Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury

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.

Open to Public Inspection

A	For th	ne 2024 calen	lar year, or tax year beginning	, 2024, and			. 20	1	
		f applicable:	C	, 202- , and	rending	D Employ		ntion number	
ט				al Dogourgo					
		ldress change	Central Sierra Environmenta Center, Inc	ar Resource		E Telepho	027924	. U	
	\mathbf{H}	ame change	P O Box 396			· ·		4.40	
		tial return	Twain Harte, CA 95383			209	-586-7	440	
	Fin	al return/terminated							
	An	nended return				G Gross re			147.
	Ap	pplication pending	F Name and address of principal officer:		` '	this a group return			X No
			Same As C Above		H(b) Are	e all subordinates No," attach a list.	included? See instruc	ctions. Yes	No
<u> </u>	Tax-	exempt status:	X = 501(c)(3) $501(c) ($) (insert	no.) 4947(a)(1) or	527				
J	Wel	bsite: ww	w.CSERC.org		H(c) Gro	oup exemption nu	ımber		
K		of organization:	X Corporation Trust Association Of	her L Year o	of formation: 19	991 M s	state of lega	l domicile: CA	
Pa	rt I	Summar	/						
	1	Briefly descri	be the organization's mission or most signi	ficant activities:CSERC	protects	s water,	wildl	ife, and	<u>d</u>
ģ		wild pla	ces of the Northern Yosemit	<u>e region.</u>					
anc									
eL									
Governance		Check this bo					_	S.	-
প			ting members of the governing body (Part lependent voting members of the governin				3 4		
es			of individuals employed in calendar year 2				5		
≣			of volunteers (estimate if necessary)				6		0
Activities &			d business revenue from Part VIII, column				7a		0.
_			business taxable income from Form 990-T				7b		0.
						Prior Year		Current Ye	
4.	8	Contributions	and grants (Part VIII, line 1h)			288,0	88.	409	,250.
Revenue			ice revenue (Part VIII, line 2g)			,			
e ve	10	Investment in	come (Part VIII, column (A), lines 3, 4, and	d 7d)			42.	5,	,897.
ď			e (Part VIII, column (A), lines 5, 6d, 8c, 9c						
			 add lines 8 through 11 (must equal Par 			288,1	30.	415,	,147.
			milar amounts paid (Part IX, column (A), li	•					
	14	Benefits paid	to or for members (Part IX, column (A), lir	ne 4)					
s	15	Salaries, other	r compensation, employee benefits (Part I	0)	270,3	59.	342,	,143.	
JSe.	16a	Professional	undraising fees (Part IX, column (A), line		1,0	06.	3,	,946.	
Expenses	b	Total fundrais	ing expenses (Part IX, column (D), line 25	16.	103.				
й			es (Part IX, column (A), lines 11a-11d, 11f			52,4	8.4	66	731.
		•	s. Add lines 13-17 (must equal Part IX, co	•		323,8			,820.
		•	expenses. Subtract line 18 from line 12			-35,7			,327.
- %						nning of Curren		End of Ye	
ance	20	Total assets	Part X, line 16)			219,2			, 790.
Ass. Bal	21		s (Part X, line 26)			-6,4			,988.
Net Assets or Fund Balances	22	Net assets or	fund balances. Subtract line 21 from line 2	20		225,7			,802.
_	rt II	Signatur				225,1	44.	221	,002.
				nying schedules and statements	and to the hest	of my knowledge	and belief	it is true correct	and
com	olete. De	eclaration of prepa	clare that I have examined this return, including accompa er (other than officer) is based on all information of whic	h preparer has any knowledge.	s, and to the best t	of thy knowledge	and belief, i	it is true, correct	, and
Sig	ın	Signature of	officer		Date	e			
He	re	John F	uckley		Execu	tive Dir			
			name and title		Lilota	CIVO DII	•		
		Preparer's r	ame Preparer's signature	Dat	te	Check	ζ if PTI	N	
Pa	id	Susan	Creedon Susan Cree	edon		self-employe		0288328	
	iu epare			~~~**			1 - 0		
	e On					Firm's EIN	46-2	882710	
		J I IIII 3 ddulle	Oakdale, CA 95361			Phone no.		22-3725	
-	. 41 1	DS discuss th	s return with the preparer shown above? \$	Coo instructions				X Yes	No

