# Form **990**

**Return of Organization Exempt From Income Tax** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Α	For the	he 2023 calen	dar year, or tax y	year begir	nning		, 20	023, ar	ıd endir	ıg		, 2	20		
В	Check	if applicable:	С								D Employ	er identifi	cation number		
	Ad	ddress change	PROJECT DR	RAWDOWN	J						38-	37054	48		
		-	428 MINNES								E Telepho				
		ame change	ST. PAUL,								·				
	In	itial return	01. 11101,	M 551	.01						651	-243-	3116		
	Fir	nal return/terminated													
	ıΑ	mended return									<b>G</b> Gross r	eceipts \$	5,284,	184.	
	Αı	oplication pending	F Name and addre	ss of principa	al officer: To	ONATHAN E	7∩I FV			H(a) Is this	a group retur	n for subo		X No	
	ш .		SAME AS C		Ü	ONATHAN I	ОПГІ			H(b) Are all	l subordinates " attach a list	included?	Yes	No	
$\overline{}$	Tav	exempt status:	X 501(c)(3)	501(c) (	١	(insert no.)	4947(a)(	1) or	527	. If "No,	" attach a list	. See instr	uctions.		
÷		•			,	(IIISCIT IIU.)	4347 (a)(	1) 01	JLI						
J			W.DRAWDOWN	1 1	1	-1-1		1.		. ,	exemption nu				
K		n of organization:	X Corporation	Trust	Association	n Other		L Yea	r of format	ion: 200	5 M S	State of leg	gal domicile: CA		
Pa	ırt I	Summar	У												
	1	Briefly descri	be the organizat	ion's miss	sion or mos	st significant	activities:	SEE	SCHE	DULE O					
a															
Governance															
Ĕ															
Š	2	Check this bo	ox if the o	organizatio	on disconti	nued its oper	ations or o	dispose	ed of mo	ore than 2	25% of its	net asse	 ets.		
త	3	Number of vo	oting members of									3		7	
-ფ	4	Number of in	dependent voting	g member	s of the go	overning body	/ (Part VI,	line 1	b)			4		7	
<u>ië</u>	5	Total number	of individuals er	mployed i	n calendar	year 2023 (F	Part V, line	e 2a)				5		29	
ž	6	Total number	of volunteers (e	estimate if	necessary	y)						6		0	
Activities &	7a	Total unrelate	ed business reve	nue from	Part VIII,	column (C), li	ine 12					7a		0.	
_	b	Net unrelated	d business taxabl	le income	from Forn	n 990-T. Part	I, line 11.					7b		0.	
							,				rior Year	1	Current Ye		
	8	Contributions	and grants (Par	t VIII. line	• 1h)						3,246,0	109	4,722		
ne	9		vice revenue (Pa								360,0			,000.	
en	10		ncome (Part VIII,									270.		,411.	
Revenue	11		e (Part VIII, colu												
_	12		e (Fart VIII, cold e – add lines 8 t								48,9			<u>, 955.</u>	
											3,658,2	202.	5,275	,4/2.	
	13		imilar amounts p	•			-								
	14	•	to or for member	-											
s,	15	Salaries, other	er compensation	, employe	e benefits	(Part IX, colu	umn (A), li	ines 5-	10)	. 3	3,155,8	373.	3,689,	,021.	
Expenses	16a	Professional	fundraising fees	(Part IX,	column (A	), line 11e)									
þe	b	Total fundrais	sing expenses (F	Part IX. co	lumn (D).	line 25)		353	,775.						
X	17										1 (15 )	1.6	1 200	0.60	
	17		ses (Part IX, colu								1,615,3		1,392,		
	18		es. Add lines 13-	-	•			•			4,771,2		5,081		
	19	Revenue less	expenses. Subt	tract line 1	18 from lin	e 12				1	1,113,0	)17.	194,	,389.	
9 9											ng of Currer		End of Ye	ar	
sets alan	20		(Part X, line 16).							. 3	3,757,1		4,623,	,077.	
A B	21	Total liabilitie	es (Part X, line 2	6)							183,0	)35.	205,	,607.	
Net Assets Fund Balano	22	Net assets or	fund balances.	Subtract I	ine 21 fror	m line 20					3,574,0	188.	4,417	470.	
	rt II	Signatur								`	3,0,1,0	,,,,	1,11,	1701	
				nined this ret	urn including	accompanying co	hadulas and a	ctatemer	te and to	the best of n	ny knowledge	and halief	it is true correct	and	
com	plete. D	eclaration of prepa	eclare that I have exan arer (other than officer) an A. Foley	) is based on	all informatio	on of which prepar	er has any kn	nowledge	. and to	the pest of h	ily kilowieuge	and belief	, it is true, correct	anu	
		Jonathan A. Foley (	AN A. TOLOY Nov 13, 2024 12:58 CST)								Nov 13,	<del>2024</del>			
c:		Signature of								Date	•				
Sig He	gn	-							-		D.T.	попот	_		
пе	re		HAN FOLEY						<u> </u>	EXECUT	IVE DIF	RECTOR	₹		
			t name and title		1_						T =	-I I			
		Print/Type p	oreparer's name		Preparer's	signature Inny Ch	66		ate 11151	2024	Check	<u></u> ''	TIN		
Pa	id	BUNNY	CHUAH		Du	nny N	wan		11/5/2	2024	self-employ	ed P	00185436		
	epare	er Firm's name	CHUAH	PUENTE	S LLP	0						•			
Us	e On	ily Firm's addre		CHUAH PUENTES LLP 0 6360 CLARK AVENUE								Firm's EIN 27-1795561			
			DUBLIN								Phone no.		803-2988		
Ma	v tha	IRS discuss th	nis return with the			nove? See inc	structions				i none no.	JZJ-(	X Yes	No	
ivid	y ui⊏ l	11 VO UISCUSS [[	no return with the	c prepare	i siiuvvii al	70 AC: OCC 1115	on uctivi is .						1 L 2	INO	

Par	t III	Statement of Program Service Accomplishments  Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefl	/ describe the organization's mission:		<u>A</u>
		SCHEDULE O		
2		e organization undertake any significant program services during the year which were not listed on the prior		
			Yes X	No
		s," describe these new services on Schedule O.		
3			Yes X	No
_		s," describe these changes on Schedule O.		
4	Section	ibe the organization's program service accomplishments for each of its three largest program services, as measured on 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the to evenue, if any, for each program service reported.	tal expen	nses. ses,
4a	(Code	::) (Expenses \$1,282,648. including grants of \$) (Revenue \$		)
	<u>SEE</u>	SCHEDULE O		
4b	(Code	: ) (Expenses \$ 871,484. including grants of \$ ) (Revenue \$		)
		SCHEDULE O		
	(0	\(\tau_{\text{\tint{\text{\tint{\text{\tin}\text{\text{\text{\text{\text{\text{\text{\text{\text{\ti}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tin}\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tin}\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tin}\tint{\text{\tin}\text{\text{\text{\text{\text{\text{\text{\tex{\tex		
	(Code			
	SEE_	SCHEDULE O		
4d		program services (Describe on Schedule O.)  SEE SCHEDULE O		
	(Ехре		)	
4e	Total	program service expenses 3.885.050		

