Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service , 2023, and ending For the 2023 calendar year, or tax year beginning . 20 Check if applicable: D Employer identification number Address change OCCIDENTAL ARTS AND ECOLOGY CENTER 68-0359676 15290 COLEMAN VALLEY ROAD Telephone number Name change OCCIDENTAL, CA 95465 Initial return (707) 874-1557 Final return/terminated **G** Gross receipts \$ Amended return 5,955, F Name and address of principal officer: DAVE HENSON H(a) Is this a group return for subordinates? Application pending Yes **H(b)** Are all subordinates included? If "No," attach a list. See instructions. No SAME AS C ABOVE Yes Tax-exempt status: X 501(c)(3) 4947(a)(1) or 527 501(c) ((insert no.) Website: WWW.OAEC.ORG H(c) Group exemption number 1995 M State of legal domicile: CA Form of organization: X Corporation Association L Year of formation: Part I Summary Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O Activities & Governance if the organization discontinued its operations or disposed of more than 25% of its net assets. Check this box Number of voting members of the governing body (Part VI, line 1a) 3 Number of independent voting members of the governing body (Part VI, line 1b)..... 5 5 66 Total number of volunteers (estimate if necessary)..... 6 85 Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, Part I, line 11..... 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h)..... 4,538,560 4,554,716. Program service revenue (Part VIII, line 2g)..... 1,553,147 1,391,263. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)..... 9,417. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)..... 11 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)..... 5,955,396. 12 6,091,707 Grants and similar amounts paid (Part IX, column (A), lines 1-3)..... Benefits paid to or for members (Part IX, column (A), line 4)..... 14 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 2,460,199 3,159,557 Professional fundraising fees (Part IX, column (A), line 11e)..... Total fundraising expenses (Part IX, column (D), line 25) Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)..... 17 1,810,787. 1,763,170. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)... 4,223,369 4,970,344. Revenue less expenses. Subtract line 18 from line 12..... 985,052. 1,868,338. **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16)..... 9,587,027. 8,610,557. 21 746,078. 738,083. Net assets or fund balances. Subtract line 21 from line 20...... 22 7,864,479. 8,848,944. Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign Here DAVE HENSON EXECUTIVE DIR. Type or print name and title Print/Type preparer's name Preparer's signature BLAKE GUNTER P02457939 **Paid** self-employed Preparer Firm's name GORANSON TAX AND CONSULTING INC Use Only Firm's address 717 COLLEGE AVE FIRST FLOOR Firm's EIN 873976308 7075421256 SANTA ROSA, CA 95404 May the IRS discuss this return with the preparer shown above? See instructions . . No Yes

	990 (2023) OCCIDENTAL ARTS AND E		68-0	359676 Page 2
Par	<i>3</i>			
	Check if Schedule O contains a response	or note to any line in this Part	III	X
1	Briefly describe the organization's mission:			
	SEE SCHEDULE O			
	Did the organization undertake any significant progr	am convices during the year which	were not listed on the prior	
2			were not listed on the prior	. Yes X No
	If "Yes," describe these new services on Schedule C			Yes X No
3	Did the organization cease conducting, or make		anducts any program services?	Yes X No
3	If "Yes," describe these changes on Schedule O.	significant changes in now it co	middets, any program services	· I les 🔼 No
4	Describe the organization's program service acc	omplishments for each of its thr	ree largest program services, as n	neasured by expenses
	Section 501(c)(3) and 501(c)(4) organizations ar	re required to report the amount	of grants and allocations to other	s, the total expenses,
	and revenue, if any, for each program service re	eported.		
	(Code:) (Expenses \$ 4,116,	245 including grants of ¢) (Dayanua	¢ 1 007 100 \
4 a		.345. Including grants of \$) (Revenue	۶ <u> </u>
	SEE SCHEDULE O			
4b	(Code:) (Expenses \$	including grants of \$) (Revenue	\$)
	(Oada) (Farance)	in a buellin as assessed a de C) (D	<u> </u>
4c	(Code:) (Expenses \$	Including grants of \$_) (Revenue	۶)
	Other program services (Describe on Schedule (
	(Expenses \$ includir Total program service expenses 4	ng grants of \$) (Revenue \$)
4e	Total program service expenses	1 116 345		

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	Χ	
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	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 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.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	11a	Х	
t	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
C	: Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		Х
C	I 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
e	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 the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Х	
Ł	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Χ
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Χ
Ŀ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions.	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		X
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
t	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

Par	rt IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	: Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		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).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	: A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes,"	20		v
29	complete Schedule L, Part IV			X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes." <i>complete Schedule M</i> .	1 -		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>			X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	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 and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	rt V Statements Regarding Other IRS Filings and Tax Compliance	*		
	Check if Schedule O contains a response or note to any line in this Part V		1	
_	Enter the number reported in her 2 of Forms 1000. Enter 0 15 and applicable		Yes	No
	n Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	97		
	: Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	0		
С	(gambling) winnings to prize winners?	1с	Х	

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Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V No Yes 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return..... 66 X **b** If at least one is reported on line 2a, did the organization file all required federal employment tax returns?..... 2b Χ 3a Did the organization have unrelated business gross income of \$1,000 or more during the year?..... 3a 3b 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Χ financial account in a foreign country (such as a bank account, securities account, or other financial account)? **b** If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). X 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a X **b** Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?... 5h c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization Χ solicit any contributions that were not tax deductible as charitable contributions?..... 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?.... 6b 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and Χ services provided to the payor?..... 7a **b** If "Yes," did the organization notify the donor of the value of the goods or services provided?..... 7b c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Χ 7c Form 8282? X e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?..... 7e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?...... 7f g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a 7h Form 1098-C?..... Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring 8 organization have excess business holdings at any time during the year?..... 9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966?..... 9a **b** Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?..... 9b 10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12..... **b** Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities..... 11 Section 501(c)(12) organizations. Enter: **a** Gross income from members or shareholders..... **b** Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)..... 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?..... 12a **b** If "Yes," enter the amount of tax-exempt interest received or accrued during the year..... **12b** 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. **b** Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans..... c Enter the amount of reserves on hand X 14a Did the organization receive any payments for indoor tanning services during the tax year?..... 14a **b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O... 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or 15 Χ excess parachute payment(s) during the year?..... If "Yes," see the instructions and file Form 4720, Schedule N. Χ 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?...... If "Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would 17 result in the imposition of an excise tax under section 4951, 4952, or 4953? If "Yes," complete Form 6069.

