990

### Return of Organization Exempt From Income Tax

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

OMB No. 1545-

Inspection

Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Treasury Internal Revenue Service For the 2023 calendar year, or tax year beginning 01-01-2023 , and ending 12-31-2023 C Name of organization D Employer identification number **B** Check if applicable: California YIMBY Address change 82-3159002 Name change Initial return Doing business as Final return/terminated E Telephone number Amended return Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1121 L Street 210 (973) 289-8375 Application pending City or town, state or province, country, and ZIP or foreign postal code Sacramento, CA  $\,\,$  95814  $\,$ **G** Gross receipts \$ 4,485,864 Name and address of principal officer: H(a) Is this a group return for Brian Hanlon subordinates? 1121 L Street 210 **H(b)** Are all subordinates Sacramento, CA 95814 included? Tax-exempt status: 501(c)(3) 501(c) (4) (insert no.) 4947(a)(1) or 527 If "No," attach a list. See instructions.  $\mathbf{H(c)}$  Group exemption number https:/ CAYIMBY.ORG J Website: K Form of organization: Corporation Trust Association Other L Year of formation: M State of legal domicile: Summary 1 Briefly describe the organization's mission or most significant activities: California YIMBYs mission is to ensure that California is an affordable place to live, work, and raise a family. We advance our mission by:A.)addressing and correcting systemic inequities in California housing laws, and in related laws and regulations; B.) empowering Californians across the state to engage their elected representatives at the state and local levels on housing and related policies; C.) ensuring that California housing laws and local regulations are evidence-based, equitable, and Activities & Governance inclusive; andD.)drafting and advocating for proven legislative solutions that accelerate the pace of home building. We believe that an equitable California begins with abundant, secure, affordable housing. We focus on housing and land use policy at the state level to ensure grassroots organizers and city leaders have the tools they need to accelerate home building at the local level 2 Check this box  $\square$  if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) . . . 4 Number of independent voting members of the governing body (Part VI, line 1b)  ${f 5}$  Total number of individuals employed in calendar year 2023 (Part V, line 2a) . 5 Total number of volunteers (estimate if necessary) . . . . 0 Total unrelated business revenue from Part VIII, column (C), line 12 . Net unrelated business taxable income from Form 990-T, Part I, line 11 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 2,587,812 4,485,864 Program service revenue (Part VIII, line 2g) . . . . . 0 0 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2,587,812 4,485,864 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) Grants and similar amounts paid (Part IX, column (A), lines 1–3 ) . . . 0 13 0 Benefits paid to or for members (Part IX, column (A), line 4) . . Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,894,505 726,904 **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . **b** Total fundraising expenses (Part IX, column (D), line 25) 105,031 1,240,508 1,082,358 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 3,135,013 1,809,262 Revenue less expenses. Subtract line 18 from line 12 . -547,201 2,676,602 Assets or d Balances **Beginning of Current End of Year** Total assets (Part X, line 16) . . . . 3,549,602 6,894,135 959,440 Total liabilities (Part X, line 26) . 291,509 Net assets or fund balances. Subtract line 21 from line 20  $\,$  . 3,258,093 5,934,695 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. 2024-11-13 Sign Signature of officer Gordon Singh Director of Finance Here Type or print name and title Print/Type preparer's name Preparer's signature Check | if P02129578 **Paid** Firm's EIN 83-0534566 Firm's name Balarsky & Beebout CPAs Preparer Firm's address 6920 Fair Oaks Blvd Ste 205 **Use Only** Phone no. (916) 921-2600 Carmichael, CA 95608

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

Cat. No. 11282Y

Statement of Program Service Accomplishments  Check if Schedule O contains a response or note to any line in this Part III	Form	n 990 (	2023)					Page <b>2</b>
1 Briefly describe the organization's mission:  To empower Californians with the knowledge and tools to advocate for more housing and make our state affordable and accessible for everyone.  2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2?	Pa	rt III	Statement of	Program Servi	ce Accompl	lishments		
To empower Californians with the knowledge and tools to advocate for more housing and make our state affordable and accessible for everyone.  2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-E2?			Check if Schedule	e O contains a respo	nse or note to	any line in this Part		
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 99 or 990-E2?	1	Briefly	describe the orga	anization's mission:				
the prior Form 990 or 990-EZ?			Californians with	the knowledge and t	ools to advoca	ate for more housing a	and make our state affordable a	and accessible for
the prior Form 990 or 990-EZ?								
3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?	2		-	, -	nt program se	rvices during the year	r which were not listed on	☐ Yes 🔽 No
If "Yes," describe these changes on Schedule O.  4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.  4a (Code: ) (Expenses \$ 1,042,683 including grants of \$ ) (Revenue \$ )  California YIMBY education, outreach, and advocacy programIn 2023 we continued our strong track record of educating Californians about the causes of, and solutions to, the housing shortage and affordability crisis. We also conducted a virtual lobby week where we connected hundreds of community members and YIMB' activists with Sacramento lawmakers to advocate for better housing policy. We continued to build on our media efforts and were mentioned/quoted in nearly 500 original articles and over 1,000 syndicated articles in local, state, and national press. We secured strong editorial board support and op-ed placements in SF Chronicle, Sacramento Bee, New York Times, LA Times, OC Register, and San Bernardino Sun  4b (Code: ) (Expenses \$ 382,699 including grants of \$ ) (Revenue \$ )  California YIMBY grasstops partnerships and grassroots organizing programCalifornia YIMBY continues to convene of move votes, and the Local Elected Official Working Group: Local elected officials share best practices for housing policy and politics, provide feedback on state legislation, and engage their legislators to support our bills.  4c (Code: ) (Expenses \$ 41,930 including grants of \$ ) (Revenue \$ )  California YIMBY legislative and political programIn 2023 we sponsored and championed legislation that will reduce fees for homebuilding, streamline missing middle upzonings, remove technical prohibitions on otherwise zoning-compliant housing proposals, and en a century of exclusionary single-family home zoning by legalizing duplexes and lot-splits throughout California. We also partnered wit		If "Ye	s," describe these	new services on Sc	hedule O.			
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4e Total program service expenses 1,467,312	<b>4</b> 0			•	•	of \$	) (Revenue \$	1
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	<u>4e</u>	Tota	ii program service	expenses	1,407,312			Form 000 (2022)