# Form 990 (2023) PROJECT DRAWDOWN Part IV Checklist of Required Schedules

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

# Form 990 (2023) PROJECT DRAWDOWN Part IV Checklist of Required Schedules (continued)

Check if Schedule O contains a response or note to any line in this Part V.  Yes  1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable				Yes	No
and former officers, directors, fusites, key employees, and highest compensated employees? If "Yes," complete Schedule X, If "Yes," complete Schedule X, If "Yes," complete Schedule X, If "Yes," or livine Zsa.  2a Dd the organization invest a lax-exempt bond issue with an outstanding principal amount of more than \$100.000 as of the last day of the year, that was issued affer December 31, 2002? If "Yes," answer lines 28th through 28d and complete Schedule X, If "Yes," or livine Zsa.  2b Dd the organization mineral amount of the repair and secretary tax-exempt bonds?  2c Dd the organization maintain an escrow account other than a refunding escrow at any time during the year?  2d Dd Id the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  2d Dd Id the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  2d Section 501(X5), 501(X6), 400 (X6), 501(X6), 700 (X6), 700 (X	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22		Х
complete Schedule K. If "No." por for ine 25a.  24a b Did the organization mises any proceeds of fax-exempt bonds beyond a temporary period exception?.  24b c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any to receive bonds?.  25c Section 501(x)(3), 501(x)(4), and 501(x)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "res," complete Schedule L. Part I.  25a b Ib is the organization avaire that it engaged in an excess benefit transaction with a disqualified person during the year? If "res," complete Schedule L. Part I.  25b b Ib the organization avaire that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the fransaction has not been reported on any of the organization sprior forms 90 or 990-272 If "res," complete Schedule L. Part II.  25b Did the organization provide a grant or Part X. Jine 5 or 22, for receivables from or payables to any current or former officer, director, fusites, key employee, creator or founders, substantial contributor, or 95% confolled entity or family member of any of these persons? If "res," complete Schedule L. Part III.  26c Did the organization provide a grant or other assistance to any current or former officer, director, fusites, experimently or the septembers, or to a 35% controlled entity (including an employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof, a grant selection committee employee. Schedule L. Part III.  27 but the organization a party to a business transaction with one of the following parties? (See the Schedule L. Part IIV.  28 Was the organization or former officer, director, fusitee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L. Part IV.  28 b A family member of a	23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23	Х	
c 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 Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d Did the organization with a disqualified person during the year?  25a Section 501(x)3, 501(x)43, and 501(x)43, and 501(x)29 organizations. Did the organization expect in a prior year, and the transaction with a disqualified person in a prior year, and that the financion has not been reported on any of the organization prior Forms 90 or 990-E27 if "Yes," complete Schedule L, Part I.  25b Did the organization provide a grant or Part X. Line 5 or 22, for reservables from or psychiets to any current or former officer, director, fusele, key employee, creator or hounder, substantial committation or 35% confrolled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III.  25 Did the organization provide a grant or other assistance to any current or former officer, director, fusele, substantial contributor or employee thereof a grant selection committee member, or to a 35% controlled entity (including an employee thereof a grant selection committee member, or to a 35% controlled entity (including an employee thereof or family member of any of these persons? If "Yes," complete Schedule L, Part III.  27 Did the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV.  28 Was the organization of circetor, fuseles, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.  28 Did the organization of contributions of conditions, and exceptions, and the part IV.  29 Did the organization sele, exchange, dispose of an instortical trea	24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.	24a		Х
any tax-exempt bonds?  42d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  24d d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?  25a Section 501(c/X3), 501(c/X4), and 501(c/X29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.  25b 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 organizations prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part II.  25c 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 III.  26 Did the organization are post against or the rassistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity (or to a 35% controlled entity (or land) and the properties of the properties of the organization or evaluation and the properties of the organization organization organization and the properties of the properties	b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
25a Section 501 (c/X3), 501 (c/X4), and 501 (c/X29) 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 b Is the organization naver that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction is not been reported on any of the organization provided adults of 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 contribution, or 35% controlled entity (not a 35% controlled entity (not as 35% controlled entity (not called a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contribution or any current or former officer, director, trustee, key employee, creator or founder, substantial contribution or any current or former officer, director, trustee, key employee thereof, a grant selection committee member, or to a 35% controlled entity (noticing an employee thereof) or any current or former officer, director, trustee, key employee thereof or former officer, director, trustee, key employee thereof or founder, a grant selection committee member of any individual described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.  28a b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.  28b b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.  28c complete Schedule L, Part IV.  28d b A family member of any individual described in line 28a or 28b? If "Yes," complete Schedule N, Part II.  31 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation or or orditobulors? If "Yes," complete Schedule N, Part II.  32 Did the		any tax-exempt bonds?	24c		
transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.  25 b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the fransaction has not been reported on any of the organization's prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part II.  25 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 III.  26 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.  27 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable fling thresholds, conditions, and exceptions).  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.  28 b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.  28 b C 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.  28 c C A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule N, Part IV.  29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule N, Part IV.  30 Did the organization injuridate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part IV.  31 Did the organization on II "Ose of	d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
that the fransaction has not been reported on any of the organizations prior Forms 990 or 990-E27 if "Yes," complete Schedule L, Part I.  25b   27c	25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.	25a		X
former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% confrolled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II.  26   27   Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part IV, instructions for applicable filling thresholds, conditions, and exceptions).  27   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 filling thresholds, conditions, and exceptions).  28   A armily member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.  28   Zeb   C   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.  29   Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M.  29   20   Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M. Part I   31   31   32   Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I   32   Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part I   32   33   Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-3? If "Yes," complete Schedule R, Part V, line 2   33   Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part V, line 2   35   Did	b	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Ye's," complete	25b		Х
employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.  28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).  a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV.  28a  b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV.  28b  c 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.  29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M.  29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M.  30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, Part I.  31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I.  31 Did the organization one one one of transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.  31 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.  32 Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.  33 Did the organization organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.  34 Did the organization conduct more		former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
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33   34   Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, Iine 1.   34   35a   3	32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.	32		Х
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	С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
166 AHTHUR 1987 X 7X	D A A	(gambling) winnings to prize winners?		000	2022

Form 990 (2023) PROJECT DRAWDOWN

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

			res	NO
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 29			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Χ
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation on Schedule 0.</i>	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		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		Χ
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Χ
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization 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
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
	If "Yes," indicate the number of Forms 8282 filed during the year			37
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Λ
Ĭ	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	134		
h	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			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O.</i>	14b	<u> </u>	
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
. •	excess parachute payment(s) during the year?	15		Х
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?  If "Yes," complete Form 4720, Schedule O.	16	_	Х
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.			

Form 990 (2023) PROJECT DRAWDOWN 38-3705448 Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year..... If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent..... 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 5 Χ Did the organization have members or stockholders?..... 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7h Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... X 8a X **b** Each committee with authority to act on behalf of the governing body?..... 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O..... 9 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10a Did the organization have local chapters, branches, or affiliates?..... 10a Χ b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. Χ 12a Did the organization have a written conflict of interest policy? If "No," go to line 13....... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... **c** Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe on Schedule O how this was done* ... .SEE .SCHEDULE . O ...... Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X a The organization's CEO, Executive Director, or top management official...... 15a **b** Other officers or key employees of the organization..... 15b X If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a X 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 16b organization's exempt status with respect to such arrangements?... Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply X Upon request Own website Another's website Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. SEE SCHEDULE O State the name, address, and telephone number of the person who possesses the organization's books and records.

