990 **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2023

Department of the Treasury Internal Revenue Service Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

A	For the 2	2023 calend	dar year, or tax year beginning	01/01/2023	and ending	l	12/31/2	2023					
В	Check if a	pplicable:	C Name of organization SEE TUR	TLES				D Emplo	oyer identification number				
	Address c	hange	Doing business as						81-4325149				
	Name cha	nge	Number and street (or P.O. box if	mail is not delivered to street add	ress)	Room	n/suite	E Teleph	none number				
	Initial retur	'n	5605 SE Rural St					800-215-0378					
	Final return	n/terminated	City or town, state or province, co	ountry, and ZIP or foreign postal co	ode								
	Amended	return	Portland, OR 97206	G Gross receipts \$ 577,667									
	Application	n pending	F Name and address of principal offi	icer: Brad Nahill			H(a) Is this a gro	oup return fo	or subordinates? Yes Vo				
			5605 SE Rural St, Portland, Ol	R 97206			H(b) Are all su	ubordinat	es included? Yes No				
I	Tax-exem	pt status:	✓ 501(c)(3)) (insert no.)	(1) or 527	7	If "No," attach	n a list. Se	ee instructions.				
J	Website:	www.see	turtles.org	·			H(c) Group ex	exemption number					
K	Form of org	ganization: 🗸	Corporation Trust Associate	tion Other	L Year of for	mation	2016	M State	of legal domicile: OR				
Р	art l	Summa	ry										
	1 E	Briefly des	cribe the organization's missi	ion or most significant acti	vities: SEE	Turtle	es connects	people	with sea turtles in				
Se		Briefly describe the organization's mission or most significant activities: SEE Turtles connects people with sea turtles in meaningful, personal and, memorable ways. We help the sea turtle community connect, grow, and thrive by supporting											
Activities & Governance		(Continued	on Schedule O, Statement 1)										
/eri	2	Check this	box \square if the organization di	scontinued its operations	or disposed	d of m	ore than 25	% of it	s net assets.				
ő	3 1	Number of	voting members of the gove	rning body (Part VI, line 1a)			3	7				
∞	4 1	Number of	independent voting member	s of the governing body (P	art VI, line	1b) .		4	6				
ties	5 T	otal numb	oer of individuals employed in	n calendar year 2023 (Part	V, line 2a)			5	2				
ξį	6 T	Total numb	per of volunteers (estimate if r	necessary)				6	0				
Ac	7a T	Total unrela	ated business revenue from F	Part VIII, column (C), line 12	2			7a	0				
	b N	Vet unrelat	ed business taxable income	from Form 990-T, Part I, lin	ne 11			7b	0				
					Prior Year		Current Year						
ø	8 (Contributio	ons and grants (Part VIII, line	1h)			5	27,681	434,668				
Revenue	9 F	Program se	ervice revenue (Part VIII, line :	2g)			1	47,075	140,975				
ě	10 li	nvestment	income (Part VIII, column (A)), lines 3, 4, and 7d)				26	0				
ш	11 (Other reve	nue (Part VIII, column (A), line			2,972	1,804						
	12 T	otal reven	ue-add lines 8 through 11 (m	nust equal Part VIII, column	(A), line 12)		6	77,754	577,447				
			l similar amounts paid (Part I)			3	84,737	266,334					
	14 E	Benefits pa	aid to or for members (Part IX	(, column (A), line 4)				0	0				
S	15	Salaries, ot	her compensation, employee b	penefits (Part IX, column (A),	, lines 5-10)		1	24,617	133,188				
Expenses	16 a F	Profession	al fundraising fees (Part IX, c	olumn (A), line 11e)				0	0				
xbe	b T	Total fundr	aising expenses (Part IX, colu	umn (D), line 25)	0								
Ш	17 (Other expe	enses (Part IX, column (A), line	es 11a-11d, 11f-24e) .			1	68,750	148,131				
	18 T	Total expe	nses. Add lines 13–17 (must	equal Part IX, column (A), I	ine 25) .	547,653							
		Revenue le	ess expenses. Subtract line 1	8 from line 12				-350	29,794				
Net Assets or Fund Balances						Beg	inning of Curre	ent Year	End of Year				
set	20 T	Total asset	s (Part X, line 16)					92,294	122,088				
at As	21 T		ties (Part X, line 26)					0	0				
			or fund balances. Subtract li	ne 21 from line 20				92,294	122,088				
Pa	art II	Signatu	re Block										
			, I declare that I have examined this r e. Declaration of preparer (other than						my knowledge and belief, it is				
Sig	nn	Cianatura	of officer				Date						
He	-	Signature					Date						
пе	1 C		nill, President int name and title										
				Prenarer's signature		Date		r	if PTIN				
Pa	id	FillivType	preparer's name	Preparer's signature		Date		Check self-emp	─ 」"				
	eparer	Fig 2:											
Us	e Only	Firm's nan			ı's EIN								
Ma	v the IRS	Firm's add	ress this return with the preparer s	e no.									