Forn	orm 990 (2023) Page							
Pa	rt 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		Νo				
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions. 🥞	2	Yes					
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	Yes					
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						
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	_		N o				

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Form **990** (2023)

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12a

12b

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14a

14b

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20a

20b

21

Yes

Yes

Yes

Yes

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

the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part Il 🐯

negotiation services? If "Yes," complete Schedule D, Part IV 🥵

VIII, IX, or X, as applicable.

16

Did the organization receive or hold a conservation easement, including easements to preserve open space,

Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

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

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete

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 VIII 🕙 . . . . . . . .

Did the organization's separate or consolidated financial statements for the tax year include a footnote that

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🐒

**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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for

**b** Was the organization included in consolidated, independent audited financial statements for the tax year?

14a Did the organization maintain an office, employees, or agents outside of the United States? . . . .

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

**b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets

addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

any foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

Form 990 (2023) Page 4 Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 Nο Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III . . . . . . .

Part IV instructions for applicable filing thresholds, conditions, and exceptions):

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

Statements Regarding Other IRS Filings and Tax Compliance

1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable

**b** Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable

**b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV .

"Yes," complete Schedule L, Part I

If "Yes," completeSchedule L,Part III

conservation contributions?

Part V

sections 301.7701-2 and 301.7701-3?

entity or family member of any of these persons?

**d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I . . .

**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

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

뜘네사육은 어떤데이탈리용다 아마나 오늘다니다 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?

Was the organization a party to a business transaction with one of the following parties (see the Schedule L,

c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes,"

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

Hid He Granketation field to Me, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

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 🖠 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

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

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable

a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," 

23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's

current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," 

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 **b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

24a

24b 24c 24d

25a

25b

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28c

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Νo

Νo

Νo

Νo

Νo

No

Yes

Form **990** (2023)

Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)				
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				
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	4a		Νο	
b	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account, or other financial account in a foreign country:				
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	_			
	WBAthe organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N o	
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N o	
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<b>5</b> c			
	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	Yes		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	Yes		
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			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7</b> c			
d	If "Yes," indicate the number of Forms 8282 filed during the year				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7</b> g			
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?				
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
а	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 10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club				
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)  11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
	If "Yes," enter the amount of tax-exempt interest received or accrued during the				
	year. 12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?	13a			
	Note. See the instructions for additional information the organization must report on Schedule O.	L. L			
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				
	Enter the amount of reserves on hand				
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No	
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		Νo	
16	IS "theso"rg: areizhtionstruetionstrumbfilesFiturtio47ខិលិង្វទិសាមdulleeNsection 4968 excise tax on net investment income?	16		No	
17	If "Yes," complete Form 4720, Schedule O. 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? If "Yes," complete Form 6069.	17			

year by the following:

**a** The governing body?

Form 990 (2023) Page 6 Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines

8a, 8b, or 10b below, describe the circumstances, processes, or changes in 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 Yes No

1a Enter the number of voting members of the governing body at the end of the tax 1a Yearlere are material differences in voting rights among members of the governing

Did the organization make any significant changes to its governing documents since the prior Form 990 was Blathe organization become aware during the year of a significant diversion of the organization's assets? .

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or

**b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,

Did the organization contemporaneously document the meetings held or written actions undertaken during the

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 in Schedule 0 . . . .

body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent

Did the organization have members or stockholders? . .

**b** Each committee with authority to act on behalf of the governing body?

**10a** Did the organization have local chapters, branches, or affiliates?

Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . . . . . .

1b Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .

5

6

7a

Яa

9

10a

Νo

Νo

Nο

Nο

Yes Yes

Νo Νo Nο Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No Νo

> Νo Nο

> > Νo

**b** If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing 11a Yes **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 . 12a Yes b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c Yes 13 13 Did the organization have a written whistleblower policy? . . . Did the organization have a written document retention and destruction policy? . 14 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? a The organization's CEO, Executive Director, or top management official . . 15a Yes 15b **b** Other officers or key employees of the organization . . . . Yes 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 16a **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . . . . . . . . . . . . . . . 16b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T 18 (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Volon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: Gordon Singh 1121 L Street Suite 210 Sacramento, C A 95814 (973) 289-8375

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, or 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