SUITE 500 ST. PAUL MN 55101 651-243-3116

ANNE MARSHALL 428 MINNESOTA STREET

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

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

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

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

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

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

				(0	;)					
(A)	(B)				more	than on		(D)	(E)	(F)
Name and title	Average	offic	or on	dàd		is both a or/trustee	e)	Reportable compensation from	Reportable compensation from	Estimated amount of other
	hours per week (list any	Indi or c	Inst	Officer	Ke)	Hig	Former	the organization (W-2/1099-	related organizations (W-2/1099-	compensation from the organization
	hours for related	Individual t or director	ituti	cer	'em	Highest c employee	mer Ter	MISC/1099-NEC)	MISC/1099-NEC)	and related organizations
	organiza- tions	ial to tor	ona		Key employee	e con				
	below dotted	uste	trus		ee	per				
	line)	Individual trustee or director	itee			Highest compensated employee				
(1) JONATHAN FOLEY	40					a				
EXECUTIVE DIR.	0			Χ				423,932.	0.	0.
(2) ELIZABETH BAGLEY	40							- ,		
MANAGING DIR.	0			Χ				217,647.	0.	0.
(3) TODD REUBOLD	40							•		
MARKETING DIR	0			Χ				183,780.	0.	0.
(4) JAMIE ALEXANDER	40									
DRAWDOWN LABS	0			Χ				175,000.	0.	0.
(5) MATTHEW SCOTT	40									_
DIRECTOR	0			Χ				160,042.	0.	0.
(6) RESHMA PATTNI	40									
OPERATIONS DIR	0			Χ				159,426.	0.	0.
(7) BRADLEY PALMER	1									
CHAIRMAN	0	Χ						0.	0.	0.
(8) JENNIFER CALDWELL	1									
SECRETARY	0	Χ						0.	0.	0.
(9) STEPHEN NICOLEAU	1									
PRESIDENT	0	Χ						0.	0.	0.
(10) JONATHAN WOETZAL	1									
DIRECTOR	0	Χ						0.	0.	0.
(11) LAURA SEYDEL	1									
DIRECTOR	0	Χ						0.	0.	0.
(12) ANGELA MWANZA	0									
DIRECTOR	0	Χ						0.	0.	0.
(13) PEGGY LIU	1							_	_	_
DIRECTOR	0	X						0.	0.	0.
(14) KRISTALL LAURSEN	40							_	_	_
DEVELOPMENT DIR	0			Χ				0.	0.	0.

. u	t VII   Section A. Officers, Directors, Tru	13(003, 1	Ney			Dye C)	es, a	and	a nignest Con	ipensated Empi	oyees	(contii	nued)
	(A) Name and title	(B) Average hours	box, offic	unles er and	Posi leck i s pei d a d	ition more rson i irecto	than o s both r/truste	an ee)	(D)  Reportable compensation from the organization	(E)  Reportable compensation from related organizations	0	(F)  Ited amount of other insation to	
		per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W- <u>2</u> /1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	the or	rganizati ganizati related inization	ion I
	KRISTEN PATTERSON DRAWDWN LIFT	$-\frac{40}{0}$			Х				0.	0.			0.
(16)			-										
(17)													
(18)													
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
	Subtotal									0.			0.
	Total from continuation sheets to Part VII, Section Total (add lines 1b and 1c)									0.			0.
	Total number of individuals (including but not limited from the organization 6										ensation	1	0.
	0											Yes	No
3	Did the organization list any <b>former</b> officer, direct on line 1a? <i>If "Yes,"complete Schedule J for sucl</i>	tor, truste h <i>individu</i>	e, ke <i>al</i>	ey er	nplo	oyee	e, or	high	nest compensated	employee	. 3		X
4	For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	r than \$1	50,0	00?	If "\	Yes,	" con	nple	ete Schedule J for	•	4	Х	
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes	e compen	satio	n fro	om :	anv	unre	late	d organization or	individual			X
	tion B. Independent Contractors												
	Complete this table for your five highest compens compensation from the organization. Report compensation	sated indessation for	epen the c	dent alend	cor dar <u>y</u>	ntrad year	ctors endi	tha ng w	t received more to vith or within the or	nan \$100,000 of ganization's tax year			
	(A) Name and business addr	ess							Description (	of services	Compe	<b>:)</b> nsatio	n
2	Total number of independent contractors (including b \$100,000 of compensation from the organization	ut not limi 0	ited to	o tho	se I	isted	d abo	ve) v	who received more	than			

		Check if Schedule O contains a resp	oonse or note to any	y line in this Part VI	11		
				<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
fts, Grants, r Amounts	1a b c	Federated campaigns1aMembership dues1bFundraising events1cRelated organizations1d					
Contributions, Gifts, Grants, and Other Similar Amounts	e f	Government grants (contributions) 1e  All other contributions, gifts, grants, and similar amounts not included above 1f  Noncash contributions included in	4,722,106.				
Contra	h	lines 1a-1f.         1g           Total. Add lines 1a-1f.		4,722,106.			
ne	2-	DDOGDAY FFFG	Business Code		222 222		
Program Service Revenue	2a b c	PROGRAM FEES		392,000.	392,000.		
m Serv	d e						
ogra	f	All other program service revenue					
ď	д 3	<b>Total.</b> Add lines 2a-2f		392,000.			
	4	other similar amounts)	t bond proceeds	104,049.	104,049.		
	5	Royalties	(ii) Personal				
		Gross rents 6a					
		Less: rental expenses 6b  Rental income or (loss) 6c					
		Net rental income or (loss)					
	7a	Gross amount from (i) Securities	(ii) Other				
		sales of assets other than inventory 7a	7,074.				
	b	Less: cost or other basis and sales expenses 7b	8,712.				
		Gain or (loss)	-1,638.				
		Net gain or (loss)		-1,638.	-1,638.		
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c).  See Part IV, line 18					
er	b	<b>⊢</b>	b				
ਰੋ	С	Net income or (loss) from fundraising	events				
		·	а				
		Less: direct expenses 9  Net income or (loss) from gaming acti	-				
		Gross sales of inventory, less returns and allowances					
		Less: cost of goods sold					
		Net income or (loss) from sales of inve					
S	11-	DOM'S LIMIT	Business Code	50.040	F0 010		
ge g	ı ıa b	ROYALTY OTHER INCOME		58,243. 712.	58,243. 712.		
Miscellaneous Revenue	С	OTHER THOOME		112.	/12.		
<u> </u>	_	All other revenue					
		Total. Add lines 11a-11d		58,955.			
	12	<b>Total revenue.</b> See instructions		5.275.472	553.366	0 .	0.