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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. Section A. Governing Body and Management No Yes 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..... 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? ... SEE SCHEDULE 0 Χ 2 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?...SEE .SCH .O. 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?..... 5 5 Χ Did the organization have members or stockholders?..... 6 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 Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... X 8a X **b** Each committee with authority to act on behalf of the governing body?..... 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O..... 9 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10a Did the organization have local chapters, branches, or affiliates?..... 10a Χ b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. Χ 12a Did the organization have a written conflict of interest policy? If "No," go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... **c** Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done*SEE .SCHEDULE . O Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 14 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? X a The organization's CEO, Executive Director, or top management official... SEE . SCHEDULE..Q...... 15a **b** Other officers or key employees of the organization..... 15b X If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?.... 16a X **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 16b organization's exempt status with respect to such arrangements?.. Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed 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) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Own website Another's website Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records. SUNNY HILL 15290 COLEMAN VALLEY ROAD OCCIDENTAL CA 95465 (707)

Form 990 (2023) OCCIDENTAL ARTS AND ECOLOGY CENTER

68-0359676

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Form 990 (2023)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

BAA

Check this box if neither the organization nor any relat	ed organiz	ation	con	npen	sate	d any	y cu	rrent officer, direct	or, or trustee.	
(A) Name and title	Average hours per week (list any hours for related organizations below dotted line)	box,	unles	Pos neck ss pe			an ee)	(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) DAVE HENSON EXECUTIVE DIR.	<u> 52</u> 0	-		Х				130,810.	0.	0.
(2) MEGAN PONDER CO-DIR PEAK PLASTI	<u>40</u> 0	-				Х		116,333.	0.	0.
(3) STEPHEN WILSON CO-DIR PEAK PLASTI	<u> 40</u> _					Х		116,333.	0.	0.
(4) SUNNY HILL FINANCE DIRECTO	<u>50</u>			Х				94,635.	0.	0.
(5) MELISSA K NELSON PRESIDENT	0.5	Х						0.	0.	0.
(6) SUSAN MCGOVERN SECRETARY	0.5	Х						0.	0.	0.
(7) LORI MADDOX TREASURER	0.5	Х						0.	0.	0.
(8) GOPAL DAYANENI DIRECTOR	0.5	Х						0.	0.	0.
(9) JANELLE ORSI DIRECTOR	0.5 0	Х						0.	0.	0.
(10)										
<u>(11)</u>		-								
(12)										
<u>(13)</u>										
<u>(14)</u>										

TEEA0107L 08/23/23

Fart VII Section A. Officers, Directors, 17		l		•	C)	c3, c	1110	Triigiicat con	ipensatea Emp	Oyces	(contin	iucu)
(A) Name and title	(B) Average hours per week (list any hours for	Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-NEC)	(F) Estimated amount of other compensation from the organization and related		from ion I				
	related organiza- tions below dotted line)	dual trustee ector	Institutional trustee	er	Key employee	Highest compensated employee	er			orga	inization	S
<u>(15)</u>												
<u>(16)</u>		-										
(17)		-										
(18)		-										
<u>(19)</u>												
(20)												
(21)												
(22)												
(23)		-										
(24)		-										
(25)												
1b Subtotal								458,111.	0.			0.
c Total from continuation sheets to Part VII, Sect							-	0.	0.			0.
d Total (add lines 1b and 1c). 2 Total number of individuals (including but not limited								458,111. more than \$100,00	0.0 of reportable comp	ensatior	1	0.
from the organization 3											Yes	No
3 Did the organization list any former officer, direction line 1a? If "Yes,"complete Schedule J for suc	ctor, truste	ee, ke	ey er	mplo	oyee	, or h	nigh	nest compensated	employee	3	163	X
For any individual listed on line 1a, is the sum of the organization and related organizations great												
such individual5 Did any person listed on line 1a receive or accrufor services rendered to the organization? If "Yes"										4		X
for services rendered to the organization? If "Ye Section B. Independent Contractors	s," comple	ete S	che	dule	J to	or suc	ch p	person		. 5		Χ
Complete this table for your five highest comper compensation from the organization. Report compensation from the organization.	nsated indensation for	epend the ca	dent alen	cor	ntrad year	ctors endin	that	t received more th	nan \$100,000 of ganization's tax year			
(A) Name and business add	lress							(B) Description (of services	(C Compe) nsatio	n
2 Total number of independent contractors (including	but not lim	ited to	o the	se I	isted	l abov	/e) v	who received more	than			
\$100,000 of compensation from the organization												

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII..... (B) Related or (A) Total revenue (D) Unrelated Revenue exempt excluded from tax business under sections 512-514 function revenue revenue ts, Grants, Amounts 1a Federated campaigns **b** Membership dues..... 1b c Fundraising events..... 1с Gifts, d Related organizations 1d e Government grants (contributions) 734,354 Contributions, and Other Sin All other contributions, gifts, grants, and similar amounts not included above . . . 1f 3,820,362 Noncash contributions included in 1g lines 1a-1f. h Total. Add lines 1a-1f 4,554,716 Business Code Program Service Revenue 2a FEE FOR SERVICE 1,207,166. 207,166 PROGRAM SALES 131,871 131,871 MISCELLANEOUS INCOME 52,226 52,226 All other program service revenue. . . g Total. Add lines 2a-2f 1,391,263 Investment income (including dividends, interest, and <u>9,</u>417 9,417. Income from investment of tax-exempt bond proceeds (i) Real (ii) Personal 6a Gross rents 6a **b** Less: rental expenses 6b c Rental income or (loss) 6c d Net rental income or (loss) (i) Securities (ii) Other **7a** Gross amount from sales of assets other than inventory Less: cost or other basis 7a 7b and sales expenses c Gain or (loss). 7с **d** Net gain or (loss)..... 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c). 8a 8b **b** Less: direct expenses..... 9a Gross income from gaming activities. See Part IV, line 19...... 9a **b** Less: direct expenses..... 9b c Net income or (loss) from gaming activities..... **10a** Gross sales of inventory, less..... returns and allowances. 0a 10b **b** Less: cost of goods sold.... c Net income or (loss) from sales of inventory..... **Business Code** Miscellaneous Revenue All other revenue. Total. Add lines 11a-11d. Total revenue. See instructions..... 12 955, 396 391 0 417 263

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joint costs from a combined educational campaign and fundraising solicitation. if following

SOP 98-2 (ASC 958-720).....

Check here

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX. (C) (D) Do not include amounts reported on lines Total expenses Program service Management and Fundráising 6b, 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21..... Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Compensation of current officers, directors, trustees, and key employees 225,445. 123,995 76,651 24,799. Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)....... 0 0 0 0 2,587,154 2,205,541 176,724 204,889. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 128,123 114,001 14,122 218,835 195,527 23,308 Fees for services (nonemployees): c Accounting..... **d** Lobbying..... e Professional fundraising services. See Part IV, line 17... Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule OSCH. 756,323. 639,362. 27,482 89,479. Advertising and promotion..... Information technology..... 14 15 Royalties..... 17 Payments of travel or entertainment expenses for any federal, state, or local public officials..... Conferences, conventions, and meetings.... 19 5,718. 5,718 21 Payments to affiliates..... Depreciation, depletion, and amortization.... 286,579. 217,800. 42,987. 25,792. 23 8,524 28,340. 1,940. 38,804 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)..... 499. 185,319 183,136 1,684 FOOD FOR WORKSHOPS AND EVENTS b 161,436 157,382 3,898 156. SUPPLIES AND EQUIPMENT 114,431 113,170 469 792. TRAVEL AND CONFERENCES 42.794 12,452 2,880. DUES, SUBSCRIPTIONS, SOCIAL ME 27.462 219,383 130,445. 85,643 3,295. e All other expenses..... 25 Total functional expenses. Add lines 1 through 24e. . . . 4,970,344. 4,116,345 499,478 354,521. Joint costs. Complete this line only if the organization reported in column (B)