See the instructions for the order in which to										
Check this box if neither the organization r	nor any related	organ	ization compensated an	y cu	ırreı	nt offi	icer,	director, or tru	stee.	
<b>(A)</b> Name and title	(B) Average hours per week (list		<b>(C)</b> tion (do not check more nless person is both an director/truste	offic				(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	any hours for related organizations below dotted line)	Individual trustae or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099- MISC/1099- NEC)	organizations (W-2/1099- MISC/1099- NEC)	compensation from the organization and related organizations
(1) Brian Hanlon	55.00	Х		Х				225.015	0	10.059
Executive Dir.	0.00			^				335,815	0	10,058
(2) Melissa Breach Senior Vice President & COO	40.00							224,930	0	8,866
(3) Matthew M Lewis	40.00									_
Director of Communications	0.00							152,330	0	17,667
(4) Konstantin A Hatcher Sr. Dir. Comm. Imp								137,190	0	15,646
(5) Robyn Leslie	0.00 40.00									
Dir. of Alliance								138,762	0	12,980
(6) Edward S Resnikoff	0.00 40.00									
	0.00							123,091	0	12,182
(7) Robert I Cruickshank	40.00							120,227	0	13,323
(8) Matthew N Gray	40.00							109,973	0	6,803
(9) Nat Friedman Chairman	1.00	х		x				0	0	0
(10) Zach Rosen	1.00			Х				0	0	0
Secretary/Treas	0.00			^				0	0	0
(11) Kim-Mai Cutler Board Member	0.00	x						0	0	0

	(A) Name and title	(B) Average	Posi	<b>(C)</b> tion (do not check more	tha	an o	ne bo	χ.	<b>(D)</b> Reportable	<b>(E)</b> Reportable	F	<b>(F)</b> stima	
		hours per week (list any hours for	u	nless person is both an director/truste	office)	er a	and a		compensation from the organization	compensation from related organizations	amo con	unt o	f other sation
		related organizations below dotted line)	Individual trustee or director	Institutional Trustee;	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC/1099- NEC)	(W-2/1099- MISC/1099- NEC)	org ar	ganiza nd rel	ation
	Sub-Total Total from continuatio												
_	Total (add lines 1b and								1,342,318				97,52
2	Total number of indiv \$100,000 of reportal			not limited to those listent the organization 8	d al	oove	e) who	rece	eived more than				
											Y	es	No
3	Did the organization	list any <b>former</b>	officer	, director or trustee, ke	y er	nplo	yee, c	or hig	hest compensate	ed employee			
	on line 1a? <i>If "Yes,"</i> o	complete Schedu	ıle J foi	r such individual	•	•		•			3		No
4	•			sum of reportable compe ater than \$150,000? <i>If</i>					•		4		
_					•					. :	4 Y	es	
5				accrue compensation fr es," complete Schedule 3					-		5		Νo
S	ection B. Indepen	dent Contra	ctors								•		
1	· ·			ompensated independer t compensation for the o								/ear.	
		Name a	<b>(A)</b> nd busir	ess address			-		Descrip	(B) tion of services	Со	(C) mpens	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

		90 (2023)										Page <b>9</b>
Part	t V		nt of Revenue			and the De						_
		CHECK II 30	chedule O contains a re	esponse of no	te to	(A) Total revenue	(B) Related exem function reven	l or pt on	(C) Unrelat busines revenu	SS	excl tax ur	( <b>D</b> ) Revenue luded from nder sections 12 - 514
Contr	ib	utions, Gifts, Gra	nts, and OtherAmt Sim	nilar Amounts	1a	Federated campaig	ıns	1a				
					b	Membership dues		1b				
						Fundraising events		<b>1</b> c				
						Related organization		1d				
						Government grants (co		1e				
						All other contributions, and similar amounts no	ot included	1f	4,485	,864		
					q	above Noncash contributions in	ncluded in		<u> </u>	_		
						lines 1a - 1f:\$	4.6	<b>1</b> g				
	1			ls		<b>Total.</b> Add lines 1a	-11				4,485,8	364
	2	a		Business (	Loae							
Ф	_	u										
E E												
Se v		b									$\bot$	
e Ce		С										
ervi		·									+	
S		d										
Program Service Revenue		<u></u>										
Pro				_							+-	
		<b>f</b> All other progra	am service revenue.									
		<b>9 Total.</b> Add line	es 2a-2f <b></b> .		C							
			3 Investment income	(including di	vider	nds, interest, and		0				
			other 49imilareafrounts)es	tmant of tax	~	ant bond nuccoods		0		<u> </u>		
								0				
			<b>5</b> Royalties	(i) F		(ii) Personal	1					
			<b>6a</b> Gross rents	6a	Cui	(II) T CISOIIII	•					
			<b>b</b> Less: rental expenses	6b								
			<b>c</b> Rental income or	6c								
			(loss)  d Net rental income	e or (loss)				0				
				(i) Sec	uritie	es (ii) Other						
			<b>7a</b> Gross amount	7a								
			from sales of assets other									
•			than inventory									
au			<b>b</b> Less: cost or other basis and	7b								
ě			sales expenses									
7			<b>c</b> Gain or (loss)	7c								
Other Revenue			<b>d</b> Net gain or (loss		_			0				
0			<b>8a</b> Gross income from ful (not including \$	ndraising events o								
			contributions reported See Part IV, line 18									
						Ba						
			<b>b</b> Less: direct expe			8b vonts		0				
			• Net income or (10)	oo, mum numan	a15111	ig events		3				
			<b>9a</b> Gross income from	n gaming								
			activities See Part IV, line 1	9	9	9a						
			<b>b</b> Less: direct expe	nses		9b		•				
			c Net income or (los	ss) from gami	ing a	ctivities		0				
			<b>10a</b> Gross sales of inv	entory, less								
			returns and allow		1	0a						
			<b>b</b> Less: cost of goo	ds sold	1	0b						
			c Net income or (lo	ss) from sales	of ir	nventory		0				
						Business Cod	е					
			11a									
			b									
OFF	· ·	Dovonustate : A	_		_							
OtherRevenueMiscAm		kevenueMiscAmt	с								_	
			<b>d</b> All other revenue									
			<b>e Total.</b> Add lines 1	1a-11d .				0				
			12 Total revenue. Se	e instructions	5.							
							4,	485,864				