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Part	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
•	SEE Turtles connects people with sea turtles in meaningful, personal and, memorable ways. We help the sea turtle community
	connect, grow, and thrive by supporting community-based conservation efforts. Our programs provide funding, resources, and
	tools to protect endangered sea turtle species in the Global South.
	tools to protect entangered sea turne species in the Global South.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
3	
_	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$220,292 including grants of \$204,330) (Revenue \$242,217)
	Billion Baby Turtles: Financial support for community organizations protecting sea turtle nesting beaches around the world.
4b	(Code:) (Expenses \$ 116,812 including grants of \$ 0) (Revenue \$ 140,975)
	SEE Turtles Conservation Tours: Volunteer trips offer people the opportunity to participate in hands-on sea turtle research and
	conservation efforts. These trips provide volunteer help to local organizations, generate income for coastal communities, and
	adjusts people on how to help people protect one turtles
	educate people on now to help people protect sea turties.
	(O
4c	(Code:) (Expenses \$ 31,532 including grants of \$ 7,100) (Revenue \$ 32,896)
	Too Rare to Wear: Working to end the trade in illegal tortoiseshell around the world
4d	Other program services (Describe on Schedule O.) See Schedule O, Statement 2
	(Expenses \$ 146,994 including grants of \$ 54,903) (Revenue \$ 160,106)
4e	Total program service expenses 515,630

orm 99	90 (2023)		F	Page
art	IV Checklist of Required Schedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
-	complete Schedule A	1	•	
2 3	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I </i>	3	V	~
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	5		,
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		,
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		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		,
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? <i>If "Yes," complete Schedule D, Part IV</i>	9		\ \
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V </i>	10		,
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		,
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? <i>If "Yes," complete Schedule D, Part VII</i>	11b		,
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII </i>	11c		,
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? If "Yes," complete Schedule D, Part IX	11d		,
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 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>	11e		~
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		,
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		,
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a	'	'
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? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	14b	~	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	~	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		,
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? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		,
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		,
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		~
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? 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	20b 21	~	

Part	Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		~
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		~
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		~
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		~
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		_
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		~
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		,
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," <i>complete Schedule L, Part IV</i>	28a		,
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
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		_
29 30	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29		v
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	31		<i>'</i>
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? <i>If "Yes," complete Schedule R, Part I</i>	33		,
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		~
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		V
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		_
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		~
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	~	
Part	Object if Oak adula Oa antalas a managana annata ta annalisa is this Bad V			
	Check if Schedule O contains a response or note to any line in this Part V	• •	Yes	No
1a b c	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
J	reportable gaming (gambling) winnings to prize winners?	1c		~

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

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Part VI

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 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. 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 2 1 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 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 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? 11a **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 1 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA, OR, WA 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Own website Other (explain on Schedule O) Another's website ✓ Upon request Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records. Brad Nahill, (800)215-0378