Form 990 (2023) OCCIDENTAL ARTS AND ECOLOGY CENTER

68-0359676

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		Delance Cheet	CENT	ĽK	68-	03596	o/6 Page II
rai	rt X	Balance Sheet Check if Schedule O contains a response or note t	o any lin	o in this Bort V			
		Check it Schedule O contains a response or note t	o arry iiri	e III (IIIS Part A	(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing			1,785,904.	1	1,396,184.
	2	Savings and temporary cash investments			733,532.	2	1,545,667.
	3	Pledges and grants receivable, net			,	3	, ,
	4	Accounts receivable, net			910,891.	4	1,444,603
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantia controlled entity or family member of any of these pe	r, director, utor, or 35%		5		
	6	Loans and other receivables from other disqualified p	,	·			
		section 4958(f)(1)), and persons described in section	4958(c)	(3)(B)		6	
	7	Notes and loans receivable, net	300,000.	7	300,000.		
ន្ទ	8	Inventories for sale or use			•	8	
Assets	9	Prepaid expenses and deferred charges			850.	9	1,200.
T.	1 0 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	6,694,497.			
		Less: accumulated depreciation		1,982,957.	4,726,923.	10c	4,711,540.
	11	Investments – publicly traded securities			4,720,723.	11	49,095.
	12	Investments – other securities. See Part IV, line 11.		<u> </u>		12	47,073.
	13	Investments – program-related. See Part IV, line 11			13		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11.	152,457.	15	138,738		
	16	Total assets. Add lines 1 through 15 (must equal line	8,610,557.	16	9,587,027		
	17	Accounts payable and accrued expenses			198,763.	17	185,973
	18	Grants payable				18	
	19	Deferred revenue			94,492.	19	112,468
	20	Tax-exempt bond liabilities				20	
2	21	Escrow or custodial account liability. Complete Part		L.		21	
Labilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contrib controlled entity or family member of any of these pe	utor, or 3	35%		22	
	23	Secured mortgages and notes payable to unrelated the	hird parti	es	300,000.	23	300,000
	24	Unsecured notes and loans payable to unrelated third	d parties			24	,
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	es to rela	ated third parties, art X of Schedule D.	152,823.	25	139,642
	26	Total liabilities. Add lines 17 through 25			746,078.	26	738,083
Net Pesets of Fully Dalatices		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.		X			
Ē	27	Net assets without donor restrictions			5,217,033.	27	5,717,305.
ă	28	Net assets with donor restrictions	2,647,446.	28	3,131,639.		
2		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	eck here				
5	29	Capital stock or trust principal, or current funds				29	
2	30	Paid-in or capital surplus, or land, building, or equipr	nent fund	t		30	
D CO	31	Retained earnings, endowment, accumulated income	, or othe	r funds		31	
it A	32	Total net assets or fund balances			7,864,479.	32	8,848,944.
2	33	Total liabilities and net assets/fund balances			8,610,557.	33	9,587,027.
ВАА			TEEA0111	L 08/23/23			Form 990 (2023)

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Pai	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI.				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,9	55,3	396.
2	Total expenses (must equal Part IX, column (A), line 25).	2			344.
3	Revenue less expenses. Subtract line 2 from line 1	3	9	85,0)52.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	7,8	64,4	179.
5	Net unrealized gains (losses) on investments.	5		-5	587.
6	Donated services and use of facilities	6			
7		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,				
D		0	8,8	48,9	944.
Pai	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule 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 separate basis, consolidated basis, or both. Separate basis Consolidated basis Both consolidated and separate basis	on a			
b	• Were the organization's financial statements audited by an independent accountant?		2b	Χ	l
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both. X Separate basis Both consolidated and separate basis	e			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
•	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	a if a waa			
	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Un Guidance, 2 C.F.R. Part 200, Subpart F?		За		X
b	o If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
ΒΔΔ	TEEA0112L 08/23/23	<u> </u>	Form	990	(2023)

SCHEDULE A (Form 990)

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.

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

OMB No. 1545-0047

2023

Open to Public Inspection

lame o	ame of the organization Employer identification number									
OCC:	ID:	ENTAL ARTS AND ECOI	LOGY CENTER				(68-035967	6	
Part		Reason for Public Cha						See instruc	tions.	
The o	rga	nization is not a private found	•			•	,			
1		A church, convention of church	,			b)(1)(A)((i).			
2		A school described in sectio	n 170(b)(1)(A)(ii). (Att	ach Schedule E (Form	990).)					
3		A hospital or a cooperative h	ospital service organ	ization described in sec	ction 17)(b)(1)(A	A)(iii).			
4		A medical research organiza	tion operated in conju	unction with a hospital of	describe	d in sec	ction 170	(b)(1)(A)(iii) . E	nter the hospita	al's
		name, city, and state:								
5		An organization operated for section 170(b)(1)(A)(iv). (Co	the benefit of a colle	ege or university owned	or oper	ated by	a govern	mental unit de	escribed in	
6		A federal, state, or local gov	ernment or governme	ental unit described in s	ection 1	70(b)(1))(A)(v).			
7	Χ	An organization that normally r in section 170(b)(1)(A)(vi).	eceives a substantial p Complete Part II.)	part of its support from a	governm	ental un	it or from	the general pul	olic described	
8		A community trust described	in section 170(b)(1)(A)(vi). (Complete Part I	l.)					
9		An agricultural research organi				•		-	-	
		or university or a non-land-gramuniversity:	nt college of agriculture	e (see instructions). Enter	the nan	ne, city,	and state	of the college o	or 	
10		An organization that normally from activities related to its investment income and unre June 30, 1975. See section!	lated business taxabl	e income (less section	oort from ns; and 511 tax)	contrib (2) no r from b	outions, n more than usinesse:	nembership fe n 33-1/3% of it s acquired by	es, and gross r s support from the organizatio	eceipts gross n after
11		An organization organized ar		•	ety. See	section	1 509(a)(4	l).		
12		An organization organized ar or more publicly supported o	rganizations describe	ed in section 509(a)(1) c	r sectio	n 509(a)(2). See	section 509(a	ut the purposes)(3). Check the	of one box on
а		lines 12a through 12d that de Type I. A supporting organization organization(s) the power to re complete Part IV, Sections A	on operated, supervise gularly appoint or elect	d, or controlled by its sup	ported o	rganizat	ion(s), typ	ically by giving	the supported on. You must	
b		Type II. A supporting organiz management of the supporting must complete Part IV, Section 11.	ation supervised or or organization vested in	controlled in connection the same persons that or	with its ontrol or	support manage	ted organ the supp	ization(s), by orted organizat	having control ion(s). You	or
С		Type III functionally integrated organization(s) (see instructi	. A supporting organizations). You must com	tion operated in connection plete Part IV, Sections	n with, an	nd function d E.	onally inte	grated with, its	supported	
d		Type III non-functionally integ functionally integrated. The c instructions). You must com	organization generally	must satisfy a distribu	nnection tion req	with its s uiremen	supported it and an	organization(s) attentiveness	that is not requirement (s	ee
е		Check this box if the organiz	ation received a writt	en determination from t	the IRS	that it is	з а Туре	I, Type II, Typ	e III functionall	y
f	Fr	integrated, or Type III non-fu ter the number of supported								
a a		ovide the following information	-							
_		me of supported organization		(iii) Type of organization (described on lines 1-10	(iv)	s the		ount of monetary	(vi) Amount o	
				above (see instructions))	organizat in your g docur	overning	Support	(see instructions)	support (see ins	tructions)
					Yes	No				
A)										
B)										
C)										
D)										
D)										
E)										
otal										