or	m 990 (2023)				Page <b>10</b>
Р	art IX Statement of Functional Expenses				
	Section 501(c)(3) and 501(c)(4) organizations must	•		·	
	Check if Schedule O contains a response or note to	any line in this Part			
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0			
2	2 Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	335,815	248,503	47,014	40,298
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			
7	Other salaries and wages	258,155	191,035	36,142	30,978
	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0	·	,	· · · · · · · · · · · · · · · · · · ·
_	Ohban anglawa banafika	83,241	61,598	11,654	9,989
	Other employee benefits	49,693	36,773	6,957	5,963
	Payroll taxes	49,093	30,773	0,937	3,903
	Fees for services (non-employees):	0			
	a Management	12,012	10,158	1,854	
	b Legal	291,603	246,599	45,004	
	c Accounting	291,603	246,399	45,004	
	d Lobbying	0			
	e Professional fundraising services. See Part IV, line 17	-			
	f Investment management fees	0	220.070	50.424	
,	g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	379,202	320,078	59,124	
12	Advertising and promotion	20,302	14,820		5,482
	Office expenses	0			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	35,967	35,967		
17	Travel	50,673	45,099	3,547	2,027
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .	0			
19	Conferences, conventions, and meetings	51,321	46,702	4,619	_
20	Interest	0			
21	Payments to affiliates	0			_
22	Depreciation, depletion, and amortization	2,772		2,772	_
23	Insurance	0			_
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a Meeting Expenses	154,147	147,981		6,166
	<b>b</b> Telecommunications	30,251	28,436	1,815	
	c Other Expenses	13,914	6,540	5,704	1,670
	d Membership dues and Fees	11,348	6,809	4,539	
	e All other expenses	28,846	20,214	6,174	2,458
25	Total functional expenses. Add lines 1 through 24e	1,809,262	1,467,312	236,919	105,031
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).				

		(2023)				Page <b>11</b>
Pa	art X	Balance Sheet				_
		Check if Schedule O contains a response or not	e to any line in this Part IX .			🗆
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing		2,477,094	1	2,691,193
	2	Savings and temporary cash investments			2	0
	3	Pledges and grants receivable, net		1,022,134	3	2,434,742
	4	Accounts receivable, net			4	0
	5 6	Loans and other receivables from any current or trustee, key employee, creator or founder, subst controlled entity or family member of any of the Loans and other receivables from other disquality	cantial contributor, or 35% se persons		5	0
		under section $4958(f)(1)$ ), and persons describe	ed in section 4958(c)(3)(B)		6	0
S	7	Notes and loans receivable, net			7	0
Assets	8	Inventories for sale or use			8	0
AS	9	Prepaid expenses and deferred charges		41,849	9	78,235
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>0a</b> 14,439			
	ь	Less: accumulated depreciation	<b>Ob</b> 9,668	6,086	<b>10</b> c	4,771
	11	Investments—publicly traded securities .			11	0
	12	Investments—other securities. See Part IV, line	11		12	0
	13	Investments—program-related. See Part IV, line	11		13	0
	14	Intangible assets			14	0
	15	Other assets. See Part IV, line 11		2,439	15	1,685,194
	16	Total assets: Add lines 1 through 15 (must equa	al line 33)	3,549,602	16	6,894,135
	17	Accounts payable and accrued expenses		288,920	17	203,840
	18	Grants payable		18		
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
S	21	Escrow or custodial account liability. Complete l	Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to any current or form- key employee, creator or founder, substantial co controlled entity or family member of any of the	ntributor, or 35%			
E.		· · · · · ·	,		22	
	23	Secured mortgages and notes payable to unrela			23	
	24 25	Other liabilities (including federal income tax, parties, and other liabilities not included on line Complete Part X of Schedule D	ayables to related third	2,589	25	755,600
	26	<b>Total liabilities.</b> Add lines 17 through 25		291,509	26	959,440
es		Organizations that follow FASB ASC 958, check	here 🔽 and complete			
lanc	27	lines 27, 28, 32, and 33. Net assets without donor restrictions		1,603,548	27	3,325,286
Fund Balances	28		Ī	1,654,545	28	2,609,409
'n		Organizations that do not follow FASB ASC 958,	check here ▶ ☐ and			
or	29	complete lines 29 through 33. Capital stock or trust principal, or current funds			29	
ets	30	Paid-in or capital surplus, or land, building or equ	uipment fund		30	_
Assets	31	Retained earnings, endowment, accumulated income	ome, or other funds		31	_
	32	Total net assets or fund balances		3,258,093	32	5,934,695
Net	33	Total liabilities and het assets/fund balances		3,549,602	33	6,894,135
			<b>_</b>			Form <b>990</b> (2023)

2c

За

3b

Yes

Νo

Form 990 (2023)

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Schedule O.

