WEGNER CPAS LLP 230 PARK AVE FL 3 NEW YORK, NY 10169-0005

CLIMATE SCIENCE LEGAL DEFENSE FUND 475 RIVERSIDE DRIVE, SUITE 246 NEW YORK, NY 10115

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PUBLIC DISCLOSURE COPY - STATE REGISTRATION NO. 44-69-75

Department of the Treasury

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

A For the 2022 calendar year, or tax year beginning and ending C Name of organization D Employer identification number Check if applicable Address change CLIMATE SCIENCE LEGAL DEFENSE FUND Name change 47-1941171 Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Final return/ termin-ated 475 RIVERSIDE DRIVE, SUITE 246 646-801-0853 518,631. City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ Amended 10115 NEW YORK, NY H(a) Is this a group return return
Application
pending F Name and address of principal officer: LAUREN KURTZ Yes X No for subordinates? SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions WWW.CSLDF.ORG J Website: H(c) Group exemption number **K** Form of organization: X Corporation L Year of formation: 2014 M State of legal domicile: DE Trust Association Other Part I Summary Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O **Activities & Governance** 2 if the organization discontinued its operations or disposed of more than 25% of its net assets. 8 3 Number of voting members of the governing body (Part VI, line 1a) 3 8 Number of independent voting members of the governing body (Part VI, line 1b) 4 4 0 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 6 7 a 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. 7h **Prior Year Current Year** 569,124. 517,665. Contributions and grants (Part VIII, line 1h) 8 0. 0. Program service revenue (Part VIII, line 2g) 1.157. 582. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 247. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 384. 11 570,528. 518,631. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 0. 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 190,788. 191,932. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 181,419. 174,779. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 372,207. 366,711. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 198,321. 151,920. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5 1,087,317. 962,460. Total assets (Part X, line 16) 53,230. 26,167 21 Total liabilities (Part X, line 26) 三年 909,230. 061,150 Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. auren Signature of officer Date Sign LAUREN KURTZ EXECUTIVE DIRECTOR Here Type or print name and title Date PTIN Check Print/Type preparer's name Preparer's signature YIGIT UCTUM, CPA 09/26/23 P01269549 YIGIT UCTUM, CPA Paid self-employed Firm's EIN 39-0974031 WEGNER CPAS LLP Preparer Firm's name Firm's address 230 PARK AVE FL 3 Use Only NEW YORK, NY 10169-0005 Phone no. (212) 551-1724 X Yes

May the IRS discuss this return with the preparer shown above? See instructions

Page 2

	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: SEE SCHEDULE O
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ? Yes X No
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?
3	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$206 , 228 •including grants of \$0 •) (Revenue \$)
	THE CLIMATE SCIENCE LEGAL DEFENSE FUND WORKS TO EDUCATE THE SCIENTIFIC
	COMMUNITY ABOUT THEIR RIGHTS AND THEIR RESPONSIBILITIES REGARDING LEGAL ISSUES SURROUNDING THEIR WORK, AS WELL AS EDUCATE THE PUBLIC ON LEGAL
	ISSUES FACING SCIENTISTS. CSLDF ALSO SERVES AS A CLEARINGHOUSE FOR
	INFORMATION RELATED TO LEGAL ACTIONS TAKEN AGAINST SCIENTISTS IN ORDER
	TO PROVIDE LAWYERS REPRESENTING SCIENTISTS WITH INFORMATION ABOUT PAST
	CASES AND STRATEGIES. THE CLIMATE SCIENCE LEGAL DEFENSE FUND TAKES AN
	ACTIVE INTEREST IN LITIGATION INVOLVING SCIENTISTS, INCLUDING HELPING
	RAISE FUNDS FOR SCIENTISTS' DEFENSE, SERVING AS A RESOURCE IN FINDING
	PRO BONO REPRESENTATION, FILING COURT PAPERS URGING THE PROTECTION OF
	SCIENCE AND SCIENTISTS, AND PROVIDING SUPPORT DURING DIFFICULT
	LITIGATION OR THREATENED LITIGATION.
4b	(Code:) (Expenses \$
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4۵	Total program service expenses 206,228.