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

☐ Check this box if neither the organization no	r any relate	a org	anız	atic	on c	ompe	ensa	ated any current (officer, director,	or trustee.
				(C)					
(A)	(B)	١			sition			(D)	(E)	(F)
Name and title	Average hours per week	box,	(do not check more than one box, unless person is both an officer and a director/trustee)					Reportable compensation from the	Reportable compensation from related	Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee 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)	
Brad Nahill	40.00									
President		~		~	~	~		69,996	0	0
Jose Urteaga	1.00									
Director	0.00	~						0	0	0
Maureen Cunningham	1.00									
Director	0.00	~						0	0	0
Sheridan Samano	1.00									
Director	0.00	~						0	0	0
Hector Barrios-Garrido	1.00									
Director	0.00	~						0	0	0
Cristina Garcia	1.00									
Director	0.00	~						0	0	0
Dan Berman	1.00									
Treasurer	0.00			~				0	0	0

Part	VII Section A. Officers, Directors, 1	rustees,	Key I	Em	plo	yee	s, an	d F	lighest Compe	nsated Emplo	yees (continued)
	(A) Name and title	(B) Average hours	Position (do not check more than box, unless person is bo officer and a director/tru						(D) Reportable compensation	(E) Reportable compensation from related	(F) Estimated amount of other
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	rrom related organizations (W-2 1099-MISC/ 1099-NEC)	compensation / from the organization and related organizations
1b	Subtotal		٠						69,996	C	0
C	Total (add lines 1b and 1c)			•	•	•		•	(0.00)		
d	Total (add lines 1b and 1c)	but not	limite	ed 1	o t	hos	e lis	ted	above) who re	ceived more	_
	reportable compensation from the organi	ization							0		Vac Na
3	Did the organization list any former of employee on line 1a? <i>If "Yes," complete S</i>										
4	For any individual listed on line 1a, is the organization and related organizations	sum of re	portal	ble	con	пре	nsatio	n a	and other compe	nsation from th	h
5	individual										
Coati	for services rendered to the organization on B. Independent Contractors	rii res, c	ютірі	ete	SCI	ieai	ile J i	Or S	such person .		5 /
1	Complete this table for your five high compensation from the organization. Report	nest compo	ensation	ed	inde	epe	ndent lenda	cc r ve	ontractors that rear ending with or	eceived more	than \$100,000 of
	(A) Name and business add								(B) Description of serv		(C) Compensation
None											
2	Total number of independent contractor received more than \$100,000 of compens						ed to	th	nose listed abov	e) who	

Page 8

D V/III	Statement of Revenue
-2612 AVAIL	Statement of Revenue

		Check if Schedule	Осо	ntains a re	spon	se or note to an	ny line in this Pa	ırt VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
S, S	1a	Federated campaig	ns .		1a	10				
ant	b	Membership dues			1b	0				
င်္ခ ဧ	С	Fundraising events			1c	0				
Contributions, Gifts, Grants, and Other Similar Amounts	d	Related organization	ns .		1d	0				
	е	Government grants	(cont	ributions)	1e	0				
	f	All other contribution	ns, gi	fts, grants,						
tio er (and similar amounts no	ot incl	uded above	1f	434,658				
혈된	g	Noncash contribution								
ig ut		lines 1a-1f			1g	\$ 3,669				
a S	h	Total. Add lines 1a-	-1f .				434,668			
						Business Code				
Ce	2a	Conservation tours				541700	140,975	140,975	0	0
e Z	b									
gram Ser Revenue	С									
am	d									
g &	е									
Program Service Revenue	f	All other program se					0	0	0	0
	g	Total. Add lines 2a-	-2f .				140,975			
	3	Investment income								
		other similar amoun	nts) .				0	0	0	0
	4					nd proceeds	0	0	0	0
	5	Royalties					343	343	0	0
				(i) Rea	l	(ii) Personal				
	6a	Gross rents	6a							
	b	Less: rental expenses	6b							
	С	Rental income or (loss)	6с		0	0				
	d	Net rental income o	r (los	s)						
	7a	Gross amount from		(i) Securit	ties	(ii) Other				
		sales of assets								
		other than inventory	7a							
ě	b	Less: cost or other basis								
Revenue		and sales expenses .	7b							
ě.		Gain or (loss)	7с		0	0				
	d	Net gain or (loss)								
Other	8a	Gross income fro	m fu	ındraising						
0		events (not including		0						
		of contributions re								
		1c). See Part IV, line			8a					
		Less: direct expens			8b					
		Net income or (loss)	•		g eve	nts				
	9a	Gross income 1								
		activities. See Part			9a					
		Less: direct expens			9b					
		Net income or (loss)			ctivitie	es				
	10a	Gross sales of in		•						
		returns and allowan			10a	1,681				
		Less: cost of goods			10b	220				
	С	Net income or (loss)) from	sales of in	vento		1,461	0	0	1,461
ns						Business Code				
e e	11a									
lan en	b									
scellaneo Revenue	C									
Miscellaneous Revenue	d	All other revenue								
	е	Total. Add lines 11a					0			
	12	Total revenue. See	instr	uctions			577,447	141,318	0	1,461

