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

OMB No. 1545-0047 2023 Open to Public Inspection

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information

<u>A</u>	For the	e 2023 calendar year, or tax year beginning $07/01/23$ , and ending $06/30/2$									
В											
Ш	Address change League, Inc.										
П	Name cha	Doing business as			887278						
Ħ		Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephon	ne number 723-8035						
_	Initial return			013	725-0055						
	terminated			•	ceipts\$ 7,025,115						
	Amended		1	<b>G</b> Gross red	ceipts\$ 7,025,115						
$\Box$	Application	Rent Griffin	H(a) Is this a gr	roup return for	subordinates Yes X No						
ш		131 Spring Street	H(b) Are all sul	subordinates included? Yes No							
		Charleston SC 29403	1 ''		. See instructions						
_	Toy eyes		╡ ′								
÷	I Tax-exempt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527  J Website: http://coastalconservationleague.org/ H(c) Group exemption number										
<u></u>			Year of formation: 1		M State of legal domicile: SC						
	Part I	organization: X Corporation Trust Association Other L  Summary	rear of formation:	909	M State of legal domicile: DC						
		Briefly describe the organization's mission or most significant activities:									
Ö	' -	We advocates to protect the natural environment of S	outh Caro	olina/s							
auc		for the benefit of all. We envision a South Carolina									
Ę.		thrives, air and water are clean, and natural		······································							
Governance	9 6	Check this box if the organization discontinued its operations or disposed of more than 2	05% of its not a								
ტ ფ	1			ا م ا	19						
		Number of independent voting members of the governing body (Part VI, line 1b)		—	19						
iţie		Fotal number of individuals employed in calendar year 2023 (Part V, line 2a)			60						
Activities		Fotal number of valuations (optimate if necessary)			180						
ď	1	Fatal consists of business assessed from Dark VIII. as bosses (O) line 40			0						
		Net unrelated business revenue from Part VIII, column (C), line 12			0						
	51	vet unrelated business taxable income nom romi 350-1, rait i, line 11	Prior Ye		Current Year						
a)	8 (	Contributions and grants (Part VIII, line 1h)	4,383	3,264	3,545,893						
Revenue		Program service revenue (Part VIII, line 2g)	-		0						
eVe		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)	1,335	5,936	864,411						
Ř		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	434,156		455,879						
		Fotal revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	6,153	3,356	4,866,183						
	13 (	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	1,096		1,410						
	14 E	Benefits paid to or for members (Part IX, column (A), line 4)			0						
S	15 5	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,287,220		3,505,131						
nse	16a F	Professional fundraising fees (Part IX, column (A), line 11e)			0						
xpenses	b⊺	Professional fundraising fees (Part IX, column (A), line 11e)  Total fundraising expenses (Part IX, column (D), line 25)  677,960									
ш	17 (	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,733	3,014	2,251,594						
	18 T	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	6,117	7,213	5,758,135						
		Revenue less expenses. Subtract line 18 from line 12		5,143	-891,952						
Net Assets or			Beginning of Cu		End of Year						
Sset	<b>20</b> T	Total assets (Part X, line 16)	21,292		21,361,928						
e e	21 7	Total liabilities (Part X, line 26)		1,842	873,085						
		Net assets or fund balances. Subtract line 21 from line 20	20,467	,629	20,488,843						
	Part II	Signature Block									
		nalties of perjury, I declare that I have examined this return, including accompanying schedules and s ect, and complete. Declaration of preparer (other than officer) is based on all information of which pre			of my knowledge and belief, it						
	40, 00110	Sinned by	paror riao arry iai	Ŭ_ /-	13/2025						
e:		Signature of officer Faith Rown James		I Date							
Sig	-	23863962342F451	Dimonto								
He	er e	Faith Rivers James Executive Type or print name and title	Directo	)T							
_		Print/Type preparer's name  Preparer's signature preparer's signature preparer's signature preparer's preparer	Date	Ohaali	if PTIN						
Pai	d	- Continuent of the second		Check	□"						
	parer	HIR M. Glaber, CIA		/25 self-en							
	e Only	Firm's name Glaser and Company, LLC 1859 Summerville Ave Ste 800	F	Firm's EIN	20-5788602						
	- J.n.y	Object of CO 2040E		N	843-849-0179						
Mar	v the ID	RS discuss this return with the preparer shown above? See instructions		Phone no.							
		vork Reduction Act Notice, see the separate instructions.			Form <b>990</b> (2023)						
DAA		ron nouvolon not motios, see the separate motions.			Form 330 (2023)						