Part IV Checklist of Required Schedules

			Yes	No
1 Is t	the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
If "	Yes, " complete Schedule A	1	X	
	the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
	d the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	blic office? If "Yes," complete Schedule C, Part I	3		Х
	ction 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	ring the tax year? If "Yes," complete Schedule C, Part II	4		Х
	the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	nilar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		Х
	the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	ovide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
	the organization receive or hold a conservation easement, including easements to preserve open space,			
		7		х
	e environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	-		
	d the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			v
	hedule D, Part III	8		<u> </u>
	d the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	nounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			37
	Yes, " complete Schedule D, Part IV	9		_X_
	d the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11 If t	he organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X,			
	applicable.			
a Dic	the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
Pa	rt VI	11a	X	
b Dic	the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
ass	sets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
	the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
ass	sets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
	the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	rt X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
	the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	d the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	e organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
	the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	hedule D, Parts XI and XII	12a	Х	
	as the organization included in consolidated, independent audited financial statements for the tax year?			
	Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
	the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
		14a		X
	d the organization maintain an office, employees, or agents outside of the United States? If the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1 7 4		
	restment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
		14b		х
	more? If "Yes," complete Schedule F, Parts I and IV	140		
				Х
for		45		- 22
	eign organization? If "Yes," complete Schedule F, Parts II and IV	15		
16 Did	eign organization? If "Yes," complete Schedule F, Parts II and IV the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
16 Did or :	eign organization? If "Yes," complete Schedule F, Parts II and IV d the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	15 16		X
16 Did or 17	eign organization? If "Yes," complete Schedule F, Parts II and IV d the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to for foreign individuals? If "Yes," complete Schedule F, Parts III and IV d the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		Х
16 Did or 17 17 Did col	eign organization? If "Yes," complete Schedule F, Parts II and IV If the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to for foreign individuals? If "Yes," complete Schedule F, Parts III and IV If the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, lumn (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions			
16 Did or 17 17 Did col 18 Did	eign organization? If "Yes," complete Schedule F, Parts II and IV d the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to for foreign individuals? If "Yes," complete Schedule F, Parts III and IV d the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, lumn (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions d the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	16		x
16 Did or 17 Did col 18 Did 1c	eign organization? If "Yes," complete Schedule F, Parts II and IV d the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to for foreign individuals? If "Yes," complete Schedule F, Parts III and IV d the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, lumn (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions d the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines and 8a? If "Yes," complete Schedule G, Part II	16		Х
 16 Dictor 17 Dictor 18 Dictor 1c 19 Dictor 	eign organization? If "Yes," complete Schedule F, Parts II and IV d the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to for foreign individuals? If "Yes," complete Schedule F, Parts III and IV d the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, lumn (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions d the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines and 8a? If "Yes," complete Schedule G, Part II d the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	16 17 18		x x
16 Did or or col 17 Did col 18 Did 1c 19 Did col	eign organization? If "Yes," complete Schedule F, Parts II and IV d the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to for foreign individuals? If "Yes," complete Schedule F, Parts III and IV d the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, lumn (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions d the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines and 8a? If "Yes," complete Schedule G, Part II d the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," mplete Schedule G, Part III	16 17 18		х х х
16 Did or 1 17 Did col 18 Did 1c 19 Did col 20a Did	eign organization? If "Yes," complete Schedule F, Parts II and IV d the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to for foreign individuals? If "Yes," complete Schedule F, Parts III and IV d the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, lumn (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions d the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines and 8a? If "Yes," complete Schedule G, Part II d the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," mplete Schedule G, Part III d the organization operate one or more hospital facilities? If "Yes," complete Schedule H	16 17 18 19 20a		x x
16 Did or : 17 Did col 18 Did 10 19 Did col 20a Did b If "	eign organization? If "Yes," complete Schedule F, Parts II and IV d the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to for foreign individuals? If "Yes," complete Schedule F, Parts III and IV d the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, lumn (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions d the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines and 8a? If "Yes," complete Schedule G, Part II d the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," mplete Schedule G, Part III d the organization operate one or more hospital facilities? If "Yes," complete Schedule H Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	16 17 18		х х х
16 Did or 1 17 Did col 18 Did 10 19 Did 20a Did b If " 21 Did	eign organization? If "Yes," complete Schedule F, Parts II and IV d the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to for foreign individuals? If "Yes," complete Schedule F, Parts III and IV d the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, lumn (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions d the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines and 8a? If "Yes," complete Schedule G, Part II d the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," mplete Schedule G, Part III d the organization operate one or more hospital facilities? If "Yes," complete Schedule H	16 17 18 19 20a		х х х

Pa	rt IV Checklist of Required Schedules (continued)			agc
	· (continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	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		<u> </u>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			l
	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		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			,,
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			\ ,
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			_V
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	00		_v
0.4	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	24		x
25.0	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	34 35a		X
	•	SSa		1
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35b		
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		\vdash
30		36		X
37	If "Yes," complete Schedule R, Part V, line 2	30		
0,	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	5,		
55	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance	50		
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	,		
b		_		
_	Did the organization comply with backup withholding rules for reportable payments to yendors and reportable gaming	1		

232004 12-13-22

Form **990** (2022)

(gambling) winnings to prize winners?