### Part IX Statement of Functional Expenses

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

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX. (C) (D) Do not include amounts reported on lines Total expenses Program service Management and Fundráising 6b, 7b, 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21..... Grants and other assistance to domestic individuals. See Part IV, line 22 ..... Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Compensation of current officers, directors, trustees, and key employees ...... 1,354,263 792,040 427,473 134,750. Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)...... 0 0 0 0. 1,711,839 49,725 1,538,787 123,327. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)..... 146,561 107,320 25,343 13,898. 267,817 195,697 42,202 29,918. 10 208,541 32,743 17,981. 157,817. Fees for services (nonemployees): c Accounting..... **d** Lobbying..... e Professional fundraising services. See Part IV, line 17... Other. (If line 11g amount exceeds 10% of line 25, column 107,103. 107,103. (A), amount, list line 11g expenses on Schedule 0.) . . . . 12 Advertising and promotion..... 693,037. 693,037. 13 64,164 23,892 2,792 37,480 Information technology..... 14 15 Royalties..... 613. 613. 17 130,050. 76,039 43,962 10,049. Payments of travel or entertainment expenses for any federal, state, or local public officials..... Conferences, conventions, and meetings.... 19 21 Payments to affiliates..... Depreciation, depletion, and amortization.... 5,886. 5,886. 23 13,660. 13,660. Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.).... COMMUNICATIONS \_ 180,600 176,600 4,000 b IT & WEBSITE 114,422 68,320 25,680 20,422. c TRAINING 27,712 3,718 23,925 69. RESEARCH\_ 25,999 25,999 28,816 25,784. 2,463 569. e All other expenses..... 25 Total functional expenses. Add lines 1 through 24e. . . 5,081,083. 3,885,050 842,258 353. 775. Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. if following Check here

		Check if Schedule O contains a response or note to	any lin	e in this Part X	<u></u>	<u></u>	· · · · · · · · · · · · · · · · · · ·
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash — non-interest-bearing			3,346,418.	1	458,430.
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			301,100.	3	230,250.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these pe	er office I contribi rsons	r, director, utor, or 35%		5	
	6	Loans and other receivables from other disqualified p		-			
	0	section 4958(f)(1)), and persons described in section				6	
	7	Notes and loans receivable, net	` '	` ´ ` ´		7	
Ø	8	Inventories for sale or use		<u></u>		8	
set	9	Prepaid expenses and deferred charges		<b>-</b>		9	
Assets	_		1 1			9	
,		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		32,949.			
	b	Less: accumulated depreciation		10,313.	21,700.	10c	22,636.
	11	Investments — publicly traded securities		-		11	3,808,631.
	12	Investments — other securities. See Part IV, line 11		-	44,085.	12	44,085.
	13	Investments — program-related. See Part IV, line 11.				13	
	14	Intangible assets				14	50,000.
	15	Other assets. See Part IV, line 11		<del>-</del>	43,820.	15	9,045.
	16	Total assets. Add lines 1 through 15 (must equal line	33)		3,757,123.	16	4,623,077.
	17	Accounts payable and accrued expenses			183,035.	17	205,607.
	18	Grants payable		<u> </u>		18	
	19	Deferred revenue		<u> </u>		19	
	20	Tax-exempt bond liabilities				20	
ē	21	Escrow or custodial account liability. Complete Part I		L		21	
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribu- controlled entity or family member of any of these pe	utor, or 3	35%		22	
-4	23	Secured mortgages and notes payable to unrelated the		<u> </u>		23	
	24	Unsecured notes and loans payable to unrelated third	parties.			24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	es to rela plete Pa	ated third parties, art X of Schedule D.		25	
	26	Total liabilities. Add lines 17 through 25			183,035.	26	205,607.
ıces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	•	X			
ā	27	Net assets without donor restrictions			2,790,080.	27	2,744,264.
ã	28	Net assets with donor restrictions			784,008.	28	1,673,206.
P		Organizations that do not follow FASB ASC 958, che	ck here		,		
2		and complete lines 29 through 33.					
Net Assets or Fund Balance	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or equipment	nent fund	d		30	
SS	31	Retained earnings, endowment, accumulated income,	, or othe	r funds		31	
14 4	32	Total net assets or fund balances			3,574,088.	32	4,417,470.
ž	33	Total liabilities and net assets/fund balances			3,757,123.	33	4,623,077.
RΔ	Δ		TEEA0111	L 08/23/23	•		Form <b>990</b> (2023)

Form **990** (2023)

	( ) 11100201 21211120111	0.001			<u> </u>
Par	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI.				
1	Total revenue (must equal Part VIII, column (A), line 12)		5,2	75,4	172.
2	Total expenses (must equal Part IX, column (A), line 25)	2	5,0	81,0	)83.
3	Revenue less expenses. Subtract line 2 from line 1	_	1	94,3	389.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,5	74,0	)88.
5	Net unrealized gains (losses) on investments.	5			
6	Donated services and use of facilities	6	6	48,9	93.
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	4,4	17,4	<u> 170.</u>
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain				
	on Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review	ved on a			
	separate basis, consolidated basis, or both.				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a sepa	rate			
	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 aud review, or compilation of its financial statements and selection of an independent accountant?	it,	2-		Х
			2c		Λ
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
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 au				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
BAA	TEEA0112L 08/23/23		Form	990	(2023)

### SCHEDULE A (Form 990)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public

Inspection

Name of the organization Employer identification number 38-3705448 PROJECT DRAWDOWN Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. 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). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 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 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 12 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 ..... **q** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (ii) EIN (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E) Total

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

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

Sec	tion A. Public Support		<u> </u>	<u>·</u>						
	ndar year (or fiscal year nning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	<b>(c)</b> 2021	(d) 2022	<b>(e)</b> 2023	(f) Total			
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	1,763,943.	5,284,736.	3,919,932.	3,246,009.	4,722,106.	18,936,726.			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.			
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.			
4	Total. Add lines 1 through 3	1,763,943.	5,284,736.	3,919,932.	3,246,009.	4,722,106.	18,936,726.			
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)						0.			
6	<b>Public support.</b> Subtract line 5 from line 4						18,936,726.			
Sec	tion B. Total Support									
Cale begi	ndar year (or fiscal year nning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	<b>(c)</b> 2021	(d) 2022	<b>(e)</b> 2023	<b>(f)</b> Total			
7	Amounts from line 4	1,763,943.	5,284,736.	3,919,932.	3,246,009.	4,722,106.	18,936,726.			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources				3,270.	102,411.	105,681.			
9	Net income from unrelated business activities, whether or not the business is regularly carried on				,	,	0.			
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI	35,420.	75,559.	38,945.	48,923.	58,955.	257,802.			
	Total support. Add lines 7 through 10						19,300,209.			
12	Gross receipts from related activ	vities, etc. (see ins	structions)				0.			
13	First 5 years. If the Form 990 is organization, check this box and	for the organization	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)				
Sec	tion C. Computation of Pu	blic Support P	ercentage							
14	Public support percentage for 20	023 (line 6, colum	n (f), divided by li	ne 11, column (f)	)	14	98.12%			
15	Public support percentage from	2022 Schedule A,	Part II, line 14			15	98.51 %			
16a	<b>33-1/3% support test—2023.</b> If to and <b>stop here.</b> The organization	he organization di qualifies as a pul	id not check the bolicly supported o	oox on line 13, an rganization	d line 14 is 33-1/3	3% or more, check	k this box			
b	<b>33-1/3% support test—2022.</b> If the and <b>stop here.</b> The organization	ne organization did n qualifies as a pu	d not check a box blicly supported c	on line 13 or 16a organization	a, and line 15 is 3	3-1/3% or more, o	check this box			
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	test, check this	box and stop here	e. Explain in Part	VI how			
	<b>10%-facts-and-circumstances test—2022.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization									
18	Private foundation. If the organization	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see ins	structions			

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.)