Form 990 (2023) South Caroli			Page <b>2</b>
	m Service Accomplishmen		- Terl
	contains a response or note	to any line in this Part III .	<u>X</u>
	tect the natural o	a South Carolina	outh Carolina's coast coast where wildlife
Did the organization undertake any sprior Form 990 or 990-EZ?  If "Yes," describe these new services  Did the organization cease conducting	on Schedule O.		Yes X No
services?  If "Yes," describe these changes on a Describe the organization's program expenses. Section 501(c)(3) and 501 the total expenses, and revenue, if a	Schedule O. service accomplishments for each of (c)(4) organizations are required to ny, for each program service reporter.	report the amount of grants and ed.	ces, as measured by
Land, Water and Wil The objective of the conservation to furnatural habitats, as League accomplishes properly implemented habitat, and valuable about how to get in (Continued on Schedule (Continued on Sched	dlife is program is to ther our mission o nd the health of p this goal by ensu l to protect water le landscapes and volved in decision ale 0)  1,596,555 including gran e ng converted to un change, which re c health crisis fo the creation of 0	advocate for natof protecting clupeople and wildluring public polycommunicating to communicating to affecting the testing the presents an ecolor South Carolin Grow Food Carolin	ural resource ean and abundant water, ife. The Conservation icies are adequate and antity, wildlife o a broad audience se coastal assets.  )(Revenue \$ ) (Revenue \$ ) and the company of the conservation of t
marketing, promoting primarily to restau	g, and selling the cants in the Charl ver \$14.7 million	eir produce acros leston area. Sin	ss the coast, but
4c (Code: ) (Expenses \$ N/A	including gran	ts of\$	) (Revenue \$)
• • • • • • • • • • • • • • • • • • • •			
4d Other program services (Describe or	Schedule O.)		
(Expenses \$	including grants of\$	) (Revenue \$	)

Part IV **Checklist of Required Schedules** Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A X Is the organization required to complete Schedule B, Schedule of Contributors? See instructions Х 2 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to X candidates for public office? If "Yes," complete Schedule C, Part I 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 X 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 Х 5 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 Х "Yes," complete Schedule D, Part I 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Х 9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? If "Yes," complete Schedule D, Part V Х If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 11 VII, VIII, IX, or X, as applicable. Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI X 11a | Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII X 11b Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Х 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 X Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses X the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII X 12a 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 X Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 13 14a Did the organization maintain an office, employees, or agents outside of the United States? Х Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or X for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 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 Х 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? If "Yes," complete Schedule G, Part I. See instructions X 17 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on X Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from garning activities on Part VIII. line 9a? 19 X If "Yes," complete Schedule G, Part III 19 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H X 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 21 X domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II.

Form 990 (2023) South Carolina Coastal Conservation57-0887278

Part IV Checklist of Required Schedules (continued)

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	Officerist 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
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
d	to defease any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	24u		
<b>2</b> 50	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these			٦,
	persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule			
а	L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).  A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
а	"Vas." complete Schodule I. Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			<b>3</b> 7
22	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	33		
34	out IV and Part IV line 4	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and		3,	
D.	19? Note: All Form 990 filers are required to complete Schedule O.	38	<u> </u>	<u> </u>
r	art V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	Check is deficulted decirations a response of flote to any line in this fact v		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 51		1.03	1.10
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable  1b 0	1		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		