Form 990 (2022) CLIMATE SCIENCE LEGAL DEFENSE FUND

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

	. (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		100	110
	filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
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?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		_X_
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).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		_X_
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		<u> </u>
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		_ <u>X</u> _
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		_X_
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 Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
^	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	00		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b		
b 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:	90		
а	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 10b	1		
11	Section 501(c)(12) organizations. Enter:	1		
	Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		_X_
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		<u>X</u>
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<u>X</u>
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

oage 6

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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 8 **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. 8 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 6 Х 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? 10a 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? Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Did the organization have a written document retention and destruction policy? 14 Х 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? The organization's CEO, Executive Director, or top management official Х 15a Х Other officers or key employees of the organization 15b 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 Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA, FL, MA, MD, MI, NC, NH, NY, OR, PA, VA 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 Another's website __ Other (explain on Schedule O) Own website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records LAUREN KURTZ - 646-801-0853 475 RIVERSIDE DR STE 246, NEW YORK, NY 10115

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-NEĆ) of more than \$100,000 from the organization and any related organizations.

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

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

(A)	(B)	Jigu		((C)		our	(D)	(E)	(F)
Name and title	Average hours per week	box	Position (do not check more than one box, unless person is both ar officer and a director/trustee				an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) LAUREN KURTZ	40.00	-								
EXECUTIVE DIRECTOR				Х				68,699.	0.	67.
(2) JOSHUA WOLFE	5.00			l						
PRESIDENT	1	Х		Х				0.	0.	0.
(3) SCOTT MANDIA	1.00			l						
SECRETARY		Х		Х				0.	0.	0.
(4) CHARLES ZELLER	2.00			l						
TREASURER		Х		Х				0.	0.	0.
(5) ANDREW FREY	5.00	ļ		l						
VICE PRESIDENT	1 00	Х		X				0.	0.	0.
(6) NAOMI ORESKES	1.00	ļ								
DIRECTOR	1 00	Х						0.	0.	0.
(7) JEFFREY MASTERS	1.00									
DIRECTOR	1 00	Х						0.	0.	0.
(8) MICHAEL OPPENHEIMER	1.00	.,							_	
DIRECTOR	1 00	Х	_			_		0.	0.	0.
(9) MICHAEL GERRARD	1.00	3,7							_	_
DIRECTOR	-	Х						0.	0.	0.

Section A. Officers, Directors, Tru		DIOY	ees,			gnes	τC		,	1	-\
(A)	(B) Average	5						(D)	(E)	I	F)
Name and title	hours per		not cl	neck i	more	than d is both		Reportable compensation	Reportable compensation	1	nated unt of
	week	offic				or/trust		from	from related	I	ner
	(list any	ndividual trustee or director						the	organizations		nsation
	hours for related	e or di	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	I	n the ization
	organizations	truste	al trusi		ee/	mpen		1099-NEC)	1099-NEC)	1 ~	elated
	below	ridual 1	Institutional trustee	er	Key employee	Highest compensated employee	Jer	,		I	zations
	line)	Indiv	Insti	Officer	Key 6	High emp	Former				
		-									
		-									
						\vdash					
		1									
		1									
		1									
		1									
1b Subtotal					<u> </u>	I		68,699.	0		67.
c Total from continuation sheets to Part \								0.	0		0.
d Total (add lines 1b and 1c)								68,699.	0		67.
2 Total number of individuals (including but								eceived more than \$100,	000 of reportable		
compensation from the organization										ī	0
										Y	es No
3 Did the organization list any former office		,	,		,	,	•		•		
line 1a? If "Yes," complete Schedule J for										3	<u> </u>
4 For any individual listed on line 1a, is the										4	x
and related organizations greater than \$1.Did any person listed on line 1a receive or			•							4	122
rendered to the organization? If "Yes." co									idal for scrinces	5	Х
Section B. Independent Contractors	mpiete Genedan	<i>50 1</i> 0	<i>) </i>	CII,	<i>J</i> C/3						
1 Complete this table for your five highest of	ompensated inc	lepe	nder	nt co	ontra	actor	s th	nat received more than \$	100,000 of compens	ation from	
the organization. Report compensation fo	r the calendar y	ear e	ndin	ıg w	ith c	or wit	:hin	the organization's tax ye	ear.		
(A)				_				(B)		(C)	
Name and busines	s address	NC	ONE	<u>:</u>			\dashv	Description of s	ervices	Compens	ation
							\dashv				
			_			_					
							\Box				
2 Total number of independent contractors		ot lin	nited	l to 1		_	ted	above) who received mo	ore than		
\$100,000 of compensation from the organ	nization)				Form 99	0 (2222)
										Form ⋑	U2022) U