Sec	tion A. Public Support							
Calen	dar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	<b>(c)</b> 2021	(d) 2022	<b>(e)</b> 2023	3	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.").							
2	Gross receipts from admissions, merchandise sold or services 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 organization'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							
	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.							
С	Add lines 7a and 7b							
	<b>Public support.</b> (Subtract line 7c from line 6.)							
Sec	tion B. Total Support				<del>-</del>			
Calen	dar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	<b>(c)</b> 2021	<b>(d)</b> 2022	<b>(e)</b> 2023	3	(f) Total
	Amounts from line 6							
	similar sources. 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							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)							
	First 5 years. If the Form 990 is organization, check this box and	stop here		third, fourth, or	fifth tax year as a	section 501(	c)(3)	<u></u>
	tion C. Computation of Pul			no 10!: "	\\\	T	15	0
	Public support percentage for 20					L	15	%
	Public support percentage from						16	%
	tion D. Computation of Inv				(6)	Г	17	
17						-	17	%
	Investment income percentage f					L.	18	
	<b>33-1/3% support tests—2023.</b> If is not more than 33-1/3%, check <b>33-1/3% support tests—2022.</b> If t	this box and <b>sto</b>	<b>p here.</b> The orgar	ization qualifies	as a publicly supp	orted organi	zation	
-	line 18 is not more than 33-1/3%							
20	Private foundation. If the organize	zation did not che	eck a box on line	14, 19a, or 19b, o	check this box and	l see instruc	tions	

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

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с		
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>4</b> a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI.</b>	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9с		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

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

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizat	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	on No	ov. 20, 1970 (explain ir st complete Sections A	Part VI). <b>See</b> through E.
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
á	Average monthly value of securities	1a		
ŀ	Average monthly cash balances	1b		
(	Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
-	e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functionally inte (see instructions).	grated	Type III supporting or	ganization

BAA Schedule A (Form 990) 2023

Pa	$\mathbf{t} \mathbf{V} = \mathbf{I} \mathbf{y} \mathbf{p} \mathbf{e}$ III Non-Functionally integrated 509(a)(3) Supporting Organizations (cont	inuea)	
Sec	tion D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions.	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details		
	in <b>Part VI</b> ). See instructions.	8	
9	Distributable amount for 2023 from Section C, line 6	9	
10	Line 8 amount divided by line 9 amount	10	

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

BAA Schedule A (Form 990) 2023

Part VI

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

### PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE		2023	 2022	 2021		2020	 2019
OTHER INCOME ROYALTY INCOME TOTAL	\$ \$	712. 58,243. 58,955.	\$ 3,029. 45,894. 48,923.	\$ 176. 38,769. 38,945.	\$ \$	75,559. 75,559.	\$ 471. 34,949. 35,420.

BAA TEEA0408L 08/14/23 Schedule A (Form 990) 2023

### SCHEDULE D (Form 990)

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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

PROJECT DRAWDOWN 38-3705448 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year..... Aggregate value of contributions to (during year). . . . . . Aggregate value of grants from (during year)...... Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds No are the organization's property, subject to the organization's exclusive legal control?... Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring No impermissible private benefit?.... Yes Part II **Conservation Easements** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements. 2a **b** Total acreage restricted by conservation easements..... 2b c Number of conservation easements on a certified historic structure included on line 2a...... d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register..... Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax vear Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, No and enforcement of the conservation easements it holds?.... Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?.... In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, 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, not 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 in Part XIII the text of the footnote to its financial statements that describes these items. 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..... (ii) Assets included in Form 990, Part X..... If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items. a Revenue included on Form 990, Part VIII, line 1..... **b** Assets included in Form 990, Part X.....

Part III Organizations Maintaining Co	llections of Art, His	torical Treasures, o	or Other Similar As	sets	(contii	าued)
<b>3</b> Using the organization's acquisition, accession, a items (check all that apply).	and other records, check a	ny of the following that ma	ake significant use of its	collection	n	
a Public exhibition	<b>d</b> Loan	or exchange program				
<b>b</b> Scholarly research	e Other					
c Preservation for future generations						
4 Provide a description of the organization's collect Part XIII.						
<b>5</b> During the year, did the organization solicit or to be sold to raise funds rather than to be ma		t, historical treasures, or rganization's collection?	other similar assets	Yes		No
<b>Escrow and Custodial Arrang</b> Complete if the organization a Form 990, Part X, line 21.	ements nswered "Yes" on F	orm 990, Part IV, lii	ne 9, or reported a	n amo	ount o	n
1a Is the organization an agent, trustee, custodia on Form 990, Part X?			er assets not included	Yes		No
<b>b</b> If "Yes," explain the arrangement in Part XIII and	I complete the following ta	ble.				
				Amoun	t	
c Beginning balance						
<b>d</b> Additions during the year.						
e Distributions during the year						
f Ending balance				Yes		No
<b>b</b> If "Yes," explain the arrangement in Part XIII.			L		_	
Part V Endowment Funds						
Complete if the organization a	nswered "Yes" on F	orm 990, Part IV, li	ne 10.			
(a) Current	t year (b) Prior year	(c) Two years back	(d) Three years back	(e)	Four year	s back
<b>1a</b> Beginning of year balance	(., ,	(0)	(,	(-)	· - · · · <i>)</i> - · · ·	
<b>b</b> Contributions						
c Net investment earnings, gains,						
and losses						
d Grants or scholarships						
e Other expenditures for facilities						
and programs						
f Administrative expenses						
2 Provide the estimated percentage of the curre	ant year end halance (lin	a 1g column (a)) hald a				
<b>a</b> Board designated or quasi-endowment	%	le Ty, coluitiii (a)) field a	15.			
<b>b</b> Permanent endowment						
c Term endowment	,					
The percentages on lines 2a, 2b, and 2c should e	equal 100%					
•	•					
3a Are there endowment funds not in the possessior organization by:	n of the organization that a	are held and administered	for the	ſ	Yes	No
(i) Unrelated organizations?				3a(i)		
(ii) Related organizations?				3a(ii)		
<b>b</b> If "Yes" on line 3a(ii), are the related organization				3b		
4 Describe in Part XIII the intended uses of the	organization's endowme	ent funds.				
Part VI Land, Buildings, and Equipme	ent					
Complete if the organization answered		IV, line 11a. See Form 99	0, Part X, line 10.			
Description of property	(a) Cost or other basis	(b) Cost or other	(c) Accumulated	(d)	Book va	alue
	(investment)	basis (other)	depreciation			
<b>1a</b> Land						
<b>b</b> Buildings						
c Leasehold improvements						
<b>d</b> Equipment		32,949.	10,313.		22	,636.
e Other						
Total. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X, I	ine 10c, column (B))			22	,636.