Pan	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	CSERC protects water, wildlife, and wild places of the Northern Yosemite	region.
2	Did the organization undertake any significant program services during the year which were not listed on the prior	
	Form 990 or 990-EZ?	Yes X No
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O.	
	Describe the organization's program service accomplishments for each of its three largest program services, as mea	asured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others.	the total expenses,
	and revenue, if any, for each program service reported.	
40	(Code:) (Expenses \$ 225,875. including grants of \$) (Revenue \$	
-t a	FORESTS/WILDLIFE: CSERC conducted watchdog monitoring, meadow surveys,	and forest
		CSERC
	undertook wildlife photo-detection surveys for rare species, reviewed al	
	open for public comments in the Stanislaus Forest, and organized volunte	
	with staff in performing restoration projects at multiple sites during t	
	(0)	
4b	(Code:) (Expenses \$ 56,468. including grants of \$) (Revenue \$)
	RIVERS/WATER: CSERC staff monitored riparian areas and wetlands, assesse conditions, and advocated for water quality in proposed projects and pla	
	continued to play a lead role in the IRWM watershed planning collaborati	
	and in numerous river or water issues in the region.	ve brocess
	did in numerous river or water issues in the region.	
	(Only)	
4C	(Code:) (Expenses \$ 37,645. including grants of \$) (Revenue \$)
	LAND PLANNING: _ CSERC reviewed proposed development projects and land us the local region. All projects that posed risks to natural resources we	
	to with specific recommendations to minimize impacts and to better compl	
	natural resource objectives.	
/1 ~1	Other program services (Describe on Schedule O.) See Schedule O	
	Other program services (Describe on Schedule O.) See Schedule O (Expenses \$ 56,468. including grants of \$) (Revenue \$	١
	Total program service expenses 376, 456.	,

			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? If "Yes," complete Schedule D, Part VIII.	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	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <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		X
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		Χ
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV.	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions.	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III.	19		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	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

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Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II.	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	_
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			<u>. []</u>
1.	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Χ	
	(gambing) willings to prize williers.	- 10	23	

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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 5			
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? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		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).			
5а	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		X
	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	_		v
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e 7f		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899	/1		Λ
·	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:			
	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.)	10		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
_	Note: See the instructions for additional information the organization must report on Schedule O.	100		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	15		v
	excess parachute payment(s) during the year?	15		X
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		X
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would	1-		
	result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
_	•			

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 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 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. See Schedule 0 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 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 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ X **14** Did the organization have a written document retention and destruction policy?..... 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 17 List the states with which a copy of this Form 990 is required to be filed None 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 Another's website X Upon request Own 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. John Buckley P O Box 396 Twain Harte CA 95383 209-586-7440

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77-0279240

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Form 990 (2024)

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

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

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

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

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

BAA

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.											
(A)	(B)			(C Pos		than o		(D)	(E)	Œ	
Name and title	Average	box,	unle	ss pe	rson lirecto	is both or/truste	an ee)	(D) Reportable compensation from the organization (W-2/1099- MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-271099- MISC/1099-NEC)	Estimated amount of other compensation from the organization and related organizations	
(1) John Buckley	40										
CEO/Pres	0	X						111,124.	0.	0.	
_(2)_Robert_Rajewski Officer/Directo	2	Х						0.	0.	0.	
(3) Jason Reed	2										
CFO/Treas	0	Х						0.	0.	0.	
(4) Tom Parrington	2										
Officer/Directo	0	Х						0.	0.	0.	
(5) Julia Stephens	2										
Officer/Direc	0	Χ						0.	0.	0.	
(6) Jeff Tolhurst	2										
Director	0	Х						0.	0.	0.	
(7) Steve Hannon	2										
Officer/Directo	0	Χ						0.	0.	0.	
_(8) Cris_Barsanti	2										
Secretary	0	Х						0.	0.	0.	
_(9)		•									
(10)											
(11)		_									
(12)											
(13)											
(14)											