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Pa	art V Statements Regarding Other IRS Filings and Tax Compliance (cor	ntinued)		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   60			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax	returns?	2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Scheol		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or ot	-			
	a financial account in a foreign country (such as a bank account, securities account, or other financial	ncial account)?	4a		X
b	If "Yes," enter the name of the foreign country				
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Finance		_		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year		5a		_ <u>X</u> _
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter training to the control of	nsaction?	5b		_X_
С			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and d				v
	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
D	If "Yes," did the organization include with every solicitation an express statement that such contrib	outions or	٠.		
7			6b		
7	Organizations that may receive deductible contributions under section 170(c).	for goods			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly		70	х	
<b>L</b>	and services provided to the payor?		7a 7b	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which i	t woo	70	Λ	
С			7c		Х
d	required to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year	7d	70		22
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal bene		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit or		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file		7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	· · · · · · · · · · · · · · · · · · ·	7h		X
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaining				
	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 facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources				
	against amounts due or received from them.)	11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of F	1	12a		
b		12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а			13a		
	<b>Note:</b> 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				
	· · · · · · · · · · · · · · · · · · ·	13b			
	Enter the amount of reserves on hand	13c	145		v
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a 14b		X
b 15	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on School</i> to the propriet to the		140		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in rem		15		v
	excess parachute payment(s) during the year?  If "Yoe" see instructions and file Form 4730. Schoolule N.		15		X
16	If "Yes," see instructions and file Form 4720, Schedule N.  Is the organization an educational institution subject to the section 4968 excise tax on net investing the section 4968 excise tax on the investing the section 4968 excise tax on the secti	nent income?	16		X
10	If "Yes," complete Form 4720, Schedule O.	IGHT HICOHIG!	10		-/\
17	Section 501(c)(21) organizations. Did the trust, 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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Pa	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or change	_					
	Check if Schedule O contains a response or note to any line in this Part VI					iiisu	X
Sec	tion A. Governing Body and Management						_(==)
	¥ .					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	19	•			
	If there are material differences in voting rights among members of the governing body, or						
	if the governing body delegated broad authority to an executive committee or similar						
	committee, explain on Schedule O.						
b	Enter the number of voting members included on line 1a, above, who are independent	1b	19	9			
2	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?				2		<u>X</u>
3	Did the organization delegate control over management duties customarily performed by or under the direct						
	supervision of officers, directors, trustees, or key employees to a management company or other person?				3		<u>X</u>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was	filed?			4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?				5		X
6	Did the organization have members or stockholders?				6		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint						
	one or more members of the governing body?				7a		<u>X</u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,						
	stockholders, or persons other than the governing body?				7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the	e yea	r by t	he follow	ing:		
а	The governing body?				8a	X	
b	Each committee with authority to act on behalf of the governing body?				8b	Х	
9	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		<u>X</u>
Sec	tion B. Policies (This Section B requests information about policies not required by the	Inte	<u>rnal</u>	Reven	<u>ue C</u>		
					$\vdash$	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?				10a		<u>X</u>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,						
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?				10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	filing	the fo	rm? .	11a	X	
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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	e rise	to co	nflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"						
	describe on Schedule O how this was done				12c	X	
13	Did the organization have a written whistleblower policy?				13	X	
14	Did the organization have a written document retention and destruction policy?				14	Х	
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 decis						
a	The organization's CEO, Executive Director, or top management official				15a	X	
b	Other officers or key employees of the organization				15b	Х	
	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						77
	with a taxable entity during the year?				16a		X
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				44.		
0 -	organization's exempt status with respect to such arrangements?				16b		
	tion C. Disclosure	C 777	, ,,,	Mr. T	(T >C	ιτ.	
17	List the states with which a copy of this Form 990 is required to be filed AL, AR, CA, FL, GA, HI, IL, K				TT, MI	N	
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990	-ı (se	ction	5U1(C)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.						
40	X Own website Another's website X Upon request Other (explain on Schedule O)	lat	4	lia.			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of	intere	est po	псу,			
20	and financial statements available to the public during the tax year.	roco-	do				
20 .⊤⁄	State the name, address, and telephone number of the person who possesses the organization's books and bel Sandstrom 131 Spring Street, Suite A	recor	us.				
	narleston SC 2940	13		843	_72	5-2	166
L	101 1050011 SC 2940	,		073	- / 4:	J-Z	<i>-</i> 0 0

Form 990 (2	2023) South Carolina Coastal Conservation57-0887278	Page <b>7</b>
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Em	nployees, 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	to this table for all persons required to be listed. Report compensation for the calendar year ending with or within the	

