABITATS; CONTINUED

EFFORTS TO PRESERVE NAPLES AND MORE MESA; CONVINCED SANTA BARBARA

COUNTY LAFCO TO DENY PRE-ANNEXATION PROPOSAL THREATENING PRIME FARMLAND

WEST OF LOMPOC; CONTINUED LITIGATION IN SUPERIOR COURT TO DEFEND THE

COUNTY OF SANTA BARBARA'S DENIAL OF THE RANCHO LA LAGUNA SUBDIVISION;

LED CREEK SURVEYS AND CLEANUPS; WORKED TO SECURE RESTORATION FROM

ILLEGAL DISKING ON THE GAVIOTA COAST.

Page 2

#### ENVIRONMENTAL DEFENSE CENTER

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: CLEAN WATER (POLLUTED DISCHARGES, STORMWATER RUNOFF, SAFE DRINKING WATER): REACHED SETTLEMENT REQUIRING CITY OF LOMPOC TO AVOID TOXIC DISCHARGES IN THE SANTA MARIA RIVER SYSTEM; PREVENTED FRACKING FROM OFFSHORE PLATFORMS; OPPOSED PROPOSED AQUIFER EXEMPTION THAT THREATENS DRINKING WATER FOR 150,000 RESIDENTS OF NORTHERN SANTA BARBARA COUNTY. EXPENSES \$ 188,298. INCLUDING GRANTS OF \$ 0. REVENUE \$ 28,153.

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

ONCE THERE IS A FINAL DRAFT SENT FOR REVIEW TO EDC, THE ACCOUNTING MANAGER (AM), EXECUTIVE DIRECTOR (ED) AND TREASURER ALL REVIEW IT. A DRAFT IS THEN CIRCULATED TO THE FINANCE COMMITTEE. THE EXECUTIVE DIRECTOR PROVIDES FINAL COPY OF THE FORM 990 TO BOARD MEMBERS BEFORE FILING WITH IRS AND SIGNS THE 990.

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

EDC HAS WEEKLY STAFF MEETINGS ATTENDED BY ALL EMPLOYEES. WE DISCUSS ANY AND ALL NEW CASES, CASE ACTIVITY, AND ISSUES OF POTENTIAL CONCERN. ANY POTENTIAL CONFLICTS ARE RAISED AND DISCUSSED IN THESE MEETINGS.

THE BOARD ALSO MONITORS DIRECTORS' COMPLIANCE TO THE CORPORATION'S CONFLICT OF INTEREST POLICY, ANNUALLY EVALUATING DIRECTORS' DISCLOSURES OF POTENTIAL CONFLICTS.

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

ANNUALLY, THE EXECUTIVE COMMITTEE, WITH INPUT FROM THE BOARD, REVIEWS THE EXECUTIVE DIRECTOR (ED)AND CHIEF COUNSEL'S (CC) PERFORMANCE. BASED UPON THE 232212 10-28-22