Part VII		- Other Securities	Form 990 Part IV line	N/A : 11b. See Form 990, Part X, line 12	)
(a) Descri		ory (including name of security)	(b) Book value	(c) Method of valuation: Cost or	
			(2) 2001 talias	(e) motion of variation coor of	Total of your market value
		5			
(3) Other					
-					
(A) (B) (C) (D) (E)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
(l)					
Total. (Colum	nn (b) must equal Form 99	90, Part X, line 12, column (B))			
Part VIII	Investments -	- Program Related		N/A	
	Complete if the org	ganization answered "Yes" or	Form 990, Part IV, line	11c. See Form 990, Part X, line 13	).
	(a) Description of in	nvestment	(b) Book value	(c) Method of valuation: Cost of	r end-of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)	an (h) must squal Form Of	90, Part X, line 13, column (B))			
Part IX	Other Assets	υ, rait λ, iiiie 13, coiuiiiii (b))	N/A		
I alt IX		ganization answered "Yes" or		11d. See Form 990, Part X, line 15	- ).
			scription		(b) Book value
(1)					
(2)					
(3)					
(4) (5)					
(6)					
(7)					
(8)					
(9)					
(10)					
Total. (Cold	umn (b) must equal	Form 990, Part X, line 15, o	column (B))		
Part X	Other Liabilitie	es			
	Complete if the org			11e or 11f. See Form 990, Part X,	
1.	-1 :	(a) Descr	ription of liability		(b) Book value
	al income taxes				
(2)					
(4)					
(5)					
(6)					
(7)					
(8)		•			
(9)					
(10)		<u> </u>			
(11)					
Total. (Colu	ımn (b) must equal l	orm 990, Part X, line 25, c	olumn (B))		
				inancial statements that reports the organiz	
tax positions u	nder FASB ASC 740. Chec	k here if the text of the footnote has	s been provided in Part XIII		

Part XI   Reconciliation of Revenue per Audited Financial Statements With Revenue per R	eturn	•
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	5,924,465.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		, ,
a Net unrealized gains (losses) on investments		
<b>b</b> Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2e	648,993.
3 Subtract line 2e from line 1.	3	5,275,472.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b	4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5,275,472.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retur	'n
		••
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements	1	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 -	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements	1 -	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  2 Donated Services and Use of facilities.  2 Donated Services and Use of facilities.	1 -	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements	1 -	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses.  d Other (Describe in Part XIII.)	1 -	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses.  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.	1 -	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses.  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.  3 Subtract line 2e from line 1.	1	5,081,083.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses.  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 	5,081,083.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses.  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b.  4a	1 	5,081,083.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses.  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b.  4 Ab  b Other (Describe in Part XIII.)	2e 3	5,081,083.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses.  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b.  b Other (Describe in Part XIII.)  c Add lines 4a and 4b.	2e 3	5,081,083.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements.  2 Amounts included on line 1 but not on Form 990, Part IX, line 25:  a Donated services and use of facilities.  b Prior year adjustments.  c Other losses.  d Other (Describe in Part XIII.)  e Add lines 2a through 2d.  3 Subtract line 2e from line 1.  4 Amounts included on Form 990, Part IX, line 25, but not on line 1:  a Investment expenses not included on Form 990, Part VIII, line 7b.  4 Ab  b Other (Describe in Part XIII.)	2e 3	5,081,083. 5,081,083.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

BAA Schedule D (Form 990) 2023

### SCHEDULE J (Form 990)

# **Compensation Information**

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

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

Attach to Form 990.

oyees 2023

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

| Employer identification number

PROJECT DRAWDOWN 38-3705448

Par	t I Questions Regarding Compensation			
•			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	. 1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	. 2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/ Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
a b	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:  Receive a severance payment or change-of-control payment?  Participate in or receive payment from a supplemental nonqualified retirement plan?  Participate in or receive payment from an equity-based compensation arrangement?  If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	. 4b		X X X
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
а	The organization?	. 5a		Х
b	Any related organization?	. 5b		Χ
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
а	The organization?	. 6a		Χ
b	Any related organization?	. 6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	. 7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)?  If "Yes," describe in Part III.	. 8		Х
				17
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	. 9		

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

Schedule J (Form 990) 2023

Page 2

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation	1/or 1099-MISC and/or	1099-NEC compensatio		- Nontaxable	Total of	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	benefits	columns(B)(i)·(D)	in column (B) reported as deferred on prior Form 990
TODD REUBOLD	Θ	183,780.	0.	0.	0	0.	183,78	0.
1 MARKETING DIR	<b>(ii)</b>			.0		0		0
ELIZABETH BAGLEY	(j)	217,647.	0	0	0	0	217,647.	0
2 MANAGING DIR.	(ii)			0.		0.		0.
JAMIE ALEXANDER	(I)	-175,000.	0	0	<u>- 0                                   </u>	0	-175,000.	0
3 DRAWDOWN LABS	(ii)			0.		0.		0.
JONATHAN FOLEY	(I)	423,932.	0	0	0	0.	423,932.	0.
4 EXECUTIVE DIR.	(ii)			0.	0.	0.		0.
RESHMA PATINI	(I)	159,426.	0	0	0	0	159, 426.	0
5 OPERATIONS DIR	(ii)			0.		0.		0.
MATTHEW SCOTT	(I)	160,042.	0	0	0	0	160,042.	0
6 DIRECTOR	(ii)			0.	0.	0.		0.
	(I)	         			         	         	         	
7	(ii)							
	Ξ	         			       		; ; ; ;	         
8	(ii)							
	(I)				       		 	
6	(ii)							
	(I)							
10	(ii)							
	Ξ	           	           	           	           	           	           	           
11	(ii)							
	Ξ	           	         	         	         	         	           	:           
12	(ii)							
	Ξ	         	         		         	         	           	           
13	( <u>ii</u> )							
	Ξ			           	           	           	           	           
14	(ii)							
	Ξ	           	           	           	         	           	           	           
15	<b>(</b>							
	Ξ	           	           		           	           	           	           
16	<u>(ii</u>							
ВАА			TEEA4102L 07/03/23	/23			Schedule .	Schedule J (Form 990) 2023

# Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

### SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

### Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

PROJECT DRAWDOWN

Employer identification number

38-3705448

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

PROJECT DRAWDOWN'S MISSION IS TO HELP THE WORLD STOP CLIMATE CHANGE—AS QUICKLY, SAFELY,
AND EQUITABLY AS POSSIBLE. PROJECT DRAWDOWN DOES THIS BY ADVANCING EFFECTIVE,
SCIENCE-BASED CLIMATE SOLUTIONS AND STRATEGIES; FOSTERING BOLD, NEW CLIMATE
LEADERSHIP; AND PROMOTING NEW CLIMATE NARRATIVES AND NEW VOICES.

### FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

PROJECT DRAWDOWN'S MISSION IS TO HELP THE WORLD STOP CLIMATE CHANGE—AS QUICKLY, SAFELY, AND EQUITABLY AS POSSIBLE. PROJECT DRAWDOWN DOES THIS BY ADVANCING EFFECTIVE, SCIENCE-BASED CLIMATE SOLUTIONS AND STRATEGIES; FOSTERING BOLD, NEW CLIMATE LEADERSHIP; AND PROMOTING NEW CLIMATE NARRATIVES AND NEW VOICES.