- **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 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 or							on c	compensated any current	officer, director, or trustee	
(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	box	, unle cer ar	Pos heck ss pe	more rson i	than of s both or/truster Highest compensated	an	(D)  Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Kent Griffin	3.00	x		х				0	0	0
(2) Stephen Zoukis		-23							<u> </u>	<u> </u>
Vice Chair	2.00	x		x				0	0	0
(3) George Gephart,		<u>^</u>		Λ				0	0	0
Secretary	2.00	x		х				0	0	0
(4) Willaim Brenize	0.00 r	^		Λ				0	<u> </u>	<u> </u>
Treasurer	3.00 0.00	х		х				0	0	0
(5) Dr. Tamara Butl	er 1.00									
Board Member	0.00	x						0	0	0
(6) Andrew Carmines										
Board Member	1.00	x						0	o	0
(7) Ascanio Serena	di Lapi	gic	•							
Board Member	1.00	x						0	o	0
(8) Ceara Donnelley										
Board Member	1.00	x						0	o	0
(9) Francie Downing										<u> </u>
Board Member	1.00	x						0	0	0
(10) Lee Edwards	0.00	^						0	0	0
	1.00									
Board Member (11) Carol Ervin	0.00	X				$\vdash$		0	0	0
Board Member	1.00	x						0	0	0

Form 990 (2023) South Carolina Coastal Conservation57-0887278

Part VII Section A. Officers	s, Directors, Ti	ruste	ees,	Key	En	ploy	yees	s, and Highest Compens	ated Employees (continu	ıed)			
<b>(A)</b> Name and title	(B) Average hours per week	(C) Position (do not check more than of box, unless person is both officer and a director/truste						( <b>D)</b> Reportable compensation from the	(E)  Reportable compensation from related		of oth compens	amount ner sation	:
	(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)		from t ganizatio ed orga		IS
(12) Shayna Howel						Ω.							
Board Member	1.00	x						0	0				0
(13) Chris Jaros	1 00												
Board Member	1.00	x						0	0				0
(14) Cynthia Kell	ogg												
(14) Board Member	1.00	x						0	0				0
(15) Timothy P. M	aloney												
(15) Board Member	1.00	x						0	0				0
(16) Pierre Manig	ault												
(16) Board Member	1.00 0.00	x						0	0				0
(17) Jeremiah Mil		^						0	0				
(17) Board Member	1.00	<b>.</b>							0				^
(18) Margot T. Ro	0.00 se	X						0	0				0
(18)	1.00	,,							•				_
Board Member (19) Claire Theob	0.00 ald	X						0	0				0
(19) Board Member	1.00	x						0	0				0
1b Subtotal								654,298				76,6	<u></u>
d Total (add lines 1b and 1c)								654,298			<u></u>	76,6	541
2 Total number of individuals (i reportable compensation from	ncluding but no	t limi	ited					bove) who received more	than \$100,000 of				
•												Yes	No
3 Did the organization list any f employee on line 1a? If "Yes	," complete Sch	edul	e Ĵ i	for s	uch	indiv	vidu:	al			3		х
4 For any individual listed on line organization and related organization.	ne 1a, is the su anizations greate	m of er th	rep an S	ortal 3150	ole 0	omp )? <i>If</i>	ens "Ye	ation and other compensa s." complete Schedule J fo	tion from the or such				
individual											4	X	
5 Did any person listed on line for services rendered to the											5		х
<ul><li>Section B. Independent Contract</li><li>1 Complete this table for your</li></ul>		non	cato	d in	done	ndo	nt c	ontractors that received m	oro than \$100,000 of				
compensation from the organ	nization. Report							endar year ending with or	within the organization's	tax year			
Satchel Contruction	(A) I business address				202	20	Co	Descrip	(B) tion of services		Co	(C) mpensat	tion
North Charleston		2	94					Construction				129	,269
2 Total number of independent received more than \$100,000								those listed above) who	1				
ΠΔΔ											Form	. นนก	(3033)