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

Form 990 (2023) **Additional Data** Return to Form **Software ID:** 23017517 Software Version: 2023v5.1 Form 990, Special Condition Description: **Special Condition Description** 

### Schedule B OMB No. 1545-0047 Schedule of Contributors (Form 990) Attach to Form 990, 990-EZ, or 990-PF. 2023 Department of the Treasury Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service Name of the organization **Employer identification number** California YIMBY 82-3159002 Organization type (check one): Filers of: Section: Form 990 or 990-F7 ☐ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the **General Rule** or a **Special Rule**. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33<sup>1</sup>/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively

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

Name of organization California YIMBY Employer identification number 82-3159002

California fimbi		62-313900	2
Part I Contributors	Contributors (see instructions). Use duplicate copies of Part I if additional s	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
RESTRICTED	,	\$ RESTRICTED	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution Person
-			Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		<u> </u>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-			Person Payroll Noncash (Complete Part II for noncash contributions.)

(b)

Description of noncash property given

(a)

No. from

Part I

Schedule B (Form 990) (2023)

(d)

Date received

(c)

FMV (or estimate)

(See instructions)

Schedule I	B (Form 990) (2023)		Page 4
Name of o California	rganization YIMBY		Employer identification number 82-3159002
Part III	Exclusively religious, charitable, etc., contotal more than \$1,000 for the year from line entry. For organizations completing of \$1,000 or less for the year. (Enter this Use duplicate copies of Part III if additional spa	any one contributor. Complete co Part III, enter the total of exclusive information once. See instruction	olumns (a) through (e) and the following ely religious, charitable, etc., contributions
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, and ZI	(e) Transfer of gift P 4 Rela	tionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, and ZI	(e) Transfer of gift P 4 Rela	tionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, and ZI	(e) Transfer of gift P 4 Rela	tionship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-	Transferee's name, address, and ZI	(e) Transfer of gift P 4 Rela	tionship of transferor to transferee
			Schedule B (Form 990) (2023)

### SCHEDULE C (Form 990)

Department of the Treasury

Internal Revenue Service

**Employer identification number** 

☐ Yes

┌ Yes

(e) Amount of

political contributions

received and

promptly and directly delivered to a separate political organization. If none, enter -0-.

Schedule C (Form 990) 2022

57,373

57,373

82-3159002

(d) Amount paid from

filing organization's

funds. If none, enter

-0-.

OMB No. 1545-0047

Open to Public Inspection

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.

**Political Campaign and Lobbying Activities** 

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

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

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

Section 527 organizations: Complete Part I-A only.

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

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V,

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

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

line 35c (Proxy Tax) (see separate instructions), then Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of the organization

California YIMBY

Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A

Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for

definition of "political campaign activities."

2 Political campaign activity expenditures. See instructions .....

Volunteer hours for political campaign activities. See instructions ......

Part I-B Complete if the organization is exempt under section 501(c)(3).

Enter the amount of any excise tax incurred by the organization under section 4955 ......

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ...... If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....

3 Was a correction made? .....

If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... 1

Enter the amount of the filing organization's funds contributed to other organizations for section 527

exempt function activities .....

Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b..........

Did the filing organization file Form 1120-POL for this year? .....

5

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the

amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name

3

5

## For Paperwork Reduction Act Notice, see the instructions for Form 990.

(b) Address

(c) EIN

activity.

2a b

Part

1 2

1

2

3

Part III-B

filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying

During the year, did the filing organization attempt to influence foreign, national, state or local

Dues, assessments and similar amounts from members ......

accessable.

Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political

Yes | No

Page 3

Amount

legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
Volunteers?			
Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
Media advertisements?			
Mailings to members, legislators, or the public?			
Publications, or published or broadcast statements?			
Grants to other organizations for lobbying purposes?			
Direct contact with legislators, their staffs, government officials, or a legislative body?			
Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
Other activities?			
Total. Add lines 1c through 1i			
Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
If "Yes," enter the amount of any tax incurred under section 4912			
If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
III-A Complete if the organization is exempt under section $501(c)(4)$ , section $501(c)$ section $501(c)(6)$ .	(5), or		
		Yes	No
Were substantially all (90% or more) dues received nondeductible by members?	1		
Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		

Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section

501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A,

# Carryover from last year .....

line 3, is answered "Yes."

expenses for which the section 527(f) tax was paid).

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess

does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? ...... Taxable amount of lobbying and political expenditures. See Instructions ......

Part IV

Political Campaign Activities

**Supplemental Information** 

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and

2 (see instructions), and Part II-B, line 1. Also, complete this part for any additional information. Return Reference

Explanation

Part I-A, Line 1 - Direct and Indirect The organization advocates and supports measures aimed at making affordable housing more