TEEA0107L 09/05/24

	t VII Section A. Officers, Directors, Tru	131003, 1	\cy			C)	C3, (and	i iligilest coll	ipensateu Emp	loyees	COILLI	nueu)
	(A) Name and title	(B) Average hours per week (list any hours for	box, office	unles er an	Posi neck i	ition more rson i irecto	than o s both r/truste mplc	an ee)	Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC) compe the c		(F) ated amount of other ensation in related anization in related anization	from ion I
		related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	31.	Key employee	Highest compensated employee	er			org.	a nzatioi	15
(15)													
(16)													
(17)													
(18)													
(19)													
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													
1b	Subtotal							L	111,124.	0.			0.
С	Total from continuation sheets to Part VII, Section	on A							0.	0.			0.
d	Total (add lines 1b and 1c) Total number of individuals (including but not limited									0.	ensatio	า	0.
	from the organization 1	10 111030 1	Stou	иро	• • • •	77110	100011	vcu	more than \$100,00	o or reportable comp	orisation		
3	Did the organization list any former officer, direct	tor tructo	o ko	N/ O	mnl	01/06	orl	hiat	act componented	omployoo		Yes	No
	on line 1a? If "Yes,"complete Schedule J for such	h individu	al		• • • •						. 3		X
4	For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	reportab r than \$1	le co 50,00	mpe 30? 	ensa If "	ition Y <i>es,</i>	and " con	oth <i>nple</i>	er compensation ete Schedule J for	from 	. 4		X
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes	e compen s," comple	satio	n fr che	om dule	any • <i>J f</i> o	unre or su	late ch p	d organization or	individual	. 5		X
	tion B. Independent Contractors									\$100.000	•		
	Complete this table for your five highest compensation from the organization. Report compensation	sated indesation for	epen the ca	dent alen	t cor dar <u>y</u>	ntra year	ctors endir	tha ng v	t received more the tity or within the or	nan \$100,000 of ganization's tax year			
	(A) Name and business addr	ess							Description o	of services	Compe	c) nsatio	n
2	Total number of independent contractors (including b \$100,000 of compensation from the organization	ut not limi 0	ted to	o tho	se I	isted	l abov	ve) '	who received more	than			

Central Sierra Environmental Resource Form 990 (2024) 77-0279240 Page 9 Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII.... (B) Related or (A) Total revenue (D) Unrelated Revenue exempt excluded from tax business under sections 512-514 function revenue revenue ts, Grants, Amounts 1a Federated campaigns **b** Membership dues..... 1b c Fundraising events..... 1с Gifts, d Related organizations..... 1d e Government grants (contributions) 1e Contributions, and Other Sin f All other contributions, gifts, grants, and similar amounts not included above . . . 1f 409,250. Noncash contributions included in 1g lines 1a-1f. h Total. Add lines 1a-1f 409,250 **Business Code** Program Service Revenue 2a h All other program service revenue. . . g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) <u>5,</u>897 5,897 Income from investment of tax-exempt bond proceeds Royalties..... (i) Real (ii) Personal 6a Gross rents 6a **b** Less: rental expenses 6b c Rental income or (loss) 6c d Net rental income or (loss) (i) Securities (ii) Other **7a** Gross amount from sales of assets other than inventory **b** Less: cost or other basis 7a 7b and sales expenses c Gain or (loss). 7с **d** Net gain or (loss)..... 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a **b** Less: direct expenses..... 8b 9a Gross income from gaming activities. See Part IV, line 19...... 9a **b** Less: direct expenses..... 9b c Net income or (loss) from gaming activities..... **10a** Gross sales of inventory, less..... returns and allowances. 0a 10b **b** Less: cost of goods sold.... c Net income or (loss) from sales of inventory..... **Business Code** Miscellaneous Revenue All other revenue...