### Form 990 (2023) South Carolina Coastal Conservatior57-0887278

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	art V			of Revenue nedule O con	tains	a resp	onse or no	te to any line in	this Part VIII		
<b>10</b>								(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ants Ints	1a Federated campaigns 1a										
ည်စွ	b	b Membership dues 1b									
ts, An	c	Fundraising ev	ents		1c						
<u>a</u> igi	d	Related organiz			1d						
Sim.	e	Government grants (			1e		469,271				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions and similar amounts r	not includ	ded above	1f	3,	076,622				
a ii	9	Noncash contributions lines 1a-1f			1g	\$					
<u>a</u> 8	h	Total. Add lines	s 1a–1	lf	`			3,545,893			
							Business Code				
<u>8</u>	2a										
e <u>K</u>	b										
า Gnu	С										
gra Rev	d										
Program Service Revenue	e										
	f	All other progra									
		Total. Add lines									I
	3	Investment inco						277 277			277 277
	١,	other similar amounts)  4 Income from investment of tax-exempt bond proceeds					377,377			377,377	
	4				•						
	5	Royalties									
		0		(i) Real		(11)	Personal				
	Ι.	Gross rents	6a								
		Less: rental expenses									
	l	Rental inc. or (loss)	6c	(1000)							
		2 Cross amount from		(i) Securities		1	) Other				
		sales of assets	7a	1,086,		(",	) Culci				
ē	h	other than inventory Less: cost or other	/ a								
Ģ	~	basis and sales exps.	7b	522,	526		77,308				
Revenue	l c	Gain or (loss)	7c	564,			-77,308				
her	I	Net gain or (los						487,034	-77,308		564,342
g		Gross income from									
Ŭ		(not including \$									
		of contributions re	ported	on line							
		1c). See Part IV, I	ine 18		8a						
	b	Less: direct exp			8b						
	С	Net income or	(loss)	from fundraising	even	ts					
	9a	Gross income f									
		activities. See F			9a						
		Less: direct exp			9b						
	I	Net income or			tivities						
	10a	Gross sales of				_	0.00				
		returns and allo			10a		974,374				
		Less: cost of go			10b		559,098	A1E 076	41E 07C		
		Net income or	(IOSS)	irom sales of in	ventor	y	Business Code	415,276	415,276		
Miscellaneous Revenue	11-	Other inco	ome.				900099	40,603	40,603		
Je K	11a						300033	±0,003	40,003		
ella Xei	b										
<u>  </u>    Re	4	All other revenu									
Σ		Total. Add lines						40,603			
	12							4,866,183	378,571	0	941,719
			. 550					, ,	,		Form <b>990</b> (2023)

# Form 990 (2023) South Carolina Coastal Conservation57-0887278 Part IX Statement of Functional Expenses

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Tart IX Clatement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).
Check if Schedule O contains a response or note to any line in this Part IX