Schedule A (Form 990) 2023

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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						
begi	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,915,630.	1,907,416.	2,308,215.	4,538,560.	4,554,716.	15,224,537.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	1,915,630.	1,907,416.	2,308,215.	4,538,560.	4,554,716.	15,224,537.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,026,687.
6	Public support. Subtract line 5 from line 4						14,197,850.
Sec	tion B. Total Support						,
	ndar year (or fiscal year nning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	1,915,630.	1,907,416.	2,308,215.	4,538,560.	4,554,716.	15,224,537.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1,002.	870.	2,987.		9,417.	14,276.
9	Net income from unrelated business activities, whether or not the business is regularly carried on	,		,		,	0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11	Total support. Add lines 7 through 10						15,238,813.
12	Gross receipts from related activ	rities, etc. (see ins	structions)			12	0.
13	First 5 years. If the Form 990 is organization, check this box and	for the organization	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)	
Sec	tion C. Computation of Pu	blic Support P	ercentage				
	Public support percentage for 20						93.17 %
15	Public support percentage from	2022 Schedule A,	Part II, line 14			15	76.75 %
16a	33-1/3% support test—2023. If t and stop here. The organization						
b	33-1/3% support test—2022. If the and stop here. The organization	ne organization did qualifies as a pu	d not check a box blicly supported c	on line 13 or 16a organization	a, and line 15 is 3	3-1/3% or more, o	check this box
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	test, check this I	pox and stop here	e. Explain in Part	VI how
b	10%-facts-and-circumstances te or more, and if the organization organization meets the facts-and	meets the facts-a	nd-circumstances	test, check this I	box and stop here	Explain in Part	VI how the
18	Private foundation. If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see ins	structions

Schedule A (Form 990) 2023

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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.)

	ians to quanty under the te	isted below,	picase complete i	art III.)				
Sec	tion A. Public Support		T		T	T	1	
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 202	3	(f) Total
1	Gifts, grants, contributions, and membership fees							
	and membership fees received. (Do not include							
2	any "unusual grants.")							
2	merchandise sold or services							
	performed, or facilities							
	furnished in any activity that is related to the organization's							
	tax-exempt purpose							
3	Gross receipts from activities							
	that are not an unrelated trade							
	or business under section 513. Tax revenues levied for the							
4	organization's benefit and							
	either paid to or expended on							
5	its behalf The value of services or							
5	facilities furnished by a							
	governmental unit to the							
_	organization without charge							
	Total. Add lines 1 through 5							
/a	Amounts included on lines 1, 2, and 3 received from							
	disqualified persons							
b	Amounts included on lines 2							
	and 3 received from other than disqualified persons that							
	exceed the greater of \$5,000 or							
	1% of the amount on line 13							
	for the year.							
_	Add lines 7a and 7b.							
8	Public support. (Subtract line 7c from line 6.)							
Sec	tion B. Total Support				•			
	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 202	3	(f) Total
	Amounts from line 6	(-, -	(1)	(-)	()	(-)		()
	Gross income from interest, dividends,							
	payments received on securities loans,							
	rents, royalties, and income from similar sources							
b	Unrelated business taxable							
	income (less section 511							
	taxes) from businesses acquired after June 30, 1975							
c	Add lines 10a and 10b							
	Net income from unrelated business				1			
	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.)							
13	Total support. (Add lines 9,							
	10c, 11, and 12.)							
14	First 5 years. If the Form 990 is organization, check this box and	for the organization	on's first, second,	third, fourth, or	fifth tax year as a	section 501	(c)(3)	
Sec	tion C. Computation of Pul							· · · · · · · · · · · · · · · · · · ·
	Public support percentage for 20			ne 13 column (f))		15	%
	Public support percentage from 2	•	•		•		16	<u> </u>
	tion D. Computation of Inv						. •	
	Investment income percentage for				lumn (f))		17	%
	Investment income percentage fi	•		-			18	%
	33-1/3% support tests—2023. If t					· ·		
. Ju	is not more than 33-1/3%, check	this box and sto	p here. The organ	ization qualifies	as a publicly supp	orted organ	ization	
	13 Hot more than 33 17370, check	tine box and to	L					
	33-1/3% support tests-2022. If t	he organization d	lid not check a bo	x on line 14 or lii	ne 19a, and line 1	6 is more th	an 33-1	/3%, and
b		the organization do, check this box	lid not check a bo and stop here. Th	x on line 14 or li e organization qu	ne 19a, and line 1 ualifies as a publi	6 is more th	d organiz	/3%, and zation

Part IV Supporting Organizations

Schedule A (Form 990) 2023

(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

			Yes	No
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.	1		
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).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
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.	3b		
С	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.	3c		
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.	4 a		
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.	4b		
С	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.	4c		
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).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
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? <i>If "Yes," provide detail in Part VI.</i>	6		
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).	7		
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).	8		
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.	9a		
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? <i>If "Yes," provide detail in Part VI.</i>	9b		
С	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 .	9с		
0a	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.	10a		
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.)	10b		

- **a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported** organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- **b** Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in **Part VI.**
- b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2a 2b За 3b

Schedule A (Form 990) 2023 OCCIDENTAL ARTS AND ECOLOGY CENTER

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

68-0359676

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Pa	rt v Type iii Noil-Functionally integrated 505(a)(5) Supporting Orga	IIIIZat	10115	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	t on No	ov. 20, 1970 (explain ir st complete Sections A	n Part VI). See through E.
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
á	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
(Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
•	e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions).	grated	Type III supporting or	ganization

BAA Schedule A (Form 990) 2023 Schedule A (Form 990) 2023

OCCIDENTAL ARTS AND ECOLOGY CENTER

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Pa	₹ V Type III Non-Functionally Integrated 509(a)(3) St	ipporting Organizat	t ions (continued)	
Sec	tion D — Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	rposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	of supported organizations	, 2	
3	Administrative expenses paid to accomplish exempt purposes of su	upported organizations	3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required - provide	e details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to which the organizati in Part VI). See instructions.	on is responsive (provide	details 8	
9	Distributable amount for 2023 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	
		/i\	(!:\	(!!!)

Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required — <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

BAA Schedule A (Form 990) 2023

Schedule A (Form 990) 2023

OCCIDENTAL ARTS AND ECOLOGY CENTER

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Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section 4, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

OCCIDENTAL ARTS AND ECOLOGY CENTER

a contributor's total contributions.

Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

2023

Employer identification number

68-0359676

Department of the Treasury Internal Revenue Service

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

 Organization type (check one):

 Filers of:
 Section:

 Form 990 or 990-EZ
 X 501(c)(3) (enter number) organization

 4947(a)(1) nonexempt charitable trust not treated as a private foundation

 527 political organization

 Form 990-PF
 501(c)(3) exempt private foundation

 4947(a)(1) nonexempt charitable trust treated as a private foundation

 501(c)(3) taxable private foundation

 Check if your organization is covered by the General Rule or a Special Rule.

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

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

Special Rules

General Rule

X	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions totaling \$5,000 or more during the year.

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

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

Schedule B (Form 990) (2023)

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

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) o	organizations: Complete Part III.			
Name	of organization	,		Employer identific	ation number
000	CIDENTAL ARTS AND E	COLOGY CENTER		68-035967	
		rganization is exempt under section			zation.
1	Provide a description of the See instructions for definition	organization's direct and indirect political on of "political campaign activities."	campaign activities in	Part IV.	
2	Political campaign activity ex	xpenditures. See instructions		\$	
		campaign activities. See instructions			
Par	t I-B Complete if the o	rganization is exempt under section	on 501(c)(3).		
1		ise tax incurred by the organization under			
2	Enter the amount of any exc	sise tax incurred by organization managers	under section 4955.	\$	0.
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
Par	t I-C Complete if the o	rganization is exempt under section	on 501(c), excep	t section 501(c)(3).	,
1	Enter the amount directly ex	pended by the filing organization for section	on 527 exempt function	n activities\$	
2	Enter the amount of the filin 527 exempt function activities	g organization's funds contributed to other	organizations for sec	tion \$	
3	Total exempt function expen	ditures. Add lines 1 and 2. Enter here and	on Form 1120-POL,	\$	
4	Did the filing organization file	e Form 1120-POL for this year?			Yes No
5	Enter the names, addresses organization made payments amount of political contribution segregated fund or a political	, and employer identification number (EIN) s. For each organization listed, enter the all is received that were promptly and directly delal action committee (PAC). If additional span	of all section 527 po mount paid from the f livered to a separate po ace is needed, provide	litical organizations to villing organization's fun olitical organization, such a information in Part IV	which the filing ds. Also enter the as a separate
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990) 2023

Schedule **C** (Form 990) 2023

OCCIDENTAL ARTS AND ECOLOGY CENTER

68-0359676

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Part II-A Complete if section 501(the organization	on is exempt under se	ection 501(c)(3) and	d filed Form 5768 (ele	ction under
A Check if the filing	g organization belor	ngs to an affiliated group (and	d list in Part IV each affili	ated group member's name,	
address,	EIN, expenses, ar	nd share of excess lobbying	g expenditures).		
B Check if the filing	g organization chec	ked box A and "limited contro	ol" provisions apply.		
(The term	Limits on Lobb "expenditures" me	ying Expenditures ans amounts paid or incu	rred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditu	ires to influence p	ublic opinion (grassroots lo	bbying)		
b Total lobbying expenditu				10/20/	
c Total lobbying expenditu					0.
d Other exempt purpose e	•			1/002/107.	
e Total exempt purpose es	xpenditures (add I	ines 1c and 1d)		4,907,344.	0.
f Lobbying nontaxable am columns		mount from the following ta		395,367.	
If the amount on line 1e, colu	ımn (a) or (b) is:	The lobbying nontaxable	amount is:		
not over \$500,000,		20% of the amount on line 1e.			
over \$500,000 but not over \$1,0		\$100,000 plus 15% of the exces			
over \$1,000,000 but not over \$		\$175,000 plus 10% of the exces			
over \$1,500,000 but not over \$1,500,000	17,000,000,	\$225,000 plus 5% of the excess	over \$1,500,000.		
over \$17,000,000, g Grassroots nontaxable a	amount (antar 2E9/	\$1,000,000.		22.240	
h Subtract line 1g from lin				30,01=1	0.
ŭ		s, enter -0		0.	<u> </u>
j If there is an amount othe	r than zero on eithe	r line 1h or line 1i, did the or	ganization file Form 4720	reporting	
(Som		4-Year Averaging Period at made a section 501(h) e elow. See the separate ins	election do not have to		
	Lob	bying Expenditures During	g 4-Year Averaging Per	iod	
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount				395,367.	395,367.
b Lobbying ceiling amount (150% of line 2a, column (e))					E02 0E1
					593,051.
c Total lobbying expenditures				45,207.	45,207.
d Grassroots nontaxable amount				98,842.	98,842.
e Grassroots ceiling amount (150% of line 2d, column (e))					148,263.
f Grassroots lobbying expenditures					0.
ВАА				Schedule	e C (Form 990) 2023

Schedule C (Form 990) 2023

OCCIDENTAL ARTS AND ECOLOGY CENTER

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

Page 3

(election under section 501(h)).			
	(a	a)	(b)
For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Amount
 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: a Volunteers? 			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?c Media advertisements?			
d Mailings to members, legislators, or the public?e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

i Other activities? Total. Add lines 1c through 1i..... 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?...... **b** If "Yes," enter the amount of any tax incurred under section 4912..... c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 **d** If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?.....

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c) (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 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	
b	Carryover from last year.	2b	
С	Total	2c	
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 excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?	4	
5	Taxable amount of lobbying and political expenditures. See instructions	5	

Part IV | Supplemental Information

Provide 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 instructions); and Part II-B, line 1. Also, complete this part for any additional information.