Form 990 (2023) Page **10**

Part IX Statement of Functional Expenses

Section 50	1(c)(3) and 50)1(c)(4)	organ	nizations	must complete	all colu	ımns. A	VII othe	er or	ganizat	ions mus	t compl	ete colu	ımn (A	4).	
												,					

	Check if Schedule O contains a response		in this Part IX .		<u> L</u>
	t include amounts reported on lines 6b, 7b, , 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 .	50,500	50,500		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign				
_	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	215,834	215,834		
4		215,834	•		
4 5	Benefits paid to or for members	U	0		
Ū	trustees, and key employees				
•		69,996	62,996	7,000	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	46,772	46,772		
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	0	0		
9	Other employee benefits	5,329	0	5,329	
10	Payroll taxes	11,091	9,991	1,100	
11	Fees for services (nonemployees):				
а	Management	0	0		
b	Legal	0	0		
С	Accounting	0	0		
d	Lobbying	0	0		
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	0	0		
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A), amount, list line 11g expenses on Schedule O.) .	6,869	597	6,272	
12	Advertising and promotion	1,715	0	1,715	
13	Office expenses	627	-	627	
14	Information technology	18,191	18,018	173	
15	Royalties	0	0	-	
16	Occupancy	0	0		
17	Travel	20,394	20,394		
18	Payments of travel or entertainment expenses	20,071	20,071		
	for any federal, state, or local public officials	0	0		
19	Conferences, conventions, and meetings	-350	-350		
20	Interest	0	0		
21	Payments to affiliates	0	0		
22	Depreciation, depletion, and amortization .	0	0		
23	Insurance	3,953	0	3,953	
24	Other expenses. Itemize expenses not covered	3,733	0	3,733	
27	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	Tour nayments	81,509	81,509	0	0
a b	Merchant and bank fees	7,644	6,028	1,616	0
C	Contest prizes	2,217	2,217	1,616	0
d	Contest prizes Staff Training	1,918	2,217	1,918	0
e	All other expenses	3,444	1,124	2,320	0
25	Total functional expenses. Add lines 1 through 24e	547,653	515,630	32,023	0
26	Joint costs. Complete this line only if the	347,033	313,030	32,023	U
_•	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)				
	10110WING 301 30-2 (A30 330-120)				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	rt X		
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	92,294	1	111,553
	2	Savings and temporary cash investments	0	2	0
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	0	4	10,535
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons	0	5	0
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	0
ts	7	Notes and loans receivable, net	0	7	0
Assets	8	Inventories for sale or use	0	8	0
Ř	9	Prepaid expenses and deferred charges	0	9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities	0	11	
	12	Investments—other securities. See Part IV, line 11	0	12	
	13	Investments—program-related. See Part IV, line 11	0	13	
	14	Intangible assets	0	14	
	15	Other assets. See Part IV, line 11	0	15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	92,294	16	122,088
	17	Accounts payable and accrued expenses		17	
	18	Grants payable	0	18	0
	19	Deferred revenue	0		0
	20	Tax-exempt bond liabilities	0		0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	0	21	0
es	22	Loans and other payables to any current or former officer, director,			
≣		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons	0	22	0
_	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D			
				25	
_	26	Total liabilities. Add lines 17 through 25	0	26	0
Sec		Organizations that follow FASB ASC 958, check here vand complete lines 27, 28, 32, and 33.			
au	07		00.004	07	400.000
Bal	27 28		92,294		122,088
Ρ	20	Net assets with donor restrictions	0	20	0
ΞĒ		and complete lines 29 through 33.			
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds		29	
ts	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SSE	31	Retained earnings, endowment, accumulated income, or other funds.		31	
t A	32	Total net assets or fund balances	92,294	32	122,088
Se	33	Total liabilities and net assets/fund balances	92,294		122,088
			/=/2/T		122,000