	Check if Schedule O contains a response or note to any line in this Part IX								
	not include amounts reported on lines 6b, 71 Pb, and 10b of Part VIII.	D, (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	1,410	1,410						
2	Grants and other assistance to domestic	•	,						
	individuals. See Part IV, line 22								
3	Grants and other assistance to foreign								
	organizations, foreign governments, and								
	foreign individuals. See Part IV, lines 15 and 16								
4	Benefits paid to or for members								
5	Compensation of current officers, directors,								
	trustees, and key employees	307,440	42,023	233,900	31,517				
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	2,414,370	1,858,857	171,705	383,808				
8	Pension plan accruals and contributions (include								
	section 401(k) and 403(b) employer contributions)	156,199	111,630	21,763	22,806				
9	Other employee benefits	424,588	249,725	119,778	55,085				
10	Payroll taxes	202,534	144,749	28,219	29,566				
11	Fees for services (nonemployees):								
а	Management								
b	Legal	213,555	199,185	14,370					
С	Accounting	18,192		18,192					
d	Lobbying	23,467		23,467					
е	Professional fundraising services. See Part IV, line			100 1					
	Investment management fees	120,574		120,574					
g	Other. (If line 11g amount exceeds 10% of line 25, column	410 846	245 400	21 106	42.060				
	(A) amount, list line 11g expenses on Schedule O.)	419,746	345,492	31,186	43,068				
	Advertising and promotion	105,659	91,567	14,092	20 205				
13	Office expenses	115,545 85,622	53,388 55,785	31,872 15,753	30,285				
14	Information technology	05,022	33,763	15,755	14,084				
15	Royalties	394,303	316,765	37,065	40,473				
16	Occupancy	187,674	171,446	8,753	7,475				
17 18	Travel  Payments of travel or entertainment expenses		1/1/110	0,733	7,17				
10	for any federal, state, or local public officials								
19	Conferences, conventions, and meetings	52,793	43,834	7,714	1,245				
20	Internet	32/133	13,031	7 7 7 2 2	1,215				
21	Payments to affiliates				_				
22	Depreciation, depletion, and amortization	113,583	87,409	12,808	13,366				
23	Insurance		0.,100	,					
24	Other expenses. Itemize expenses not covered								
	above. (List miscellaneous expenses on line 24e. If								
	line 24e amount exceeds 10% of line 25, column								
	(A) amount, list line 24e expenses on Schedule O.)								
а	Program Food Boxes	375,841	375,841						
b	Miscellaneous	17,458	6,019	6,257	5,182				
С	Book Inventory Costs	7,582		7,582					
d									
е	All other expenses								
25	Total functional expenses. Add lines 1 through 24e	5,758,135	4,155,125	925,050	677,960				
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 her if								
DAA	following SOP 98-2 (ASC 958-720)				Form <b>990</b> (2023)				
ראת					Form 330 (2023)				

### Form 990 (2023) South Carolina Coastal Conservatior57-0887278

Page **11** 

P	art 2	X Balance Sheet					
		Check if Schedule O contains a response or no	te to any lin	e in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			1,260,293	1	120,394
	2	Savings and temporary cash investments				2	148,238
	3	Pledges and grants receivable, net			1,347,276	3	1,125,418
	4	Accounts receivable, net			257,816	4	385,818
	5	Loans and other receivables from any current or form	director,	•			
		trustee, key employee, creator or founder, substantia	I contributor	, or 35%			
		controlled entity or family member of any of these pe				5	
	6	Loans and other receivables from other disqualified p					
ţ		under section 4958(f)(1)), and persons described in				6	
Assets	7	Notes and loans receivable, net		2,783,200	7	2,783,200	
Ř	8	Inventories for sale or use			56,237	8	71,395
	9	Prepaid expenses and deferred charges		85,333	9	83,585	
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	896,962			
	b	Less: accumulated depreciation	10b	519,898	445,821	10c	377,064
	11	Investments—publicly traded securities	•	14,271,878	11	15,695,660	
	12	Investments—other securities. See Part IV, line 11			12		
	13	Investments—program-related. See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			784,617		571,156
	16	Total assets. Add lines 1 through 15 (must equal line	e 33)		21,292,471	16	21,361,928
	17	Accounts payable and accrued expenses		402,647	17	317,149	
	18	Grants payable		50,000	18	326,221	
	19	Deferred revenue			19		
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete Part IV	√ of Schedu	ıle D		21	
es	22	Loans and other payables to any current or former of	fficer, directe	or,			
Ĭ		trustee, key employee, creator or founder, substantia					
Liabilities		controlled entity or family member of any of these pe				22	
_	23	Secured mortgages and notes payable to unrelated t				23	
	24	Unsecured notes and loans payable to unrelated third				24	
	25	Other liabilities (including federal income tax, payable					
		parties, and other liabilities not included on lines 17-2	24). Comple	te Part X			
		of Schedule D			372,195		229,715
	26	Total liabilities. Add lines 17 through 25			824,842	26	873,085
es		Organizations that follow FASB ASC 958, check h	nere X				
anc	l	and complete lines 27, 28, 32, and 33.			10 000 551		10 666 600
3ali	27				19,028,571	27	19,666,608
<u> </u>	28	Net assets with donor restrictions	<u> </u>	1,439,058	28	822,235	
Ξ		Organizations that do not follow FASB ASC 958,	J				
ō	20	and complete lines 29 through 33.			20		
şţs	29	Capital stock or trust principal, or current funds			29		
SSE	30	Paid-in or capital surplus, or land, building, or equipm				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income		20 467 620	31	20 400 043	
Se	32				20,467,629	32	20,488,843
	33	Total liabilities and net assets/fund balances			21,292,471	33	21,361,928