Form 990 (2022) CLIMATE
Part VIII Statement of Revenue

			Check if Schedule O con	tains a re	esponse (or note to any lin	e in this Part VIII			
							(A)	(B)	(C)	(D)
							Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
								function revenue	business revenue	sections 512 - 514
SS	1	_	Federated campaigns		1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues		1b					
S S			Fundraising events		1c					
fts,			Related organizations		1d					
ij gi						38,450.				
ns, Sir			Government grants (contribut		1e	30,430.				
utic			All other contributions, gifts, gran			170 215				
ĕ			similar amounts not included abo			479,215.				
ont		_	Noncash contributions included in lines	_	1g \$		E17 66E			
O g		n	Total. Add lines 1a-1f			B	517,665.			
						Business Code				
ce	2	а								
ervi		b								
S		С								
ran Sev		d								
Program Service Revenue		е								
<u>-</u>		f	All other program service reve	enue						
		g	Total. Add lines 2a-2f							
	3		Investment income (including	dividen	ds, intere	st, and				
			other similar amounts)				582.			582.
	4		Income from investment of ta							
	5		Royalties							
				(i)	Real	(ii) Personal				
	6	а	Gross rents 6a	a						
			Less: rental expenses 6k	5						
		С	Rental income or (loss) 60							
			Net rental income or (loss)							
			Gross amount from sales of		curities	(ii) Other				
			assets other than inventory 7a	a 🗀						
			Less: cost or other basis							
<u>o</u>			and sales expenses 7k							
her Revenue			Gain or (loss) 70							
ě			Net gain or (loss)							
푸			Gross income from fundraising e							
Oth	0	а	including \$	-						
١			contributions reported on line							
			·	•						
			Part IV, line 18							
			Less: direct expenses							
			Net income or (loss) from fund							
	9	d	Gross income from gaming a							
			Part IV, line 19							
			Less: direct expenses							
			Net income or (loss) from gan		vities					
	10	а	Gross sales of inventory, less							
			and allowances							
			Less: cost of goods sold							
\rightarrow		С	Net income or (loss) from sale	es of inve	entory					
ဟ						Business Code				
30u	11	а								
Miscellaneous Revenue		b								
cell Seve		С								
Ais			All other revenue			900099	384.			384.
		е	Total. Add lines 11a-11d				384.			
	12		Total revenue. See instructions				518,631.	0.	0.	966.

	ion 501(c)(3) and 501(c)(4) organizations must comple Check if Schedule O contains a respons	e or note to any line in t	his Part IX		X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	68,766.	58,451.	6,877.	3,438.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	25.222		11 055	
7	Other salaries and wages	96,883.	54,658.	11,966.	30,259.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	11 100	11 01 6	1.51	
9	Other employee benefits	11,423.	11,216.	161.	46.
10	Payroll taxes	14,860.	10,993.	3,140.	727.
11	Fees for services (nonemployees):				
а	Management				
b	Legal	11 - 22		11 -00	
С	Accounting	11,700.		11,700.	
d	Lobbying				
е	, F				
f	Investment management fees				
g	, ,				
	column (A), amount, list line 11g expenses on Sch 0.)	92,491.	40,029.	22,794.	29,668.
12	Advertising and promotion	1,183.	847.	153.	183.
13	Office expenses	14,714.	3,440.	7,672.	3,602.
14	Information technology	5,607.	2,426.	136.	3,045.
15	Royalties				
16	Occupancy	24,020.	18,328.	1,176.	4,516.
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	840.	840.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	6,280.		6,280.	
23	Insurance	17,944.	5,000.	12,944.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а					
b					
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	366,711.	206,228.	84,999.	75,484.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				

t X	Balance Sheet					
	Check if Schedule O contains a response or	note to any lin	e in this Part X			
				(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing			651,126.	1	781,560.
2				2	279,699.	
3			7,644.	3	1,449.	
4					4	
5						
	trustee, key employee, creator or founder, su					
	controlled entity or family member of any of the	nese persons			5	
6	Loans and other receivables from other disqu	alified person	s (as defined			
	under section 4958(f)(1)), and persons describ	oed in section	4958(c)(3)(B)		6	
7	Notes and loans receivable, net				7	
8	Inventories for sale or use				8	
9	Prepaid expenses and deferred charges			13,689.	9	18,918.
10a	Land, buildings, and equipment: cost or othe	r				
	basis. Complete Part VI of Schedule D	10a	24,248.			
b		8,854.	10c	3,661.		
11			11			
12			12			
13			13			
14			0.000		0 000	
15	Other assets. See Part IV, line 11		2,030.		2,030.	
16				962,460.		1,087,317.
17				14,780.		26,167.
					21	
22						
					24	
25						
	- f O - l l- l - D	•	·	38 450	OE	0.
26						26,167.
20		hack hara	<u>X</u>	33,230.	20	20,107.
	- ·	HECK HEIE				
27				906.841.	27	1,061,150.
						0.
						<u> </u>
		ooo, oncor				
29		ds			29	
			Г			
32			909,230.	32	1,061,150.	
JZ.				- ,	-	
	2 3 4 5 6 7 8 9 10a b 11 12 13 14 15	1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from any current trustee, key employee, creator or founder, suit controlled entity or family member of any of the Loans and other receivables from other disquired under section 4958(f)(1)), and persons describted in Notes and loans receivable, net inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule Dispansion. Investments - publicly traded securities investments - other securities. See Part IV, ling Investments - program-related. See Part IV, ling Intangible assets 15 Other assets. See Part IV, line 11 Intangible assets. Add lines 1 through 15 (must effort assets. Add lines 1 through 15 (must effort assets) and other payables to any current or forther trustee, key employee, creator or founder, suit controlled entity or family member of any of the Secured mortgages and notes payable to unrelated. See Part IV, line 13 Secured mortgages and notes payable to unrelated. See Part IV, line 14 Intangible assets. Add lines 1 through 15 (must effort assets) and other payables to any current or forther liabilities. Completed income tax, parties, and other liabilities on included on line of Schedule D. 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, cand complete lines 27, 28, 32, and 33. 27 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, cand complete lines 27, 28, 32, and 33. 28 Capital stock or trust principal, or current fundance in the payable in	1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from any current or former office trustee, key employee, creator or founder, substantial controlled entity or family member of any of these persons under section 4958(f)(1)), and persons described in section Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10 Less: accumulated depreciation 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Sc Loans and other payables to any current or former officer, or trustee, key employee, creator or founder, substantial controntrolled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third partic Other liabilities (including federal income tax, payables to reparties, and other liabilities not included on lines 17-24). Co of Schedule D 26 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check is and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment funds	1 Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 24,248. b Less: accumulated depreciation 10b 20,587. 11 Investments - publicly traded securities 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related. See Part IV, line 11 14 Intangible assets 15 Other assets. Add lines 1 through 15 (must equal line 33) 17 Accounts payable and accrued expenses 18 Grants payable 2 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other 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 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities, Add lines 17 through 25 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 28 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund	Cash - non-interest-bearing 651, 126.	Cash - non-interest-bearing