Form 990 (2023) Page **12**

Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>		. 🗆
1	Total revenue (must equal Part VIII, column (A), line 12)			577,447
2	Total expenses (must equal Part IX, column (A), line 25)			547,653
3	Revenue less expenses. Subtract line 2 from line 1			29,794
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4			92,294
5	Net unrealized gains (losses) on investments			0
6	Donated services and use of facilities			0
7	Investment expenses			0
8	Prior period adjustments			0
9	Other changes in net assets or fund balances (explain on Schedule O)			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B))			122,088
Part	XII Financial Statements and Reporting			_
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>		<u> </u>
		_	Υe	es No
1	Accounting method used to prepare the Form 990: Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain Schedule O.	on		
_				
2a			а	
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled reviewed on a separate basis, consolidated basis, or both.	or		
	•			
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	•	b	
	separate basis, consolidated basis, or both.	ı a		
С	Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight	of		
C	the audit, review, or compilation of its financial statements and selection of an independent accountant? .		c	
	If the organization changed either its oversight process or selection process during the tax year, explain			
	Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t	the		
ou	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		a	\ \
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo t		<u> </u>	+
~	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.		b	
	, , , , , , , , , , , , , , , , , , , ,			

Form **990** (2023)

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service 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.

Open to Public Inspection

Name of the organization

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

Inspection | Employer identification number

	TURTLES						81-43	
Par		Reason for Public Cha						ons.
The c	•	ion is not a private founda		,		-	•	
1		urch, convention of churc					0(b)(1)(A)(i).	
2		nool described in section			-	-		
3		spital or a cooperative ho						/···
4	_	edical research organization ital's name, city, and state	•	onjunction with a nosp	oital desc	ribed in s	section 170(b)(1)(A)	(III). Enter the
5	-	rganization operated for		collogo or university	owned o		d by a gavernment	al unit described in
3		ion 170(b)(1)(A)(iv). (Com		college of university	owned o	і орегате	ed by a government	ai uniit described in
6		leral, state, or local gover	,	mental unit described	l in sacti c	n 170/h)	(1)(Δ)(_V)	
7		rganization that normally						the general public
-		ribed in section 170(b)(1)			port iron	a govon	innontal and or non	Tare general pashe
8		mmunity trust described in		•	Part II.)			
9		gricultural research organi				erated in	conjunction with a l	and-grant college
	or ur unive	liversity or a non-land-gra ersity:	nt college of agr	iculture (see instruction	ons). Ente	r the nan	ne, city, and state of	the college or
10	receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses							
44	acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)							
11 12		rganization organized and	•		-			out the nurneses of
12		or more publicly supported						
		ox on lines 12a through 12						
а	□т	ype I. A supporting organ	ization operated	. supervised, or contr	olled by i	ts suppo	rted organization(s).	typically by giving
	tl	ne supported organization	(s) the power to	regularly appoint or e	lect a ma	jority of t		
	s	upporting organization. Y	ou must comple	ete Part IV, Sections	A and B.			
b	□ T	ype II. A supporting organ	nization supervis	ed or controlled in co	nnection	with its s	supported organizati	on(s), by having
		ontrol or management of				persons	that control or man	age the supported
		rganization(s). You must	-	-				
С		ype III functionally integ						ally integrated with,
		s supported organization(, ,	•		-		
d	tl	Type III non-functionally in tequinatis not functionally intequirement (see instruction	grated. The orga	nization generally mu	st satisfy	a distribu	ution requirement an	• • • • • • • • • • • • • • • • • • • •
е	_	Check this box if the organ	•	•		-		ıl Tyne III
·		unctionally integrated, or						e ii, Type iii
f		he number of supported of						
g		e the following information	-	orted organization(s).				
	(i) Name o	of supported organization	(ii) EIN	(iii) Type of organization		rganization	(v) Amount of monetary	(vi) Amount of
				(described on lines 1–10 above (see instructions))	,	ir governing ment?	support (see instructions)	other support (see instructions)
				above (see instructions))			instructions)	manuctions)
					Yes	No		
(A)								
(B)								
(C)								
(D)								
(E)								