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

COMMUNICATIONS

THIS PROGRAM INCLUDES THE MARKETING AND COMMUNICATIONS TEAM WHICH SUPPORTS PROJECT DRAWDOWN'S PEOPLE AND PROGRAMS TO EXPAND THE ORGANIZATION'S REACH, INFLUENCE, AND IMPACT WITH TARGET AUDIENCES.

OUR NEW DRAWDOWN IGNITE WEBINAR SERIES SHARED INSIGHTS ON THE CLIMATE CHANGE
TRAJECTORY, CAPITALISM AND CLIMATE CHANGE, THE TRANSFORMATIONAL POWER OF
STORYTELLING, AND MORE WITH THOUSANDS OF VIEWERS FROM AROUND THE WORLD. OUR DRAWDOWN
IGNITE WEBINAR SERIES HAS BEEN VIEWED MORE THAN 10,000 TIMES LIVE AND VIA YOUTUBE
SINCE IT PREMIERED IN MAY. WE COLLABORATED WITH ECOCHALLENGE.ORG TO GUIDE MORE THAN
3,500 PARTICIPANTS FROM 63 COUNTRIES TO COMPLETE NEARLY 65,000 CLIMATE SOLUTIONS
ACTIONS. THREE WEBINARS WE HOSTED AS PART OF THE INITIATIVE EDUCATED MORE THAN 1,000
ATTENDEES AT THE INTERSECTION OF CLIMATE SOLUTIONS AND COMMUNITIES, BUSINESS, AND

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

AROUND THE WORLD TO INCLUDE A FOCUS ON CLIMATE SOLUTIONS IN THEIR REPORTING. OUR GROWING VISIBILITY AS TRUSTED NONPARTISAN EXPERTS GARNERED MEDIA APPEARANCES AT NEWSWEEK, AL JAZEERA, THE NEW YORK TIMES, EURASIA REVIEW, PREVENTION, CLEANTECHNICA, AFRICA TIMES, CNBC, THE WASHINGTON POST, NATIONAL PUBLIC RADIO, THE WORLD ECONOMIC FORUM, THE WEATHER CHANNEL, SCIENTIFIC AMERICAN, AND MORE. WE ALSO LAUNCHED DISCOVER - A CUSTOMIZABLE WEB PORTAL PROVIDING "ONE-STOP" ACCESS TO PROJECT DRAWDOWN'S WEALTH OF VIDEOS, ACTION GUIDES, UPDATES, AND MORE. WE HAD 937,000 USERS ACCESS CLIMATE SOLUTIONS ON OUR WEBSITE, WITH 141 COUNTRIES REPRESENTED.

### FORM 990, PART III, LINE 4B - PROGRAM SERVICE ACCOMPLISHMENTS

SCIENCE

DRAWDOWN SCIENCE DEVELOPS AND DISSEMINATES SCIENCE-BASED STRATEGIES FOR ACCELERATING ADOPTION OF CLIMATE SOLUTIONS. THIS PROGRAM AIMS TO DETERMINE WHEN AND HOW REACHING DRAWDOWN IS POSSIBLE, USING EXISTING, WELL-PROVEN, SCALABLE CLIMATE SOLUTIONS. TO UNCOVER THAT ANSWER, THE SCIENCE TEAM REVIEWS AND EVALUATES THE POTENTIAL PERFORMANCE OF DIVERSE TECHNOLOGIES AND PRACTICES THAT REDUCE GHG EMISSIONS AND/OR ENHANCE CARBON SEQUESTRATIONS FROM THE ATMOSPHERE WHILE PROVIDING MANY CO-BENEFITS TO HUMAN SOCIETY.

WE USED SCIENCE TO IDENTIFY THE MOST EFFECTIVE "WHOLE SYSTEM" SOLUTIONS AND STRATEGIES FOR HALTING CLIMATE CHANGE, AND SERVED AS TRUSTED THOUGHT LEADERS IN THE GLOBAL CLIMATE SOLUTIONS SPACE. THE DRAWDOWN ROADMAP VIDEO SERIES LAUNCHED IN APRIL 2023 AND IS PROVIDING POLICYMAKERS, BUSINESS LEADERS, PHILANTHROPISTS, IMPACT INVESTORS, AND OTHERS WITH INSIGHTS ON HOW TO IDENTIFY AND DEPLOY THE MOST IMPACTFUL CLIMATE ACTIONS WITH RESPECT TO TIMING, GEOGRAPHY, CO-BENEFITS, AND BARRIERS. TO DATE, WE HAVE HAD 4 MILLION ONLINE VIEWS OF THE SERIES. PROJECT DRAWDOWN PARTICIPATED IN

PROJECT DRAWDOWN

### FORM 990, PART III, LINE 4B - PROGRAM SERVICE ACCOMPLISHMENTS

CLIMATE NEGOTIATIONS IN BONN IN JULY AND CLIMATE WEEK NYC IN SEPTEMBER, AND HELPED DEVELOP THE FIFTH U.S. NATIONAL CLIMATE ASSESSMENT, EFFECTIVELY ENGAGING AND GUIDING THE DIRECTION OF NATIONAL AND GLOBAL CLIMATE POLICY.

### FORM 990, PART III, LINE 4C - PROGRAM SERVICE ACCOMPLISHMENTS

DRAWDOWN LABS

THIS PROGRAM IS A TESTING GROUND FOR HOW THE PRIVATE SECTOR CAN ACCELERATE THE SCALING OF CLIMATE SOLUTIONS QUICKLY, SAFELY, AND EQUITABLY. LEVERAGING WORLD-CLASS RESEARCH AND ANALYSIS AND THE CROSS-INDUSTRY CAPABILITIES OF CLIMATE-LEADING BUSINESSES, PHILANTHROPISTS, AND INVESTORS, DRAWDOWN LABS OFFERS THE WORLD POWERFUL AND ATTAINABLE WAYS OF ADDRESSING THE CLIMATE CRISIS AT SCALE. DRAWDOWN LABS INCLUDES THE BUSINESS COALITION AND CAPITAL COALITION.

WE INSPIRED AND EMPOWERED BUSINESS LEADERS TO TAKE BOLD POSITIONS AND STRATEGICALLY EMBED CLIMATE SOLUTIONS THROUGHOUT THEIR OPERATIONS. WE GUIDED IMPACT INVESTORS, PHILANTHROPISTS, AND OTHERS TO STRATEGICALLY DIRECT RESOURCES TO THE MOST IMPORTANT AND IMPACTFUL CLIMATE SOLUTIONS. DRAWDOWN LABS INSPIRED DEVELOPMENT OF GOOGLE'S SUSTAINABILITY MARKETING PLAYBOOK, AND THE AMERICAN RED CROSS IS USING CLIMATE SOLUTIONS 101 COURSE TO ENGAGE ITS EMPLOYEES AROUND CLIMATE SOLUTIONS. WE EDUCATED HUNDREDS OF MBA STUDENTS ON CLIMATE ISSUES THROUGH THE VIRTUAL CLIMATECAP MBA ACADEMY. OUR JOB FUNCTION ACTION GUIDES FOR PRODUCT MANAGERS, PRODUCT DESIGNERS, AND ENGINEERS BROUGHT THE TOTAL NUMBER OF JOB FUNCTIONS COVERED TO 10 WITH MORE THAN 100,000 DOWNLOADS. THE GUIDES WERE EMBEDDED INTO LINKEDIN'S NEW SUSTAINABILITY RESOURCE HUB, PUTTING THEM AT THE FINGERTIPS OF 900 MILLION LINKEDIN USERS, AND HAVE BEEN ADOPTED BY EMPLOYEES AT GOLDEN STATE WARRIORS AND GOOGLE.