Form **990** (2023)

orm	1 990 (2023) South Carolina Coastal Conservation57-0887278				Paç	ge <b>12</b>
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>	<u> </u>			X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4	<b>1,8</b> 6	6,1	L83
2	Total expenses (must equal Part IX, column (A), line 25)	2	Į.	5,75	,758,135	
3	Revenue less expenses. Subtract line 2 from line 1	3			-891,952	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	20	0,46		
5	Net unrealized gains (losses) on investments	5		91	<u> 168</u>	
6	Donated services and use of facilities	6	<u> </u>			
7	Investment expenses	7	<u> </u>			
8	Prior period adjustments	8	<u> </u>			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	<u> </u>			<u>-2</u>
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line		Ī			
	32, column (B))	10	2(	),48	18,8	<u>343</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>			
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on					
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or					
	reviewed on a separate basis, consolidated basis, or both.					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a					
	separate basis, consolidated basis, or both.					
	Separate basis X Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of					
	the audit, review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on					
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X
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 on Schedule O and describe any steps taken to undergo such audits	<u></u>		3b		
				Form	n <b>990</b>	(2023)

Part VII Section A. Officers	s, Directors, T	ruste	es,	Key	/ En	ploy	/ees	s, and Highest Compens	ated Employees (continu	ıed)			
(A) (B)  Name and title Average hours per week		offi	o not o x, unle icer ar	Pos check ess pe	rson i directo	s both or/trust	an ee)	<b>(D)</b> Reportable compensation from the	(E) Reportable compensation from related	(F) 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)		from th ganizatio ed organ		
(20) Mike Mistler (12) Controller	40.00			x				96,757	0			7,8	32
(21) Nancy Appel (13) Development Director	40.00					х		126,663	0		1	.6,2	
(22) Elizabeth Gi (14) Dir. of Human Resour	bson 40.00 0.00					х		115,930	0			.9,4	
(23) Emily Cedzo (15) Dir. of Conservation	40.00					х		109,565	0		1	.0,4	31
(24) Faith Rivers (16) Executive Director	James 40.00 0.00			х				205,383	0		2	2,6	04
(17)													
(18)													
(19)													
1b Subtotal	eets to Part VII							654,298				6,6	41
Total number of individuals (i reportable compensation from	n the organizati	on						,			$\equiv$	Yes	No
<ul> <li>Did the organization list any femployee on line 1a? If "Yes</li> <li>For any individual listed on line organization and related organization."</li> </ul>	<i>," complete Sch</i> ne 1a, is the su	edul m of	<i>le J</i> if rep	for s ortal	uch ole c	<i>indi</i> v comp	<i>idua</i> ens	alation and other compensa	ition from the		3		
individual  Did any person listed on line for services rendered to the	1a receive or a organization? If	accru	ie cc	ompe	ensa	tion	rrom	n any unrelated organization	on or individual		5		
Complete this table for your compensation from the organ	five highest con nization. Report	npen com	sate	d inc	depe	ender the	nt co	ontractors that received mendar year ending with or	ore than \$100,000 of within the organization's	tax year		(C)	
Name and	(A) Name and business address								tion of services		Cor	(C) mpensatio	nc
2 Total number of indexes 1.	oontracte /	sh · d'		4	ot !!:	mit!	4-	those listed shows with					
2 Total number of independent received more than \$100,000								inose listed above) who					

#### SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

#### **Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number South Carolina Coastal Conservation League, Inc. 57-0887278 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12d, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s) (i) Name of supported (iv) Is the organization (iii) Type of organization (v) Amount of monetary (vi) Amount of organization (described on lines 1-10 isted in your governing support (see other support (see above (see instructions)) document? instructions) instructions) No Yes (A) (B) (C) (D) (E)

Schedule A (Form 990) 2023

South Carolina Coastal Conservation57-0887278

Page 2

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)