Schedule A (Form 990) 2023 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Part II

(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) 2019 **(b)** 2020 (d) 2022 (c) 2021 **(e)** 2023 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge **Total.** Add lines 1 through 3 . . . 4 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) **Public support.** Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2019 **(b)** 2020 (c) 2021 (d) 2022 (e) 2023 (f) Total 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business 9 activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) **Total support.** Add lines 7 through 10 11 Gross receipts from related activities, etc. (see instructions) 12 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) % 14 Public support percentage from 2022 Schedule A, Part II, line 14 15 331/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18

Schedule A (Form 990) 2023 Page **3**

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.)

Secti	on A. Public Support			•	•	,	·
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees						
_	received. (Do not include any "unusual grants.")	176,271	159,967	373,967	527,681	434,667	1,672,553
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	136,874	47,559	106,895	100,928	148,089	540,345
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						
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .	313,145	207,526	480,862	628,609	582,756	2,212,898
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 8	Add lines 7a and 7b						2,212,898
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6	313,145	207,526	480,862	628,609	582,756	2,212,898
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	440	188	1,233	26	12	1,899
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	440	188	1,233	26	12	1,899
11	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.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	313,585	207,714	482,095	628,635	582,768	2,214,797
14	First 5 years. If the Form 990 is for the organization, check this box and stop he	organization's	first, second,	third, fourth,	or fifth tax ye		501(c)(3)
Secti	on C. Computation of Public Suppor	t Percentage)				
15	Public support percentage for 2023 (line 8	, ,,,	•	, ,,,		15	99.91 %
16	Public support percentage from 2022 Sch					16	99.87 %
	on D. Computation of Investment In						
17	Investment income percentage for 2023 (-		17	0.09 %
18	Investment income percentage from 2022					18	0.13 %
19a	33 ¹ / ₃ % support tests – 2023. If the organ						
	17 is not more than 33 ¹ / ₃ %, check this box	_	_	-		_	_
b	331/3% support tests – 2022. If the organiz line 18 is not more than 331/3%, check this line 18 is not more than 331/3%, check this line 18 is not more than 331/3%.	oox and stop h e	ere. The organi	zation qualifies	as a publicly su	upported organi	zation .
20	Private foundation. If the organization di	d not check a b	oox on line 14	19a or 19b c	heck this box	and see instruc	tions

Schedule A (Form 990) 2023 Page 4

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.)

Se

Secti	on 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		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	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.			
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.	3b 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		
5а	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? If "Yes," provide detail in Part VI.	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 .	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>	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.)

Schedule A (Form 990) 2023 Page 5 Part IV **Supporting Organizations** (continued) Yes No Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? 11a **b** A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. 11c Section 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 or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No 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 Section D. All Type III Supporting Organizations Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 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 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete **line 2** below. The organization is the parent of each of its supported organizations. *Complete line 3 below.* С 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 Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b Parent of Supported Organizations. Answer lines 3a and 3b below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI. 3a

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in **Part VI** the role played by the organization in this regard.