Pa	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		8,6	
2	Total expenses (must equal Part IX, column (A), line 25)	2		6,7	
3	Revenue less expenses. Subtract line 2 from line 1	3		1,9	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	90	9,2	<u>30.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,06	1,1	50.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				l
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	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 Sche				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2022)

232012 12-13-22

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Employer identification number

Open to Public Inspection

CLIMATE SCIENCE LEGAL DEFENSE FUND 47-1941171 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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

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

Sec	ction A. Public Support	,		,			
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and		` ,	` ,	, ,	, ,	,,
	membership fees received. (Do not						
	include any "unusual grants.")	736,698.	502,800.	357,913.	569,124.	517,665.	2684200.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	736,698.	502,800.	357,913.	569,124.	517,665.	2684200.
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)						669,210.
6	Public support. Subtract line 5 from line 4.						2014990.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4	736,698.	502,800.	357,913.	569,124.	517,665.	2684200.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources			2,960.	1,157.	582.	4,699.
9	Net income from unrelated business				-		
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						2688899.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	22,453.
13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop	here					
Sec	ction C. Computation of Publi	ic Support Per	centage				
14	Public support percentage for 2022 (I	ine 6, column (f), d	ivided by line 11, c	olumn (f))		14	74.94 %
15	Public support percentage from 2021	Schedule A, Part	II, line 14			15	75.60 <u>%</u>
16a	33 1/3% support test - 2022. If the	organization did no	t check the box or	n line 13, and line 1	14 is 33 1/3% or m	ore, check this box	x and
	stop here. The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2021. If the						
	and stop here. The organization qual	lifies as a publicly s	supported organiza	ition			
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop her	re. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	est. The organizatio	n qualifies as a pu	blicly supported or	rganization		
b	10% -facts-and-circumstances test	- 2021. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	nstances test, chec	ck this box and st	t op here. Explain i	n Part VI how the	
	organization meets the facts-and-circu						
18	Private foundation. If the organization	on did not check a	box on line 13, 16a	a, 16b, 17a, or 1 <mark>7</mark> b	, check this box a	nd see instructions	s
						Schedule A	(Form 990) 2022

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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.)

Se	ction A. Public Support	elow, please comp	Diete Fait II.)				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(1)	(12)	(5)====	(.,,=	(5) = 5 = 5	χ,
2	Gross receipts from admissions, 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						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ŀ	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	(2) = 3 : 3	(2) 20:0	(0) = 0 = 0	(4) = 5 = 1	(0) = 0 = 0	(.,
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income (less section 511 taxes) from businesses						
	acquired after June 30, 1975					+	
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						<u> </u>
14	First 5 years. If the Form 990 is for the	· ·		•	•		. —
	check this box and stop here	- O 1 D -					
	ction C. Computation of Publi						
	Public support percentage for 2022 (I		•	column (f))		15	%
	Public support percentage from 2021 ction D. Computation of Inves					16	%
	•			: 10!···-· (f)		147	
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from						7 is not
198	a 33 1/3% support tests - 2022. If the					-41	
k	more than 33 1/3%, check this box as 33 1/3% support tests - 2021. If the	organization did r	not check a box or	n line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	ind
	line 18 is not more than 33 1/3%, che	ck this box and st	top here. The orga	anization qualifies a	as a publicly supp	orted organization	
20	Private foundation. If the organization	n did not check a	box on line 14 19	a or 19h check th	nis hox and see in	structions	