415,

147

5,897

0

Total. Add lines 11a-11d.

12

Total revenue. See instructions.....

Form 990 (2024) Central Sierra Environmental Resource 77
Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a re	sponse or note to any			
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		·		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	111,124.	102,234.	5,556.	3,334.
6	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.
7	Other salaries and wages	181,282.	166,779.	9,064.	5,439.
8	Pension plan accruals and contributions	101,202.	100,773.	3,004.	3,437.
0	(include section 401(k) and 403(b) employer contributions)	14,620.	13,450.	731.	439.
9	Other employee benefits	10,791.	9,928.	539.	324.
10	Payroll taxes	24,326.	22,380.	1,216.	730.
11	Fees for services (nonemployees):	·			
а	Management				
b	Legal				
С	Accounting	4,581.	4,215.	229.	137.
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17	3,946.			3,946.
f	Investment management fees				
_	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.)	659.	606.	33.	20.
13	Office expenses	7,447.	6,851.	373.	223.
14	Information technology	4,256.	3,916.	213.	127.
15	Royalties.	1,250.	3,310.	213.	127,
16	Occupancy	12,852.	11,824.	643.	385.
17	Travel	2,225.	2,047.	111.	67.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	2,220.	2,017.	111.	07.
19	Conferences, conventions, and meetings	672.	618.	34.	20.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	6,566.	6,041.	328.	197.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	Mileage Reimbursement	13,100.	12,052.	655.	393.
b	Printing and Publications	8,658.	7,965.	433.	260.
c		3,408.	3,408.		
d	Postage and Shipping	2,057.	1,892.	103.	62.
•	All other expenses	250.	250.		
25	Total functional expenses. Add lines 1 through 24e	412,820.	376,456.	20,261.	16,103.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

_		Check if Schedule O contains a response or note to	o any lii	ne in this Part X	<u></u>	<u></u>	
					(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing			106,946.	1	38,442.
	2	Savings and temporary cash investments			104,799.	2	188,394.
	3	Pledges and grants receivable, net			·	3	·
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantia controlled entity or family member of any of these pe	er, director, outor, or 35%		5		
	6	Loans and other receivables from other disqualified p		H			
	0	section 4958(f)(1)), and persons described in section				6	
	7	Notes and loans receivable, net		· · · · ·		7	
S	8	Inventories for sale or use		<u> </u>		8	
set	_	Prepaid expenses and deferred charges		<u> </u>		9	
Assets	9	• •	1 1			9	
, ,		Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D		2,789.			
	b	Less: accumulated depreciation		2,153.	636.	10c	636.
	11	Investments — publicly traded securities		_		11	
	12	Investments — other securities. See Part IV, line 11.				12	
	13	Investments — program-related. See Part IV, line 11.		_		13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11	-	6,918.	15	4,318.	
	16	Total assets. Add lines 1 through 15 (must equal line	33)		219,299.	16	231,790.
	17	Accounts payable and accrued expenses				17	
	18	Grants payable				18	
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities		_		20	
ies	21	Escrow or custodial account liability. Complete Part				21	
Liabilities	22	Loans and other payables to any current or former of key employee, creator or founder, substantial contribution controlled entity or family member of any of these pe	ficer, di utor, or	rector, trustee, 35%		22	
コ	23	Secured mortgages and notes payable to unrelated the		<u> </u>		23	
	23 24	Unsecured notes and loans payable to unrelated third		_		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com			-6,445.	25	3,988.
	26	Total liabilities. Add lines 17 through 25		L	-6,445.	26	3,988.
ces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.			0,1101		0,300.
an	27	Net assets without donor restrictions				27	
Bal	28	Net assets with donor restrictions		-		28	
þ		Organizations that do not follow FASB ASC 958, che					
Net Assets or Fund Balance		and complete lines 29 through 33.					
Ö	29	Capital stock or trust principal, or current funds		<u> </u>		29	
ě	30	Paid-in or capital surplus, or land, building, or equipn				30	
486	31	Retained earnings, endowment, accumulated income			225,744.	31	227,802.
et,	32	Total net assets or fund balances		<u> </u>	225,744.	32	227,802.
_	33	Total liabilities and net assets/fund balances			219,299.	33	231,790.
DΛ	Λ.		TEE A O 1 1	11 09/05/24			Form 900 (2024)