BAA Schedule C (Form 990) 2023

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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
Employer identification number

OCC	IDENTAL ARTS AND ECOLOGY CENT	ΓER		68-035	9676	
Pai	t I Organizations Maintaining Do	onor Advised Funds or Othe	er Similar Fund	ds or Accounts		
	Complete if the organization a	inswered "Yes" on Form 990	, Part IV, line	6.		
		(a) Donor advised fund	ds	(b) Funds and o	other acco	unts
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 do are the organization's property, subject to the	onor advisors in writing that the ass e organization's exclusive legal cor	sets held in donor ntrol?	advised funds	Yes	No
6	Did the organization inform all grantees, done for charitable purposes and not for the benefimpermissible private benefit?	it of the donor or donor advisor, or	for any other pur	pose conferring	Yes	□No
Pai	'					
I al	Complete if the organization a	answered "Yes" on Form 990). Part IV. line	7.		
1	Purpose(s) of conservation easements held by			,		
	Preservation of land for public use (for exam	, ,	11 37	of a historically impo	ortant land	l area
	Protection of natural habitat	,	Preservation of	of a certified historic	c structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization	held a qualified conservation contribu	ution in the form of	a conservation ease	ment on the	е
	last day of the tax year.				- 1 (1)	T V
	Total number of concernation accommonts		-	Held at the	End of the	e lax Year
-	Total number of conservation easements Total acreage restricted by conservation ease			2a 2b		
	: Number of conservation easements on a cert			20 2c		
•				20		
•	Number of conservation easements included a historic structure listed in the National Regi	on line 2c acquired after July 25, 2 ister	2006, and not on	2d		
3	Number of conservation easements modified, tratax year		<u>.</u>	rganization during the	е	
4	Number of states where property subject to c	conservation easement is located				
5	Does the organization have a written policy re		nspection, handlir	ng of violations,		
	and enforcement of the conservation easeme				Yes	No
6	Staff and volunteer hours devoted to monitoring,	inspecting, handling of violations, an	d enforcing conser	vation easements du	ring the yea	ar
7	Amount of expenses incurred in monitoring, insp	pecting, handling of violations, and en	forcing conservation	on easements during	the year	
8	Does each conservation easement reported of and section 170(h)(4)(B)(ii)?				Yes	No
9	In Part XIII, describe how the organization re include, if applicable, the text of the footnote conservation easements.	ports conservation easements in it to the organization's financial stat	s revenue and ex ements that desc	pense statement ar ribes the organization	nd balance on's accou	sheet, and inting for
Pai	Organizations Maintaining Co Complete if the organization a	ollections of Art, Historical 7 answered "Yes" on Form 990	Freasures, or (), Part IV, line	Other Similar As 8.	ssets	
1a	If the organization elected, as permitted under historical treasures, or other similar assets he Part XIII the text of the footnote to its financi	eld for public exhibition, education.	. or research in fu	ment and balance s irtherance of public	heet works service, p	s of art, rovide in
b	If the organization elected, as permitted under historical treasures, or other similar assets held following amounts relating to these items.	for public exhibition, education, or res	search in furtherand	ce of public service, p	provide the	
	(i) Revenue included on Form 990, Part VIII	, line 1		\$		
	(ii) Assets included in Form 990, Part X			\$		
	If the organization received or held works of art, amounts required to be reported under FASB	ASC 958 relating to these items.			owing	
	Revenue included on Form 990, Part VIII, line			_		
b	Assets included in Form 990, Part X			\$		

Schedule D (Form 990) 2023 OCCIDENTAL ARTS AND ECOLOGY CENTER Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply). Public exhibition Loan or exchange program Scholarly research Other h Preservation for future generations C 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets No Yes to be sold to raise funds rather than to be maintained as part of the organization's collection?..... **Escrow and Custodial Arrangements** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?.... No **b** If "Yes," explain the arrangement in Part XIII and complete the following table. Amount 1c c Beginning balance..... **d** Additions during the year..... 1d e Distributions during the year..... 1e 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?..... No **b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII................ **Endowment Funds** Part V Complete if the organization answered "Yes" on Form 990, Part IV, line 10. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back **1a** Beginning of year balance..... **b** Contributions..... c Net investment earnings, gains, **d** Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment **b** Permanent endowment c Term endowment The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the Yes No organization by: (i) Unrelated organizations?... 3a(i) (ii) Related organizations?..... 3a(ii **b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?..... 3b Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		5,475,647.	1,414,562.	4,061,085.
c Leasehold improvements		853,204.	523,012.	330,192.
d Equipment		275,864.	45,383.	230,481.
e Other		89,782.		89,782.
Total. Add lines 1a through 1e. (Column (d) must e	gual Form 990. Part X. I	ine 10c. column (B))		4.711.540

BAA Schedule D (Form 990) 2023

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Part VII	Investments — Other Securities	Form 000 Port IV line	N/A	
(a) Descrip	Complete if the organization answered "Yes" or otion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-o	f_vear market value
	Il derivatives	(b) Dook value	(C) Method of Valuation. Cost of end-o	1-year market value
` '	held equity interests.			
(3) Other				
_				
(A) (B)				
(C)				
(D)				
(E)				
(F)				
$\frac{(G)}{(G)}$				
$\frac{(H)}{(I)}$				
(l) Total (Colum	n (b) must equal Form 990, Part X, line 12, column (B))			
Part VIII			N/A	
T dit Viii	Investments — Program Related Complete if the organization answered "Yes" or	n Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.	
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-	-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7) (8)				
(9)				
(10)				
	n (b) must equal Form 990, Part X, line 13, column (B))			
Part IX	Other Assets	N/A		
	Complete if the organization answered "Yes" or		e 11d. See Form 990, Part X, line 15.	(h) Dealt value
(1)	(a) De	scription		(b) Book value
(2)				
(3)				
(4)				
(5)				
(6)				
(7) (8)				
(9)				
(10)				
	ımn (b) must equal Form 990, Part X, line 15, o	column (B))		
Part X	Other Liabilities			l
	Complete if the organization answered "Yes" or		e 11e or 11f. See Form 990, Part X, line 2	
1.	• •	ription of liability		(b) Book value
	al income taxes			120 (41
(3) ROUN	ATING LEASE PAYABLE			139,641.
(4)	DING			Δ,
(5)				
(6)				
(7)				
(8)				
(9)				
(10) (11)				
	mn (h) must aqual Form 000 Port V line 05 -	olumn (D))		139,642.
	mn (b) must equal Form 990, Part X, line 25, c uncertain tax positions. In Part XIII, provide the text of the fo			
	nder FASB ASC 740. Check here if the text of the footnote ha			

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Pai	TXI Reconciliation of Revenue per Audited Financial Statemer	nts Wit	th Revenue per l	Return	
	Complete if the organization answered "Yes" on Form 990,	Part I\	√, line 12a.		
1	Total revenue, gains, and other support per audited financial statements			. 1	5,954,809.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-587		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
c	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			. 2e	-587.
3	Subtract line 2e from line 1			. 3	5,955,396.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			. 4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).			. 5	5,955,396.
Pai	t XII Reconciliation of Expenses per Audited Financial Stateme	nts W	ith Expenses pe	r Retu	rn
Pai	Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990,			r Retu	rn
Pai		Part I\	V, line 12a.		4,970,344.
	Complete if the organization answered "Yes" on Form 990,	Part I\	V, line 12a.		
1 2	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements	Part I\	V, line 12a.		
1 2 a	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	Part I\	V, line 12a.		
1 2 a	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	Part I\	V, line 12a.		
1 2 a	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a 2b 2c	V, line 12a.		
1 2 a b	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	2a	V, line 12a.	. 1	
1 2 a b	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements. Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities. Prior year adjustments. Other losses. Other (Describe in Part XIII.)	2a 2b 2c 2d	V, line 12a.	. 1 	4,970,344.
1 2 a b c c c c	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements. Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities. Prior year adjustments. Other losses. Other (Describe in Part XIII.)	2a 2b 2c 2d	V, line 12a.	. 1 	
1 2 a k c c c c c c c c c c c c c c c c c c	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1. Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b.	2a 2b 2c 2d	V, line 12a.	. 1 	4,970,344.
1 2 a b c c c c c c c c c c c c c c c c c c	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1. Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b. Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	V, line 12a.	2e 3	4,970,344.
1 2 a b c c c c c c c c c c c c c c c c c c	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1. Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b. Other (Describe in Part XIII.) Add lines 4a and 4b	2a 2b 2c 2d 4a 4b	V, line 12a.	2e 3	4,970,344.
1 2 a b c c c c c c c c c c c c c c c c c c	Complete if the organization answered "Yes" on Form 990, Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1. Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b. Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	V, line 12a.	2e 3	4,970,344.