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Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

 If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
_		
1		
2		
2-		
3a		
3b		
3с		
_		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
0		
8		
9a		
9b		
00		
9с		
10a		<u></u>
10b		
100		

Par	Supporting Organizations (continued)	_	
		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and		
	11c below, the governing body of a supported organization?		
	A family member of a person described on line 11a above?		_
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide		
01	detail in Part VI.		
Seci	ion B. Type I Supporting Organizations	1	Τ
		Yes	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,		
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)		
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported		
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported.		
	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization 2		
Sect	supervised, or controlled the supporting organization. 2 ion C. Type II Supporting Organizations		
	,	Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		110
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		
	or management of the supporting organization was vested in the same persons that controlled or managed		
	the supported organization(s).		
Sect	ion D. All Type III Supporting Organizations		
		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?		_
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		
	the organization maintained a close and continuous working relationship with the supported organization(s).		
	By reason of the relationship described on line 2, above, did the organization's supported organizations have a		
	significant voice in the organization's investment policies and in directing the use of the organization's		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's		
Sect	supported organizations played in this regard. 3 ion E. Type III Functionally Integrated Supporting Organizations		1
1 a	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below.		
b	The organization is the parent of each of its supported organizations. <i>Complete</i> line 3 below.		
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).	nns)	
2	Activities Test. Answer lines 2a and 2b below.	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify		
	those supported organizations and explain how these activities directly furthered their exempt purposes,		
	how the organization was responsive to those supported organizations, and how the organization determined		
	that these activities constituted substantially all of its activities.		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,		
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in		
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in		
	these activities but for the organization's involvement.		
	Parent of Supported Organizations. Answer lines 3a and 3b below.		
	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.

1	Check here if the organization satisfied the Integral Part Test as a qualify All other Type III non-functionally integrated supporting organizations mu		•	Part VI). See instruction
ecti	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
ecti	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in 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		
	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
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-function		Type III supporting orga	enization (see

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

e Excess from 2022

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

47-1941171

Name of the organization Employer identification number

CLIMATE SCIENCE LEGAL DEFENSE FUND

Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022)

Name of organization Employer identification number

CLIMATE SCIENCE LEGAL DEFENSE FUND

47-1941171

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
3		\$\$	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
4		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
5		\$\$	Person X Payroll		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
6		\$16,000.	Person X Payroll		

Schedule B (Form 990) (2022)

Name of organization Employer identification number

CLIMATE SCIENCE LEGAL DEFENSE FUND

47-1941171

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$38,450.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ 20,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$35,000.	Person X Payroll
(a)	(b)	(c)	(d)
No. 10	Name, address, and ZIP + 4	Total contributions \$ 15,450.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZI P + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

CLIMATE SCIENCE LEGAL DEFENSE FUND

47-1941171

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 	Schedule R (Form 990) (2022)

Name of organization **Employer identification number** 47-1941171 SCIENCE LEGAL DEFENSE FUND Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

2022
Open to Public Inspection

Name of the organization

CLIMATE SCIENCE LEGAL DEFENSE FUND

Employer identification number 47-1941171

Par	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		imilar Funds or A	ccounts. Complete if the		
	organization answered Tes On Form 990, Fait IV, link	(a) Donor advise	d funds	(b) Funds and other accounts		
1	Total number at end of year	()				
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisors in v	vriting that the assets he	ld in donor advised fur	nds		
_	are the organization's property, subject to the organization's	-				
6	Did the organization inform all grantees, donors, and donor ad					
_	for charitable purposes and not for the benefit of the donor or					
	impermissible private benefit?	*				
Par						
1	Purpose(s) of conservation easements held by the organization					
	Preservation of land for public use (for example, recreat	tion or education)	Preservation of a his	torically important land area		
	Protection of natural habitat		Preservation of a cer	tified historic structure		
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribu	ution in the form of a c	onservation easement on the last		
	day of the tax year.			Held at the End of the Tax Year		
а	Total number of conservation easements			2a		
b				2b		
С	Number of conservation easements on a certified historic stru	ıcture included in (a)		2c		
d	Number of conservation easements included in (c) acquired a	fter July 25,2006, and no	ot on a			
	historic structure listed in the National Register			2d		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or to	erminated by the orgar	nization during the tax		
	year					
4	Number of states where property subject to conservation eas					
5	Does the organization have a written policy regarding the peri		ion, handling of			
	violations, and enforcement of the conservation easements it					
6	Staff and volunteer hours devoted to monitoring, inspecting, I	nandling of violations, an	d enforcing conservati	ion easements during the year		
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and on	forcing consonyation of	asamants during the year		
′	Amount of expenses incurred in monitoring, inspecting, name	iilig or violations, and en	ording conservation ea	asements during the year		
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirement	s of section 170(h)(4)(F	3)(i)		
_	and section 170(h)(4)(B)(ii)?					
9	In Part XIII, describe how the organization reports conservation					
	balance sheet, and include, if applicable, the text of the footn					
	organization's accounting for conservation easements.	J				
Par	t III Organizations Maintaining Collections of	Art, Historical Trea	asures, or Other	Similar Assets.		
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.				
1a	If the organization elected, as permitted under FASB ASC 958	8, not to report in its reve	enue statement and ba	lance sheet works		
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education,	or research in furthera	ance of public		
	service, provide in Part XIII the text of the footnote to its financial statements that describes these items.					
b	b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of					
	art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,					
	provide the following amounts relating to these items:					
	(i) Revenue included on Form 990, Part VIII, line 1					
2	If the organization received or held works of art, historical treatments		·			
	the following amounts required to be reported under FASB AS	SC 958 relating to these	items:			
а	Revenue included on Form 990, Part VIII, line 1			\$		
LHA	For Paperwork Reduction Act Notice, see the Instructions	for Form 990.		Schedule D (Form 990) 2022		