3b

Schedule A (Form 990) 2023 Page **6**

				. ago -
Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	izations	
1	\Box Check here if the organization satisfied the Integral Part Test as a qualifying			
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Sect	
Sect	tion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7_	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	tion B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	tion C—Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	☐ Check here if the current year is the organization's first as a non-functional	ally i	integrated Type III suppor	ting organization
	(see instructions).			

Schedule A (Form 990) 2023 Page 7

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2023 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) Section E—Distribution Allocations (see instructions) **Underdistributions Distributable Excess Distributions** Pre-2023 Amount for 2023 Distributable amount for 2023 from Section C, line 6 2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2023 a From 2018 From 2019 **c** From 2020 **d** From 2021 **e** From 2022 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2023 distributable amount Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2023 from Section D, line 7: Applied to underdistributions of prior years Applied to 2023 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result 5 greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2024. Add lines 3j and 4c. Breakdown of line 7: Excess from 2019 . . . Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 . . . Excess from 2023 . . .

Schedule A (Form 990) 2023 Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part Part VI 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.)

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Open to Public Inspection

Employer identification number

SEE	TURTLES				81	1-4325149
Pai	General Information Form 990, Part IV, line		ies Outside	the United States. Com	nplete if the organization ar	nswered "Yes" on
1	For grantmakers. Does the other assistance, the grante award the grants or assistan	es' eligibility			selection criteria used to	✓ Yes □ No
2	For grantmakers. Describe outside the United States.	in Part V the	e organization	's procedures for monitorin	ng the use of its grants and	d other assistance
3	Activities per Region. (The fo	llowing Part	I, line 3 table o	can be duplicated if additior	nal space is needed.)	
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1)	North America (including Canad	0	1	Grantmaking	Grants for nesting beaches	33,691
(2)	Central America and the Caribb	0	0	Grantmaking	Grants for nesting beaches,	74,230
(3)	South America	0	0	Grantmaking	Grants for nesting beaches	5,600
(4)	Europe (including Iceland and C	0	0	Grantmaking	Funding for turtle nesting b	28,500
(5)	East Asia and the Pacific	0	0	Grantmaking	Grants for turtle nesting bea	47,500
(6)	Sub-Saharan Africa	0	0	Grantmaking	Funding for turtle nesting b	26,162
(7)						
(8)						
(9)						
(10)						
(11)						
(12)						
(13)						
(14)						
(15)						
(16)						
(17)						
3a	Subtotal					
b	sheets to Part I					
С	Totals (add lines 3a and 3b)	0	1			215,683

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part II Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. 1 (a) Name of (b) IRS code (c) Region (d) Purpose of (e) Amount of (f) Manner of (g) Amount of (h) Description (i) Method of organization section and EIN grant cash grant cash noncash of noncash assistance valuation (book, FMV, (if applicable) disbursement assistance appraisal, other) (1) Europe (including Ic Grant for protecting to 10.000 wire transfer 0 (2) Europe (including ld Grant for protecting to 18.500 wire transfer 0 (3)East Asia and the Pa Grant for protecting to 10,000 wire transfer 0 (4) East Asia and the Pa Grant for protecting to 10,000 wire transfer 0 (5) East Asia and the Pa Grant for protecting to 8.000 wire transfer 0 (6) Sub-Saharan Africa Grant for protecting to 10.000 wire transfer 0 (7) Central America and Funding for protecting 33.250 wire transfer 0 (8)North America (incl. Grant for protecting to 7.000 wire transfer 0 (9)North America (inclu Grant for protecting to 8.000 wire transfer 0 (10)North America (inclu Grant for protecting to 10.000 wire transfer 0 (11)South America Grant for fighting the 5,600 wire transfer 0 (12)Central America and Grant for protecting to 14,000 wire transfer 0 (13)Central America and Grant for protecting to 6.000 wire transfer 0 (14)(15)(16)2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . .