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 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART X - FASB ASC 740 FOOTNOTE

BAA

AS DETERMINED BY THE INTERNAL REVENUE SERVICE, THE CENTER IS A NOT-FOR-PROFIT ORGANIZATION EXEMPT FROM INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND SECTION 23701(D) OF THE CALIFORNIA REVENUE AND TAXATION CODE AND IS NOT SUBJECT TO STATE OR FEDERAL INCOME TAXES.

THE CENTER DETERMINES WHETHER ITS TAX POSITIONS ARE "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED UPON EXAMINATION BY THE APPLICABLE TAXING AUTHORITY BASED ON THE TECHNICAL

MERITS OF THE POSITIONS. AS OF DECEMBER 31, 2021, THE CENTER HAS REVIEWED ITS TAX

Schedule D (Form 990) 2023

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PART X - FASB ASC 740 FOOTNOTE (CONTINUED)

Supplemental Information (continued)

POSITIONS AND HAS CONCLUDED NO RESERVE FOR UNCERTAIN TAX POSITIONS IS REQUIRED. THE CENTER'S EXEMPT ORGANIZATION INFORMATION RETURNS ARE SUBJECT TO REVIEW THROUGH THREE YEARS AFTER THE DATE OF FILING FOR FEDERAL AND FOUR YEARS AFTER THE DATE OF FILING FOR STATE.

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

OCCIDENTAL ARTS AND ECOLOGY CENTER

Employer identification number

68-0359676

FORM 990, PART I, LINE 1 - ORGANIZATION MISSION OR SIGNIFICANT ACTIVITIES

OAEC CULTIVATES ECOLOGICAL LITERACY AND BUILDS THE CAPACITY OF CIVIC AND SOCIAL MOVEMENT LEADERS AND ORGANIZATIONS TO GUIDE THEIR OWN COMMUNITIES TO AN ECOLOGICALLY REGENERATIVE, ECONOMICALLY VIABLE, AND SOCIALLY JUST FUTURE.

INSPIRED BY NATURE, WHERE DIVERSITY IS A KEY INDICATOR OF THE HEALTH OF AN ECOSYSTEM, WE ASSIST PLACE-BASED COMMUNITIES IN REORIENTING HUMAN ECONOMY AND GOVERNANCE TOWARDS THE RESTORATION AND STEWARDSHIP OF BIOLOGICAL AND CULTURAL DIVERSITY. TO REALIZE OUR MISSION, WE INVEST IN PROJECTS AND PARTNERSHIPS THAT ADDRESS THE ROOT CAUSES OF THE ECOLOGICAL, ECONOMIC, AND SOCIAL CRISES OF OUR TIME.

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

OAEC CULTIVATES ECOLOGICAL LITERACY AND BUILDS THE CAPACITY OF CIVIC AND SOCIAL MOVEMENT LEADERS AND ORGANIZATIONS TO GUIDE THEIR OWN COMMUNITIES TO AN ECOLOGICALLY REGENERATIVE, ECONOMICALLY VIABLE, AND SOCIALLY JUST FUTURE.

INSPIRED BY NATURE, WHERE DIVERSITY IS A KEY INDICATOR OF THE HEALTH OF AN ECOSYSTEM, WE ASSIST PLACE-BASED COMMUNITIES IN REORIENTING HUMAN ECONOMY AND GOVERNANCE TOWARDS THE RESTORATION AND STEWARDSHIP OF BIOLOGICAL AND CULTURAL DIVERSITY. TO REALIZE OUR MISSION, WE INVEST IN PROJECTS AND PARTNERSHIPS THAT ADDRESS THE ROOT CAUSES OF THE ECOLOGICAL, ECONOMIC, AND SOCIAL CRISES OF OUR TIME.

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

OAEC'S 2023 PROGRAM ACCOMPLISHMENTS ARE MOSTLY EXPRESSED THROUGH OUR MANY INTER-RELATED PROGRAMS, PROJECTS AND PARTNERSHIPS. A

Name of the organization

OCCIDENTAL ARTS AND ECOLOGY CENTER

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

- 1. THE RESILIENT COMMUNITY DESIGN / PERMACULTURE PROGRAM,
- 2. THE WATER INSTITUTE AND BEAVER RESTORATION PROJECT,
- 3. THE MOTHER GARDEN BIODIVERSITY PROGRAM,
- 4. THE WILDLANDS PROGRAM,
- 5. THE MOVEMENT BUILDING RETREAT PROGRAM,
- 6. THE PERFORMING ARTS PROGRAM,
- 7. OAEC'S PARTNERSHIP WITH DOZENS OF RACIAL, SOCIAL, ECONOMIC, ENVIRONMENTAL JUSTICE ORGANIZATIONS AND ALLIANCES ON EDUCATION, TRAINING, ADVOCACY AND ALLIANCE BUILDING CAMPAIGNS, AND
- 8. OAEC'S FISCALLY SPONSORED PROJECTS PROGRAM

EACH OF OUR PROGRAMS, PROJECTS AND PARTNERSHIPS USE THE SAME METHODS AND STRATEGIES TO ACHIEVE OUR PUBLIC BENEFIT MISSION, INCLUDING:

- 1. WE MODEL RESILIENCY OAEC IS A RESILIENCY DEMONSTRATION SITE,
 MODELING DOZENS OF PRACTICAL PERSONAL AND COMMUNITY-SCALE SOLUTIONS TO
 COMMON CHALLENGES IN THE SUSTAINABLE MANAGEMENT OF SOIL, WATER, FOOD
 PRODUCTION, THE RESTORATION AND PRESERVATION OF BIOLOGICAL AND CULTURAL
 DIVERSITY, AND MORE EFFECTIVE WAYS TO SELF-GOVERN AND MANAGE ECONOMY.
 OAEC'S PROGRAMS BENEFIT FROM OUR MORE THAN TWENTY FIVE YEARS OF
 EXPERIENCE IN DEVELOPING AND CARING FOR OUR OWN 80-ACRE SITE, AS WELL
 AS SUPPORTING HUNDREDS OF OTHER LAND-BASED PROJECTS AND ORGANIZATIONS.
- 2. WE TRAIN CHANGEMAKERS THE TRANSITION TO A JUST AND ENVIRONMENTALLY SUSTAINABLE ECONOMY WILL ONLY BE ACHIEVED IF MORE INDIVIDUALS BECOME ECOLOGICALLY LITERATE "CHANGEMAKERS." OAEC CONTINUES TO DEVELOP

Name of the organization

OCCIDENTAL ARTS AND ECOLOGY CENTER

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

WORKSHOPS AND ADVOCACY CAMPAIGNS THAT HELP TRAIN, SUPPORT AND INSPIRE INDIVIDUALS AND SOCIAL MOVEMENT LEADERS TO APPLY AN ECOLOGICAL LENS TO THEIR EXISTING SOCIAL CHANGE WORK.