	t III Organizations Maintaining Col						Similar A		<u> </u>	Page Z
	•								(CONTINU	<u>iea)</u>
3	Using the organization's acquisition, accession	, and other record	s, check	any or the	iollowing that	t make sigi	illicant use	OFILS		
	collection items (check all that apply):		. —		L					
a	Public exhibition	d			change progra					
b	Scholarly research	е	• 🗀	Other						
С	Preservation for future generations									
4	Provide a description of the organization's colle							in Part 2	XIII.	
5	During the year, did the organization solicit or r								٦	
Dos	to be sold to raise funds rather than to be main								Yes	No
Par	t IV Escrow and Custodial Arrange		ete if the	organizatio	n answered	"Yes" on F	orm 990, P	art IV, I	ine 9, or	
_	reported an amount on Form 990, Part X									
па	Is the organization an agent, trustee, custodian								٦.,	
	on Form 990, Part X?							L	Yes	∟ No
b	If "Yes," explain the arrangement in Part XIII an	d complete the fol	llowing t	able:					Amount	
									Amount	
	Beginning balance						1c			
	Additions during the year						1d			
_	Distributions during the year						1e			
f	Ending balance						1f		7	
	Did the organization include an amount on Form					•	?	🖵	Yes	∐ No
Par	If "Yes," explain the arrangement in Part XIII. C									
Fai	oompiete ii t							o book	(a) Four	roore book
		(a) Current year	(D) F	rior year	(c) Two yea	is back (C	I) Three year	S Dack	(e) Four y	ears back
	Contributions									
	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the curren	•	e (line 1g	g, column (a)) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С	Term endowment%									
	The percentages on lines 2a, 2b, and 2c should	d equal 100%.								
За	Are there endowment funds not in the possess	ion of the organiza	ation tha	t are held ar	nd administer	red for the			_	
	organization by:								<u>'</u>	res No
	(i) Unrelated organizations								3a(i)	
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization								3b	
4	Describe in Part XIII the intended uses of the or	ganization's endo	wment f	unds.						
Par	t VI Land, Buildings, and Equipme									
	Complete if the organization answered									
	Description of property	(a) Cost or o			t or other		umulated		(d) Book	value
		basis (investr	nent)	basis	(other)	depr	eciation			
	Land									
	Buildings									
	Leasehold improvements	I			F 400		4 44 4			005
	Equipment			4	5,498.	ļ .	4,411		$\frac{1}{2}$,087.
	Other				8,750.		16,176		2	,574.
<u>Total</u>	. Add lines 1a through 1e. (Column (d) must equ	al Form 990. Part	X. colun	nn (B). line 1	0c.)				3	,661.

Schedule D (Form 990) 2022

Schedule D (Form 990) 2022 CLIMATE SCI	ENCE LEGAL DE	FENSE FUND 4'	7-1941171 Page 3
Part VII Investments - Other Securities.			· rago
Complete if the organization answered "Yes"	_		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(G) (H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or er	nd-of-year market value
(1)			· ·
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		11d. See Form 990, Part X, line 15.	T
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			+
<u>(6)</u>			_
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15)		
Part X Other Liabilities.	= 15.)		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	5.
1. (a) Description of liability		, ,	(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
 >			1

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the

Schedule D (Form 990) 2022

(8) (9)