Par	t XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI.			. X
1	Total revenue (must equal Part VIII, column (A), line 12)	4	15,	147.
2	Total expenses (must equal Part IX, column (A), line 25)	4	12,8	320.
3	Revenue less expenses. Subtract line 2 from line 1			327.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	2		744.
5	Net unrealized gains (losses) on investments			
6	Donated services and use of facilities			
7	Investment expenses			
8	Prior period adjustments			
9	Other changes in net assets or fund balances (explain on Schedule O)		-2	269.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	_		
D	column (B)) 10	2	27,8	302.
Par	t XII Financial Statements and Reporting			_
	Check if Schedule O contains a response or note to any line in this Part XII			<u>. Ш</u>
			Yes	No
1	Accounting method used to prepare the Form 990:			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both. Separate basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b		Χ
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both.			
	Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	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	old "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b		
ЗАА		Form	990	(2024)

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

2024

Open to Public Inspection

Name	of th	e organization	Central	Si	erra	Environm	enta	l Resource				Employer identific	ation number
	Center, Inc 77-0279240											0	
Par								izations must				See instruc	ctions.
The c	rga	nization is	not a private	foun	dation	because it is:	(For lir	nes 1 through 12	, check o	only one	box.)		
1		A church, c	convention of	church	nes, or a	association of o	hurche	s described in sec	tion 170	(b)(1)(A)	(i).		
2		A school of	lescribed in	sectio	n 1 <mark>70</mark> (l	b)(1)(A)(ii). (At	tach S	chedule E (Form	990).)				
3		A hospital	or a coopera	ative I	nospita	l service organ	nizatio	n described in se	ction 17	0(b)(1)(A	۹)(iii).		
4		A medical	research org	ganiza	ation op	perated in con	junctio	n with a hospital	describe	ed in sec	ction 170	(b)(1)(A)(iii). E	inter the hospital's
		name, city	, and state:										
5		An organiz	zation opera 7 0(b)(1)(A)(i v	ed fo	r the be	enefit of a coll e Part II.)	ege or	university owned	d or ope	ated by	a govern	mental unit de	escribed in
6													
7													
8		A commur	nity trust des	cribed	d in sec	tion 170(b)(1)	(A)(vi)	. (Complete Part	II.)				
9		An agricult	ural research	organ	ization	described in se	ction 1	70(b)(1)(A)(ix) ope	rated in	conjuncti	on with a	land-grant colle	ege
	<u> </u>		,	nd-gra	nt colle	ge of agricultur	e (see	instructions). Ente	er the nar	ne, city,	and state	of the college	or
		university:											
10		from activi	ities related t income and	to its d unre	exempt elated b	t tunctions, su	bject to le inco	o certain exception ome (less section	ons; and	l (2) no i	more tha	n 33-1/3% of i	es, and gross receipts ts support from gross the organization after
11		7						test for public sa	fety. See	section	n 509(a)(4	4).	
12		An organiz	zation organ	zed a	nd one	rated exclusiv	elv for	the benefit of to	nerforn	n the fur	nctions of	. or to carry o	ut the nurnoses of one
	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) . See section 509(a)(3) . Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.												
а	<u> </u>	organizatio	upporting org n(s) the powe Part IV, Sect	er to re	egularly	appoint or elec	ed, or o	controlled by its su jority of the directo	pported or ors or tru	organizat stees of	tion(s), typ the suppo	oically by giving rting organizati	g the supported on. You must
b		manageme	supporting ont of the support of the	portino	ı organi	zation vested ir	control the sa	lled in connection name persons that o	n with its control or	suppor	ted orgar the supp	nization(s), by orted organizat	having control or ion(s). You
С		Type III fu	nctionally in	tegra	ted. A	supporting ord	janizat plete l	ion operated in o	onnection	on with,	and func	tionally integra	ated with, its supported
d		Type III no	on-functiona	lly int	egrateo	d. A supporting	g orgai	nization operated	l in conr	ection w	vith its su nt and an	pported organ attentiveness	ization(s) that is not requirement (see
е		Check this	box if the o	rganiz	zation r	eceived a writ	ten de	termination from	the IRS	that it is	s а Туре	I, Type II, Typ	e III functionally
								orting organizatio					
q					•	t the supporte							
									G. A	1 - 41 -	(v) Am	ount of monetary	(vi) Amount of other
·	.,	arric or support	sa organization			(11) 2.114	(aes	scribed on lines 1-10 ve (see instructions))	organiza	ition listed	support	(see instructions)	support (see instructions)
							abo	ve (see mandenons))		governing ment?			
									Yes	No			
									1.03	1			
(A)													
<u>(' ')</u>													
(B)													
(-)													
(C)													
(D)													
(5)													
(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.)