- 3. WE HELP BUILD THE CAPACITY OF COMMUNITIES TO TRANSFORM TOWARD RESILIENCE OAEC STRIVES TO ACHIEVE A "SOCIAL CHANGE MULTIPLIER EFFECT" BY TRAINING AND BUILDING THE CAPACITY OF WHOLE COMMUNITIES TO BECOME MORE EFFECTIVE AGENTS OF RAPID CHANGE. WE WORK TO FOSTER ECOLOGICAL LITERACY AND TO EMPOWER DIVERSE COMMUNITIES SCHOOLS, LOCAL GOVERNMENTS, PUBLIC AGENCIES, FOUNDATIONS, ENVIRONMENTAL AND SOCIAL JUSTICE ORGANIZATIONS, FARMS AND RANCHES, AND POLICY COALITIONS TO DESIGN THEIR OWN PLACE-BASED STRATEGIES TO CREATE THE JUST TRANSITION TOWARDS A MORE REGENERATIVE CULTURE AND ECONOMY.
- 4. WE WORK TO CHANGE THE RULES OF GOVERNANCE AND ECONOMY WE WORK TO LEGALIZE AND REQUIRE SUSTAINABLE ECONOMY, AND TO MAKE ILLEGAL AND DIS-INCENTIVIZE ACTIVITIES THAT SUBVERT IT. SOMETIMES ON OUR OWN, BUT MOST OFTEN THROUGH BROADER ADVOCACY ALLIANCES, WE SEEK TO CHANGE POLICY IN THE ARENAS OF GOVERNANCE IN WHICH WE ARE MOST LIKELY TO SUCCEED A CITY OR COUNTY COUNCIL, SCHOOL BOARD, WATER AGENCY, OR STATE LEGISLATURE OR AGENCY ON ISSUES THAT ARE RIPE FOR CHANGE AND MOVE US TOWARD A JUST AND SUSTAINABLE FUTURE.

FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.

EXECUTIVE DIRECTOR DAVE HENSON HAS A FAMILY RELATIONSHIP WITH KENDALL DUNNIGAN.

EXECUTIVE DIRECTOR DAVE HENSON HAS A BUSINESS RELATIONSHIP WITH SUSAN MCGOVERN.

Name of the organization
OCCIDENTAL ARTS AND ECOLOGY CENTER

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FORM 990, PART VI, LINE 3 - DESCRIPTION OF DELEGATED DUTIES TO MANAGEMENT COMPANY

THE BOARD OF DIRECTORS SUPPORTS THE OAEC STAFF IN CREATING A STAFF
EXECUTIVE COUNCIL (SEC) TO SERVE AS THE ADVISING HUB FOR ORGANIZATIONAL
BUDGETARY APPROVAL, EXECUTIVE DIRECTOR OVERSIGHT, HUMAN RESOURCES ISSUES, AND
STAFFING COMPENSATION AND BENEFITS APPROVAL. THE SEC IS COMPRISED OF
THE EXECUTIVE DIRECTOR, FINANCE CONTROLLER, AND OPERATIONS DIRECTOR AND
THREE OTHER STAFF ELECTED BY THE ENTIRE STAFF.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

OAEC'S FINANCE CONTROLLER AND OAEC'S EXECUTIVE DIRECTOR COMPILE THEN
PROVIDE TO AN INDEPENDENT CPA ALL FINANCIALS, DOCUMENTS, AND NARRATIVES FOR
THE 990, INCLUDING A COPY OF THE AUDITED FINANCIAL STATEMENTS, COMPLETED BY A
SECONDARY INDEPENDENT CPA FIRM. THE CPA DRAFTS THE RETURN, AND WORKS WITH OAEC
LEADERSHIP TO ANSWER ALL QUESTIONS. THE DRAFT 990 IS THEN REVIEWED BY THE MEMBERS OF
THE BOARD OF DIRECTORS. AFTER ANY QUESTIONS ARE RESOLVED BY STAFF AND THE CPA
TO THE BOARD'S SATISFACTION, A FINAL 990 IS SUBMITTED AND MADE AVAILABLE TO
ALL BOARD AND STAFF MEMBERS.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

ALL STAFF AND DIRECTORS ARE REQUIRED TO NOTIFY OAEC'S FINANCE CONTROLLER AND OAEC'S EXECUTIVE DIRECTOR IF THEY MIGHT ENGAGE IN ANY ACTIVITY THAT MIGHT INVOLVE A CONFLICT OF INTEREST.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT
ANNUAL COMPENSATION FOR ALL STAFF IS DETERMINED BY THE EXECUTIVE COUNCIL
WHICH ANNUALLY REVIEWS PUBLISHED DATA ABOUT COMPENSATION WITH COMPARABLE
NON-PROFITS IN OAEC'S ISSUE AND GEOGRAPHICAL AREAS. NOTES ARE KEPT ON THE
PROCESS, DELIBERATIONS AND DECISIONS.

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FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

UPON WRITTEN OR VERBAL REQUEST, AND LINKED ON OUR WEBSITE.

FORM 990, PART IX, LINE 11G OTHER FEES FOR SERVICES

		(A)	(B) PROGRAM	(C) MANAGEMENT	(D) FUND-
	_	TOTAL	SERVICES	& GENERAL	RAISING
PROFESSIONAL SERVICES	TOTAL \$	756,323. 756,323.	\$ 639,362. \$ 639,362.	27,482. \$ 27,482.	\$ 89,479. \$ 89,479.

12/31/23

2023 CALIFORNIA BOOK DEPRECIATION SCHEDULE

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OCCIDENTAL ARTS AND ECOLOGY CENTER

68-0359676

_NODESCRIPTION FORM 199	DATE <u>ACQUIRED</u>	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT _	DEPR. BASIS	PRIOR DEPR.	_METHOD_	LIFE	RATE	CURRENT DEPR.
1 VARIOUS ASSETS	VARIOUS		6,604,715							6,604,715	1,734,683	S/L	30		286,579
TOTAL			6,604,715		0	0	() (0	6,604,715	1,734,683				286,579
TOTAL DEPRECIATION		,	6,604,715		0	0	() (0	6,604,715	1,734,683				286,579
GRAND TOTAL DEPRECIATION			6,604,715		0	0	() (0	6,604,715	1,734,683				286,579