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

Sche	dule D (Form 990) 2022 CLIMATE SCIENCE LEGAL DEFE	INSE FUN	D	47-19	9411/1 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With R	levenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a			
1	Total revenue, gains, and other support per audited financial statements			1	554,326.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1			
а	Net unrealized gains (losses) on investments		25 605	-	
b	Donated services and use of facilities		35,695.	-	
C	Recoveries of prior year grants			-	
d	, , , , , , , , , , , , , , , , , , , ,	·		-	35,695.
е 3	Add lines 2a through 2d			2e 3	518,631.
4	Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			3	310,031.
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIII.)			-	
	Add lines 4a and 4b			4c	0.
					518,631.
Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) † XII Reconciliation of Expenses per Audited Financial Statem	nents With	Expenses per F	Return.	•
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.			
1	Total expenses and losses per audited financial statements			1	402,406.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	35,695.		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	35,695.
3	Subtract line 2e from line 1			3	366,711.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1			
	Investment expenses not included on Form 990, Part VIII, line 7b			-	
	Other (Describe in Part XIII.)				0
_	Add lines 4a and 4b			4c	0. 366,711.
5 Da	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) † XIII Supplemental Information.			5	300,711.
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add			, rait A, i	III 6 2, Fait AI,

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022
Open to Public Inspection

Name of the organization

CLIMATE SCIENCE LEGAL DEFENSE FUND

Employer identification number 47-1941171

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

THE CLIMATE SCIENCE LEGAL DEFENSE FUND PROVIDES LEGAL ASSISTANCE TO

CLIMATE RESEARCHERS, EXPERTS, AND INSTITUTIONS FACING CHALLENGES BY

POLITICALLY AND IDEOLOGICALLY MOTIVATED GROUPS.

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

THE CLIMATE SCIENCE LEGAL DEFENSE FUND (CSLDF) PROTECTS THE SCIENTIFIC

ENDEAVOR BY PUTTING OUR LEGAL EXPERTISE TO WORK FOR SCIENTISTS WHO ARE

THREATENED OR SILENCED FOR DOING THEIR JOBS. OUR EFFORTS AND

EDUCATIONAL RESOURCES PRESERVE AND EXPAND SCIENTISTS' RIGHTS AND

STRENGTHEN LEGAL PROTECTIONS TO PROMOTE SCIENTIFIC INTEGRITY.

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

THE PREPARED FORM 990 IS REVIEWED BY THE ORGANIZATION'S GOVERNING BODY BEFORE THE RETURN IS FILED WITH THE IRS.

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

ANNUALLY ALL DIRECTORS AND OFFICERS COMPLETE AND SIGN A STATEMENT THAT

PROVIDES INFORMATION REGARDING THEIR INTERESTS AND THOSE OF THEIR FAMILY

MEMBERS THAT COULD GIVE RISE TO CONFLICTS. THE MEMBERS OF THE GOVERNING

BODY MAKE DETERMINATIONS OF WHETHER A CONFLICT EXISTS AND REVIEW ACTUAL

CONFLICTS. ANY PERSON WITH A CONFLICT IS PROHIBITED FROM PARTICIPATING IN

THE GOVERNING BODY'S DELIBERATIONS AND DECISIONS IN THE TRANSACTION.

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

COMPENSATION FOR MANAGEMENT PERSONNEL IS COMPARED TO THE INDUSTRY STANDARDS

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

Schedule O (Form 990) 2022

232211 10-28-22

Schedule O (Form 990) 2022 Page 2

Name of the organization **Employer identification number** CLIMATE SCIENCE LEGAL DEFENSE FUND 47-1941171 OF SIMILAR ORGANIZATION'S UPON FIRST HIRING. ALL SUBSEQUENT RAISES ARE REVIEWED AND APPROVED BY THE BOARD OF DIRECTORS. THE BOARD INCORPORATES THE OVERALL FINANCIAL HEALTH OF THE ORGANIZATION INTO THEIR DECISION MAKING. FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MADE ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART IX, LINE 11G, OTHER FEES: CONSULTANTS: PROGRAM SERVICE EXPENSES 26,722. MANAGEMENT AND GENERAL EXPENSES 22,794. FUNDRAISING EXPENSES 29,668. TOTAL EXPENSES 79,184. PAYROLL PROCESSING FEES: PROGRAM SERVICE EXPENSES 13,307. MANAGEMENT AND GENERAL EXPENSES FUNDRAISING EXPENSES TOTAL EXPENSES 13,307. 92,491. TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A FORM 990, PART V, LINE 2A, PROFESSIONAL EMPLOYMENT ORGANIZATION CLIMATE SCIENCE MAINTAINS A CO-EMPLOYMENT AGREEMENT WITH TRINET, A PROFESSIONAL EMPLOYER ORGANIZATION (PEO), PROVIDING OUTSOURCED HUMAN RESOURCES AND EMPLOYER SERVICES. IN THIS ARRANGEMENT, THE EMPLOYEES ARE CONSIDERED COMMON LAW EMPLOYEES OF CLIMATE SCIENCE, HOWEVER, TRINET IS THE EMPLOYER OF RECORD, PAYROLL, BENEFITS, AND OTHER FUNCTIONS

Schedule O (Form 990) 2022	Page 2
Name of the organization CLIMATE SCIENCE LEGAL DEFENSE FUND	Employer identification number 47-1941171
INVOLVING EMPLOYER-RELATED ADMINISTRATION.	