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Schedule F (Form 990) 2023

Schedule F (Form 990) 2023

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Schedule F (Form 990) 2023 Page **4**

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)	☐ Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)	☐ Yes	✓ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)	☐ Yes	✓ No

Schedule F (Form 990) 2023

Schedule F (Form 990) 2023 Page **5**

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Schedule F, Part I, Line 2 - The organization requires g rantees to fill out annual applications and reports with information on activities
conducted with funds. All grantees are checked against the OFAC sanctions list, site visits are performed when possible, and a group of
expert advisors provide input on grantees.
9

SCHEDULE I (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Employer identification number

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

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

SEE TURTLES 81-4325149 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ✓ Yes No Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990. Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of (g) Description of (h) Purpose of grant (book, FMV, appraisal, or government (if applicable) grant noncash assistance noncash assistance or assistance other) (1) Sch I, Stmt 1 (11)(12)11 0

Schedule I (Form 990) 2023 Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (e) Method of valuation (book, (b) Number of (c) Amount of (d) Amount of (f) Description of noncash assistance recipients cash grant noncash assistance FMV, appraisal, other) 3 5 6 Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Schedule I, Part I, Line 1 - The organization requires grantees to fill out annual applications and reports with information on activities conducted with funds. Site visits are performed when possible, a group of expert advisors provide input on grantees, and regular reporting on grant funds are required. Schedule I, Part I, Line 2 - The organization requires annual applications and reports on activities done with grant funds. Site visits are performed where possible, regular reports are required, and expert advisors are consulted for feedback.

SEE TURTLES

Form: **Schedule I (2023)** EIN: **81-4325149**

Page: 1 Part II, Line 1

Description of Grants and Other Assistance to Governments and Organizations in the United St.

		Recipient EIN	Amt. of cash grant	Amt. of non- cash asst.
Name and address	Sea Turtle Conservancy	59-6151069	15,000	0
	4581 NW 6th St Suite A			
	Gainesville, FL 32609			
IRC code section				
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Conservation of turtle nesting beaches			
Name and address	Amigos of Costa Rica	31-1714653	10,000	0
	PO Box 748			
	West Chester, PA 19381			
IRC code section				
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Protection of turtle nesting beaches in Costa Rica			

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Employer identification number Name of the organization **SEE TURTLES** 81-4325149 Form 990, Part IV, Line 11b - Form 990, Part VI, Section B, Line 11b - A draft of the Form 990 is provided via email to all board members for review and comment prior to filing with the IRS. Form 990, Part VI, Section B, Line 11b - A draft 990 form is discussed with the board treasurer and shared with all members of the board to ask questions. The board then votes on approving the 990 form. Form 990, Part VI, Section B, Line 12c - Board members review and confirm compliance with the conflict of interest policy on an annual basis. Form 990, Part VI, Section B, Line 15 - The organization determines compensation of the Executive Director using comparable salaries for executives of organizations that are similarly sized, in the same state, and have similar missions. The compensation is reviewed and approved by the board. Form 990, Part VI, Section C, Line 19 - The organization makes its governing documents, conflict of interest policy, and financial statements available to the public upon request. Governing documents are also available on the organization's website at https://www.seeturtles.org/board.

Schedule O, Statement 1 SEE TURTLES

Form: Form 990 (2023) EIN: 81-4325149

Page: 1 Part I, Line 1

Activity Or Mission Description

Description

community-based conservation efforts. Our programs provide funding, resources, and tools to protect endangered sea turtle species in the Global South.

Schedule O, Statement 2

Form: Form 990 (2023)

Page: **2**

SEE TURTLES

EIN: 81-4325149

Part III, Line 4d

Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	Sea Turtles & Plastic: provides support for coastal communities to remove plastic waste from sea turtle habitat.	59,515	47,303	68,316
	General programs: includes educational efforts to teach people about how to protect sea turtles	59,289	550	59,456
	Sea Turtle Inclusivity Fund: support for disadvantaged communities to participate in turtle conservation.	6,461	6,050	1,742
	Sea Turtle Week engages the sea turtle community and public to raise awareness about sea turtles and the threats they face.	17,439	1,000	15,592
	The Hatchery helps incubate new sea turtle conservation efforts.	4,290	0	15,000
Total:		146,994	54,903	160,106