Schedule C (Form 990) 2022

1

2a 2b

2c

3

**Software Version:** 2023v5.1

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

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

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

▶ Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

	me of the organization	Employer identification number								
Cai	ifornia YIMBY		82-3159002							
Pā	art I Organizations Maintaining Donor A									
	Complete if the organization answered '									
	Total number at end of year	(a) Donor advised funds	(b) Funds and other accounts							
1 2	Total number at end of year									
2 3	Aggregate value of grants from (during year)									
<i>3</i> 4	Aggregate value at end of year		_							
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?									
6	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 impermissible private benefit?									
Pa	rt II Conservation Easements. Complete if the organization answered '	Yes" on Form 990 Part IV line 7								
1	Purpose(s) of conservation easements held by the o									
_	Preservation of land for public use (e.g., recreati		historically important land area							
	Protection of natural habitat	Preservation of a co	ertified historic structure							
	Preservation of open space									
2	Complete lines 2a through 2d if the organization hel easement on the last day of the tax year.	d a qualified conservation contribution in th	ne form of a conservation  Held at the End of the Year							
а	Total number of conservation easements		2a							
b	Total acreage restricted by conservation easements	-	2b							
С	Number of conservation easements on a certified his	toric structure included in (a)	2c							
d	Number of conservation easements included in (c) a	equired after July 25, 2006, and not on a	2d							
3	historic structure listed in the National Register  Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year									
	Number of states where property subject to conserv	ation parament is located								
4		<del></del>								
5	Does the organization have a written policy regarding violations, and enforcement of the conservation eas		Yes No							
6	Staff and volunteer hours devoted to monitoring, ins year 	pecting, handling of violations, and enforcin	ng conservation easements during the							
7	Amount of expenses incurred in monitoring, inspecti	ng, handling of violations, and enforcing co	nservation easements during the year							
8	Does each conservation easement reported on line 2 (B)(i) and section 170(h)(4)(B)(ii)?									
9	In Part XIII, describe how the organization reports of									
	balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	ments.								
Pai	rt III Organizations Maintaining Collection Complete if the organization answered '		r Other Similar Assets.							
1a	If the organization elected, as permitted under FASE of art, historical treasures, or other similar assets he service, provide, in Part XIII, the text of the footnot	B ASC 958, not to report in its revenue stated for public exhibition, education, or resea	arch in furtherance of public							
b	If the organization elected, as permitted under FASE art, historical treasures, or other similar assets held provide the following amounts relating to these item	for public exhibition, education, or researc								
	(i) Revenue included on Form 990, Part VIII, line 1 .		<b>&gt;</b> \$							
(	ii) Assets included in Form 990, Part X · · · · · ·		<b>-</b> \$							
2	If the organization received or held works of art, his following amounts required to be reported under FA		financial gain, provide the							
а	Revenue included on Form 990, Part VIII, line 1 $\cdot$		<b>&gt;</b> \$							
b	Assets included in Form 990, Part X		<b>&gt;</b> \$							

3	Using the organization's acquisition, access collection items (check all that apply):	ion, and other	r records, ch	neck any	of the follo	wing that	are a signifi	cant use of its	
а	Public exhibition		d	☐ Lo	an or exch	ange prog	grams		
b	Scholarly research		e	Го	ther				
С	Preservation for future generations								
4	Provide a description of the organization's of Part XIII.	collections and	l explain hov	v they fu	rther the o	rganizatio	on's exempt p	ourpose in	
5	During the year, did the organization solicit	or rocoivo do	nations of a	rt histor	ical troacur	os or oth	or cimilar		
3	assets to be sold to raise funds rather than			•				☐ Yes ☐ N	No
Pa	rt IV Escrow and Custodial Arrange Complete if the organization and Part X, line 21.		on Form	990, Pa	rt IV, line	9, or re	ported an a	amount on Fo	rm 990,
1a	Is the organization an agent, trustee, custo included on Form 990, Part X?							Yes N	lo
ь	If "Yes," explain the arrangement in Part X	III and comple	ete the follov	wing tab	e:		1A	mount	
c	Beginning balance	•		_		1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amount on					dial acco	unt linhility?	□ Yes □ N	lo
Za	• • •	FUIIII 990, Pai	it X, iiile 21,	, ioi esci	ow or custo	Julai acco	unt nability n		
b	If "Yes," explain the arrangement in Part X	III. Check her	e if the expl	anation	has been p	rovided ir	Part XIII .	· · · · □	
Pa	rt V Endowment Funds.		U	000 D-	at TV / Page	10			
	Complete if the organization and	(a) Current		990, Pa Prior year			(d) Three yea	ars back (e) Four	vears back
1a	Beginning of year balance	(u) current	, cui (2)	Titlor year	(6) 1110	years back	(u) mice yee	no back (C) roar	years back
	Contributions								
С	Net investment earnings, gains, and losses								
		l I	1		i		1	1	
	Grants or scholarships								
	Other expenditures for facilities and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the cui	rent year end	balance (lin	ne 1g, co	lumn (a)) h	eld as:			
а	Board designated or quasi-endowment		<del>.</del>						
b	Permanent endowment								
С	Term endowment  The percentages on lines 2a, 2b, and 2c sh	ould ogual 10	10.0%						
За	Are there endowment funds not in the possed organization by:	•		that are	held and ad	dminister	ed for the	Ye	es No
	(i) Unrelated organizations							3a(i)	1.0
	(ii) Related organizations							3a(ii)	
b	If "Yes" on 3a(ii), are the related organizat	ions listed as	required on	Schedul	e R?			3b	
4	Describe in Part XIII the intended uses of t	he organizatio	n's endowm	ent fund	ls.				
Pa	rt VI Land, Buildings, and Equipm								
	Complete if the organization ans	swered "Yes							
	Description of property  (a) Cost or oth (investme	•	) Cost or other	r basis (ot	ner) (c) Ac	ccumulated	depreciation	(d) Book v	aiue
1a	Land								
b	Buildings								
c	Leasehold improvements								
	F. Marian			1.4	130		0.669	<u></u>	4 771