Section A. Public Support								
Calendar year (or fiscal year beginning in)		(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	146,442.	288,667.	369,968.	288,088.	409,250.	1,502,415.	
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	146,442.	288,667.	369,968.	288,088.	409,250.	1,502,415.	
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)						411,960.	
6	Public support. Subtract line 5 from line 4						1,090,455.	
Sec	tion B. Total Support						<u>, , , , , , , , , , , , , , , , , , , </u>	
	ndar year (or fiscal year nning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total	
7	Amounts from line 4	146,442.	288,667.	369,968.	288,088.	409,250.	1,502,415.	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	563.	27.	42.	42.	5,897.	6,571.	
9	Net income from unrelated business activities, whether or not the business is regularly carried on		=:			5,551	0.	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0.	
	Total support. Add lines 7 through 10						1,508,986.	
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	0.	
13	First 5 years. If the Form 990 is organization, check this box and	for the organization stop here	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)		
	tion C. Computation of Pu							
	Public support percentage for 20						72.26%	
	Public support percentage from						71.21 %	
16a	33-1/3% support test—2024. If t and stop here. The organization	he organization di qualifies as a pub	d not check the b olicly supported or	ox on line 13, and ganization	d line 14 is 33-1/3	3% or more, check	this box	
b	33-1/3% support test—2023. If the and stop here. The organization	ne organization did qualifies as a pul	I not check a box olicly supported o	on line 13 or 16a rganization	a, and line 15 is 33	3-1/3% or more, o	check this box	
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	test, check this b	box and stop here	. Éxplain in Part	VI how	
	10%-facts-and-circumstances te or more, and if the organization organization meets the facts-and	meets the facts-a d-circumstances te	nd-circumstances est. The organizat	test, check this to ion qualifies as a	pox and stop here publicly supporte	e. Explain in Part do organization.	VI how the	
18	Private foundation. If the organization	zation did not che	ck a box on line 1	3, 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.)

C	tion A. Dublic Command	,					
	tion A. Public Support		T	4 > 2222	T	T	
	dar year (or fiscal year beginning in) Giffs, grants, contributions, and membership fees received. (Do not include	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
	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						
	Total. 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						
	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from 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.)						
	Total support. (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)
	tion C. Computation of Pul			10	· · ·	I	
	Public support percentage for 20	•	•		• •		
	Public support percentage from 2						8
Sec	tion D. Computation of Inv	estment Inco	me Percentage	•			
17	Investment income percentage for	or 2024 (line 10c	, column (f), divide	ed by line 13, col	lumn (f))		
18	Investment income percentage fi	rom 2023 Schedu	ıle A, Part III, line	17		18	8 %
	33-1/3% support tests—2024. If t is not more than 33-1/3%, check	he organization of	did not check the I	oox on line 14, a	nd line 15 is more	than 33-1/3%,	and line 17
	33-1/3% support tests—2023. If the line 18 is not more than 33-1/3%	, check this box	and stop here. Th	e organization qu	ualifies as a public	ly supported or	ganization
∠U	Private foundation. If the organize	zatiori did not che	eck a box on line	14, 19a, or 19b, (CHECK THIS DOX AND	i see instruction	15