Employer identification number

### FORM 990, PART III, LINE 4C - PROGRAM SERVICE ACCOMPLISHMENTS

PROJECT DRAWDOWN'S CAPITAL COALITION, LAUNCHED IN LATE 2023, IS HELPING GUIDE WHAT WILL ULTIMATELY BE BILLIONS OF DOLLARS OF PRIVATE CAPITAL TOWARD THE MOST EFFECTIVE CLIMATE SOLUTIONS. SAVING (FOR) THE PLANET, WHICH WAS PUBLISHED IN DECEMBER AND HAD 33,000 VIEWS IN ITS FIRST MONTH OF PUBLICATION, OFFERED INSIGHTS ON HOW INDIVIDUALS CAN LEVERAGE THE POWER OF PERSONAL BANKING TO ADVANCE CLIMATE SOLUTIONS AND WAS FEATURED IN ARTICLES IN DOZENS OF MEDIA OUTLETS, INCLUDING WIRED AND FAST COMPANY.

### FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

DRAWDOWN LIFT

THIS PROGRAM EXPLORES THE LINKS BETWEEN CLIMATE CHANGES SOLUTIONS, HEALTH, AND IMPROVING HUMAN WELLBEING, PARTICULARLY IN EMERGING ECONOMIES IN SUB-SAHARAN AFRICA AND ASIA. THIS EFFORT AIMS TO BREAK DOWN DISCIPLINARY WALLS AND AMPLIFY SOLUTIONS THAT LEVERAGE THE RESOURCEFULNESS AND RESILIENCE OF PEOPLE IN EMERGING ECONOMIES TO BOOST ECONOMIC, HEALTH, AND EDUCATION EQUITY WHILE ADDRESSING CLIMATE CHANGE.

OUR REDUCING BLACK CARBON REPORT HAS ENGAGED HUNDREDS OF THOUSANDS OF PEOPLE AROUND THE WORLD. U.S. STATE DEPARTMENT OFFICIALS EXPRESSED GRATITUDE THAT WE ARE BRINGING ATTENTION TO THIS IMPORTANT PROBLEM AND CONCOMITANT SOLUTIONS. THE GROUNDBREAKING CLEAN COOKING POLICY BRIEF WE PUBLISHED IN DECEMBER IS GUIDING POLICY AND PRACTICE PROMOTING THE USE OF CLIMATE-FRIENDLY FUELS BY THE 2.3 BILLION PEOPLE WHO RELY ON FIRES OR SIMPLE COOKSTOVES TO PREPARE MEALS. WE COLLABORATED WITH THE BOHEMIAN FOUNDATION AND THE AFRICAN CLIMATE FOUNDATION TO HOST A ROUNDTABLE DISCUSSION THAT BROUGHT TOGETHER DONORS FROM OVER A DOZEN FUNDING ORGANIZATIONS TO DISCUSS FUNDING AT THE INTERSECTION OF CLIMATE CHANGE AND POVERTY ALLEVIATION.

Name of the organization
PROJECT DRAWDOWN

88-3705448

### FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

DRAWDOWN STORIES

DRAWDOWN STORIES LEVERAGES STORYTELLING AND ENGAGEMENT AS A BRIDGE BETWEEN

SCIENCE-BASED CLIMATE SOLUTIONS AND EVERYDAY PEOPLE LOOKING TO FIND THEIR ROLES IN

STOPPING CLIMATE CHANGE. DRAWDOWN STORIES INCLUDES DRAWDOWN'S NEIGHBORHOOD AND THE

GLOBAL SOLUTIONS DIARY.

WE SHIFTED THE CONVERSATION FROM DOOM AND DESPAIR TO HOPE AND POSSIBILITY AND "PASSED THE MIC" TO UNDERREPRESENTED CLIMATE HEROES. DRAWDOWN STORIES SHOWCASED DOZENS OF CLIMATE SOLUTIONS HEROES FROM BLACK AND BROWN COMMUNITIES IN MINNEAPOLIS, ST. PAUL, NEW ORLEANS, NEWARK, NEW HAVEN, AND THE BRONX. THE WEATHER CHANNEL'S STREAMING CHANNEL PATTRN SIGNED A DISTRIBUTION DEAL TO FEATURE DRAWDOWN'S NEIGHBORHOOD EPISODES WITH PEOPLE ACROSS THE U.S. OTHER OUTLETS, INCLUDING NEWSWEEK, ALSO FEATURED DRAWDOWN'S NEIGHBORHOOD CLIMATE HEROES.

DRAWDOWN'S NEIGHBORHOOD PARTICIPANTS REPORTED GREATER RECOGNITION FOR THEIR WORK,
IDENTITIES, EXPERIENCES, AND LEADERSHIP, NEW CONNECTIONS WITH NETWORKS AND GROWTH
OPPORTUNITIES, AND INCREASED CONFIDENCE IN THEIR STORIES AND ROLES IN THE CLIMATE
MOVEMENT. DRAWDOWN STORIES CONNECTED WITH THOUSANDS, INCLUDING THROUGH ENGAGEMENTS
WITH THE CLIMATE MUSEUM, ECOCHALLENGE.ORG, FEMA, THE GREAT NORTHERN FESTIVAL, THE
NATIONAL ENVIRONMENTAL JUSTICE CONFERENCE, PINTEREST, PLANET FORWARD, THE SOCIETY OF
ENVIRONMENTAL JOURNALISTS, AND MORE.

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

FORM 990 IS E-MAILED TO THE DIRECTOR OF OPERATIONS BY THE CPA PRIOR TO FILING FOR REVIEW AND COMMENT. THE ELECTRONIC COPY IS THEN E-MAILED TO BOARD MEMBERS FOR THEIR

Name of the organization
PROJECT DRAWDOWN

88-3705448

### FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS (CONTINUED)

REVIEW. MAJORITY OF INPUT ON THE FORM 990 IS FROM THE DIRECTOR OF OPERATIONS AND BOOKKEEPER.COMMENTS ARE THEN E-MAILED TO THE CPA FOR INCORPORATION INTO THE FINAL FILING COPY.

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

A CONFLICT OF INTEREST FORM IS COMPLETED AND SIGNED BY EACH BOARD MEMBER REGARDING CONFLICT OF INTEREST ISSUES SUCH AS BUSINESS RELATIONSHIPS AND COMPENSATION INCLUDING CERTAIN PAYMENTS MADE TO KEY EMPLOYEES AT THE END OF EACH BOARD MEETING IN DECEMBER 2011.

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

THE ORGANIZATION'S TAX RETURNS AND ANY OTHER RELATED DOCUMENTS PERTINENT TO THE PUBLIC'S INTEREST IS MADE AVAILABLE TO THE PUBLIC ONLY UPON REQUEST. THE ORGANIZATION COMPLIES WITH ALL REASONABLE REQUEST FOR REVIEW OF ITS RECORDS.