**Total.** Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) .

Schedule D (Form 990) 2022  Part VII Investments - Other Securities.			Page <b>3</b>
Complete if the organization answered "Yes" on Form			
<ul><li>(a) Description of security or category (including name of security)</li></ul>	(b) Book value	(c) Method o Cost or end-of-ye	
(1) Financial derivatives	·		
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	<b>•</b>		
Part Investments - Program Related. Complete if the organization answered 'Yes' on Form  (a) Description of investment		Book value (c) N	), Part X, line 13.  Iethod of valuation:  nd-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)  Part IX Other Assets.	•		
Complete if the organization answered 'Yes' on Form 9  (a) Description	990, Part IV, l	ine 11d. See Form 990	, Part X, line 15. <b>(b)</b> Book value
(1)Due From Related Party (2)Right of Use Asset			1,497,219 187,974
(3)Rounding			107,974
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)  Part X Other Liabilities.			1,685,194
Complete if the organization answered 'Yes' on Form 9 See Form 990, Part X, line 25.	990, Part IV, li	ine 11e or 11f.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes Due to Related Party			558,976
Lease Liability			196,624
<b>Total.</b> (Column (b) must equal Form 990, Part X, col.(B) line 25.)			755,600

Schedule D (Form 990) 2022

Part XII

1

2

3

Page 4

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements 1 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:

2a Net unrealized gains (losses) on investments . . . .

2b

Donated services and use of facilities . . . . . . . 

3

Total expenses and losses per audited financial statements . . .

Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities . . . . . .

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b

Subtract line 2e from line 1 . . . . .

Other (Describe in Part XIII.) . . . . .

Amounts included on Form 990, Part VIII, line 12, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . Other (Describe in Part XIII.) . . . . . .

Add lines 4a and 4b . . . .

4a 4b

2a

2b

2c

2d

4a

4b

2c 2d

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

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

> 2e 3

> > 4c

2e

4c

1

Part XIII

Add lines 4a and 4b .

Supplemental Information Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line

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

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . . . . . .

Return Reference Explanation

Part X: FIN48 Footnote Income Taxes - California YIMBY is exempt from income taxes under Internal Revenue code section 501(C)(4). California YIMBY received their notification letter from the IRS dated March 22, 2019. Retroactively applies to October 11, 2017. Schedule D (Form 990) 2022

Sch	edule J	Compensation Information								
			ers, Directors, Trustees, Key Employees, and Highest Compensated Employees Janization answered "Yes" on Form 990, Part IV, line 23.  Attach to Form 990.							
	rtment of the Treasury  all Revenue Service  Actual to Torini 950.  The Treasury of the Treasu									
	ne of the organiz	zation		Employer iden	tification n	umber				
Calli	OIIIIa TIMBT			82-3159002						
Pa	rt I Questi	ons Regarding Compensation	n							
						Yes				
1a		, , ,	vided any of the following to or for a p to provide any relevant information r							
	First-class	or charter travel	Housing allowance or reside	nce for personal use						
	Travel for	companions	Payments for business use of	of personal residence						
	Tax idemn	ification and gross-up payments	Health or social club dues or	initiation fees						
	Discretion	ary spending account	Personal services (e.g., maid	, chauffeur, chef)						
b	•	•	organization follow a written policy reg escribed above? If "No," complete Pa		1b	,				
2	_	·	reimbursing or allowing expenses incu	•	2					

1545-0047

ection

Yes

No

Indicate which, if any, of the following the filing 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 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? . . . . . . . . . . . . . . . 4b Participate in, or receive payment from, a supplemental nonqualified retirement plan? Participate in, or receive payment from, an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. 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: 5a Νo Any related organization? . . . . . . If "Yes," on line 5a or 5b, describe in Part III.

Νo Νo Νo 5 Νo 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: 6a Νo Νo If "Yes," on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed 7 Νo 8 Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe

8 Νo If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50053T Schedule J (Form 990) 2023 Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii). Do not list any individuals that are not listed in <b>Note.</b> The sum of columns (B)(i)-(iii) for each listed individual must eq	on Fo	orm 990, Part VII.						that individual.
(A) Name and Title	aui (i	(B) Breakdown	of W-2, 1099-MIS and/or 1099-NEC	C compensation,	(C) Retirement and other	(D) Nontaxable	(E) Total of columns	(F) Compensation in
	C		(ii) Bonus & incentive compensation	(iii) Other reportable compensation	deferred compensation	benefits	(B)(i)-(D)	column (B) reported as deferred on prior Form 990
1 Brian Hanlon Executive Dir.	(i)	238,065	97,750		10,058		345,873	
Excedite 511.	(ii)							
2 Konstantin A Hatcher Sr. Dir. Comm. Imp	(i)	137,190			5,570	10,076	152,836	_
St. Dir. Collilli. Illip	(ii)							
3 Matthew M Lewis Director of Communications	(i)	152,330			6,160	11,507	169,997	
	(ii)							
4 Melissa Breach Senior Vice President & COO	(i)	199,930	25,000		8,866		233,796	
	(ii)							
5 Robyn Leslie Dir. of Alliance	(i)	138,762			5,593	7,387	151,742	
	(ii)							
							Schedule J (	Form 990) 2023

Schedule J (Form 990) 2023 Page 3 Part 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 J (Form 990) 2023

Return Reference Explanation



**SCHEDULE 0** 

Name of the organization

Department of the Treasury

Internal Revenue Service

California YIMBY

(Form 990)

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

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.gov/Form990 for the latest information.