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 Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9с		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		
		<i>-</i>	200	~~~

Pai	rt IV Supporting Organizations (continued)		1			
11	Lies the examination eccented a gift or contribution from any of the following persons?		Yes	No		
Ĭ	the governing body of a supported organization?	11a				
b	A family member of a person described on line 11a above?	11b				
_	A 250/ controlled entity of a person described on line 11e or 11h above? If "Yee" to line 11e 11h or 11e provide detail in Part VI	110				
		110				
500	Cuon B. Type I Supporting Organizations		Yes	No		
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one		163	140		
	or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported</i>					
	he organization accepted a gift or contribution from any of the following persons? son who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, overning body of a supported organization? 11b injumember of a person described on line 11a or 11b above? If "Yes" is line 11a, 11b, or 11c, provide detail in Part VI. 11c 11c 11d 11c 11d 11d 11c 11d 11d					
	were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers	-				
	during the tax year.	<u>'</u>				
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s)					
	benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the					
	11 3 3	2				
Sec	tion C. Type II Supporting Organizations					
_			Yes	No		
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No." describe in Part VI how control or management of the					
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1				
Sec	ction D. All Type III Supporting Organizations					
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No		
'	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax					
		1				
	organization organization of the date of notineation, to the extent not 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 tay year? If "Yes " describe in Part VI the role the organization's supported organizations played					
	in this regard.	3				
Sec	ction 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 instructions).					
á	The organization satisfied the Activities Test. Complete line 2 below.					
ŀ	The organization is the parent of each of its supported organizations. Complete line 3 below.					
(The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).					
2	Activities Test. Answer lines 2a and 2b below.		Yes	No		
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the		103	140		
	supported organization(s) to which the organization was responseive? If "Yes," then in Part VI identify those supported					
	responsive to those supported organizations, and how the organization determined that these activities	22				
	•	Za				
ı	build the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the					
	reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b				
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>					
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors.	3a				
ı	or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI. b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its</i>					
	supported organizations?If "Yes," describe in Part VI the role played by the organization in this regard.	3b				

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Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	anizat	tions		
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organizatio	t on No	ov. 20, 1970 (explain in st complete Sections A	n Part VI). Se through E.	е
Sec	Section A — Adjusted Net Income			(B) Curre (optio	
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) Curre (optio	
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			
	Total (add lines 1a, 1b, and 1c)	1d			
•	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			Curren	t Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6			

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). 7

BAA Schedule A (Form 990) 2024

Par	t V = 1 ype III Non-Functionally integrated 509(a)(3) St	upporting Organiza	ations (continue	a)	
Sec	tion D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	1			
2	Amounts paid to perform activity that directly furthers exempt purposes				
	in excess of income from activity	2			
	Administrative expenses paid to accomplish exempt purposes of su	3			
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - provide	e details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the organizati in Part VI). See instructions.	ion is responsive (provide	edetails	8	
9	Distributable amount for 2024 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sec	tion E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2024	ons	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required — <i>explain in Part VI</i>). See instructions.				
3	Excess distributions carryover, if any, to 2024				
a	From 2019				
	From 2020				
	From 2021				
	From 2022				
	From 2023				
	Total of lines 3a through 3e				
<u> </u>	Applied to underdistributions of prior years				
	Applied to 2024 distributable amount				
	Carryover from 2019 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2024 from Section D, line 7: \$				
a	Applied to underdistributions of prior years				
	Applied to 2024 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5 	Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
6	Remaining underdistributions for 2024. 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 2025. Add lines 3j and 4c.				
	Breakdown of line 7:				
a	Excess from 2020				
	Excess from 2021				
С	Excess from 2022				
d	Excess from 2023				
	Excess from 2024				

BAA Schedule A (Form 990) 2024

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.)