**Employer identification number** 

82-3159002

**Open to Public** Inspection

OMB No. 1545-0047

Return Reference	Explanation
Form 990, Part VI, Section B, Line 11b	The Direct of Finance and Administration and President/CEO review and approve the 990 for filing. The Board will review the returns after submission
Form 990, Part VI, Section B, Line 12c	All staff and Board Members are asked to renew their conflict of interest statements annually and disclose all applicable affiliations. These statements are reviewed by management annually.
Form 990, Part VI, Section B, Line 15a	The President/CEO and Vice President meet with the non-compensated volunteer Board Members to develop the salary ranges for staff. Research was conducted to locate the average salary for the positions.
Form 990, Part VI, Section B, Line 15b	The President/CEO and Vice Presient meet with the non-compensated volunteer Board Members to develop the salary ranges for staff. Research was conducted to locate the average salary for the positions.
Form 990, Part VI, Section C, Line 19	Governing documents, financial statements, and tax returns are available upon request.
For Paperwork Redu	ction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat. No. 51056K Schedule O (Form 990) 2023

### SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

### **Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

Go to  $\underline{\textit{www.irs.gov/Form990}}$  for instructions and the latest information.

2023
Open to Public

Inspection

**Employer identification number** 

California YIMBY 82-3159002 Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. (b) (a) (f) Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state Total income End-of-year assets Direct controlling or foreign country) entity Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. (c) (d) (e) (g) Name, address, and EIN of related organization Exempt Code section Primary activity Legal domicile (state Public charity status Direct controlling Section or foreign country) (if section 501(c)(3)) entity 512(b) (13)controlled entity? Yes No (1) California YIMBY Victory Fund PAC Support Affordable Housing CA 527 No 1121 L Street Suite 210 **Policies** N/A Sacramento, CA 95814 82-3984479 (2)California YIMBY Education Fund Support Affordable Housing CA 501(c)(3) PC No 1121 L Street Suite 210 Policies N/A Sacramento, CA 95814 85-1438188 Cat. No. 50135Y Schedule R (Form 990) 2023 For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34,
because it had one or more related organizations treated as a partnership during the tax year.

(a)  Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	Disprop	n) rtionate tions?	(i) Code V-UBI amount in box 20 of Schedule K- 1 (Form 1065)	part		<b>(k)</b> Percentage ownership
							Yes	No		Yes	No	ļ
								-			-	
										_		
Part IV Identification of Related Organizations								answered	d "Yes" on	Form 9	90, Part	IV, line

34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)  Name, address, and EIN of related organization	<b>(b)</b> Primary activity	<b>(c)</b> Legal domicile	(d) Direct controlling entity	(e) Type of entity (C corp, S	(f) Share of total income	(g) Share of end- of-year	<b>(h)</b> Percentage ownership	Section 5 controlled	12(b)(13)
		(state or foreign country)		corp, or trust)		assets		Yes	No
	•			•	•		Schedule	R (Form 99	0) 2023

chedule R (Form 990) 2023					Pag	je <b>3</b>				
Part V Transactions With Related Organizations. Complete if the organization answere	d "Yes" on Form 9	90, Part IV, line	34, 35b, or 36.							
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No				
f 1 During the tax year, did the orgranization engage in any of the following transactions with one or more rela	ated organizations lis	sted in Parts II-IV?								
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity · · · · ·				1a		No				
$f b$ Gift, grant, or capital contribution to related organization(s) $\dots$ $\dots$ $\dots$ $\dots$ $\dots$ $\dots$ $\dots$ $\dots$				1b		No				
${f c}$ Gift, grant, or capital contribution from related organization(s)				1c		No				
f d Loans or loan guarantees to or for related organization(s)										
<b>e</b> Loans or loan guarantees by related organization(s)				1e		No				
$\boldsymbol{f}$ Dividends from related organization(s)				1f		No				
<b>g</b> Sale of assets to related organization(s) · · · · · · · · · · · · · · · · · · ·				<b>1</b> g		No				
h Purchase of assets from related organization(s)				1h		No				
i $$ Exchange of assets with related organization(s)				1i		No				
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j		No				
${f k}$ Lease of facilities, equipment, or other assets from related organization(s)				1k		No				
l Performance of services or membership or fundraising solicitations for related organization(s)				11		No				
$\dot{\mathbf{m}}$ Performance of services or membership or fundraising solicitations by related organization(s)				1m		No				
${f n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		No				
<b>o</b> Sharing of paid employees with related organization(s) $\cdots$				10	Yes					
<b>p</b> Reimbursement paid to related organization(s) for expenses				1p		No				
${f q}$ Reimbursement paid by related organization(s) for expenses				1q		No				
r Other transfer of cash or property to related organization(s)				1r		No				
<b>s</b> Other transfer of cash or property from related organization(s)				<b>1</b> s		No				
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete the	nis line, including cov	vered relationships	and transaction thresholds.							
(a) Name of related organization	(b) Transaction type (a-s)	<b>(c)</b> Amount involved	(d) Method of determining am	ount ir	nvolved					
			-							

Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

revenue) that was not a related organization. See histi										<del></del>				
(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	end-of-year	(h) Disproprtionate allocations?		(i) Code V-UBI General or managing partner? of Schedule K-1		ral or aging	ng ownership	
			tax under sections 512- 514)	Yes	No			Yes	No	(Form 1065)	Yes	No		
								_						
								<u> </u>						
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