(a) 2019

(b) 2020

(c) 2021

(d) 2022

(e) 2023

(f) Total

1 Gifts, grants, contributions, and

Sec	tion A. Public Support	in rails to quain	ry drider the te	osto lioted belo	w, picase com	ipiete i art iii.)	
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	3,815,531	4,104,241	4,937,017	4,383,264	3,545,893	20,785,946
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	3,815,531	4,104,241	4,937,017	4,383,264	3,545,893	20,785,946
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)						1,086,659
6	Public support. Subtract line 5 from line 4 .						19,699,287
	tion B. Total Support	ı	ı			T	
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	3,815,531	4,104,241	4,937,017	4,383,264	3,545,893	20,785,946
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	245,823	233,868	337,544	274,070	377,377	1,468,682
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						22,254,628
12	Gross receipts from related activities, et-	•					8,820,085
13	First 5 years. If the Form 990 is for the	organization's first	, second, third, fo	urth, or fifth tax ye	ear as a section 50	01(c)(3)	_
	organization, check this box and stop he						
Sec	tion C. Computation of Public						
14	Public support percentage for 2023 (line			lumn (f))			88.52 %
15	Public support percentage from 2022 Sc	, ,				15	88.11 %
16a	33 1/3% support test — 2023. If the org	_			4 is 33 1/3% or m	ore, check this	<b>6</b> -0
	box and <b>stop here.</b> The organization qu						X
b	33 1/3% support test — 2022. If the org	_			line 15 is 33 1/3%	or more, check	
47-	this box and <b>stop here.</b> The organization						Ц
1/a	10%-facts-and-circumstances test —						
	10% or more, and if the organization me				-	•	
	Part VI how the organization meets the	racts-and-circumst	ances test. The o	organization qualific	es as a publiciy si	ирропеа	
<b>L</b>	organization						Ц
b	10%-facts-and-circumstances test —	3				•	
	15 is 10% or more, and if the organization				•	•	
	in Part VI how the organization meets the			-	-		
18	organization Private foundation. If the organization of	did not check a ba	v on line 12 16a	16h 17a or 17h	check this haven		Ц
10	instructions						

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023

Support Schedule for Organizations Described in Section 509(a)(2)

Part III

(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.)

266	tion A. Fublic Support							
Caler	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	<b>(e)</b> 2023	3	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	. ,	. ,	. ,	,	• • • • • • • • • • • • • • • • • • • •		• •
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that are not an unrelated trade or business under section 513							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5							
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
С	Add lines 7a and 7b							
8	<b>Public support.</b> (Subtract line 7c from line 6.)							
Sec	tion B. Total Support							
Caler	ndar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	<b>(e)</b> 2023	3	(f) Total
9	Amounts from line 6							
1 <b>0</b> a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .							
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
С	Add lines 10a and 10b							
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.)							
3	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)							
4	First 5 years. If the Form 990 is for the	-	t, second, third, fo	ourth, or fifth tax y	ear as a section 5	501(c)(3)		
200	organization, check this box and stop he					<u></u>	<u></u>	
	tion C. Computation of Public			- L (f))		T	45	0/
5	Public support percentage for 2023 (line						15	<u>%</u>
6 Sec	Public support percentage from 2022 Sc						16	%
7	tion D. Computation of Investm			o 13 column (f\)		T	17	%
	Investment income percentage for 2023 evestment income percentage from 2022		III . E 47				18	<u>%</u>
	33 1/3% support tests — 2023. If the o			n line 14 and line				70
Jd	17 is not more than 33 1/3%, check this							
h	33 1/3% support tests — 2022. If the o	-	_			-		
	line 18 is not more than 33 1/3%, check	_						
20	<b>Private foundation.</b> If the organization of	-	_	-		_		_
	ato roundation. Il tilo organization	ala flot official a be	,, on mo 14, 19a	, 5. 155, 61668 11	io son and soc inc			/Form 000\ 2022

South Carolina Coastal Conservation57-0887278

#### Supporting Organizations Part IV

Schedule A (Form 990) 2023

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

#### Section A. All Supporting Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing 1 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,
- 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).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- 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.
- 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.
- 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.
- 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.
- 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)
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- 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?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes." provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 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).
- 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.
- 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.
- Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

		Yes	No
	1		
	-		
	2		
	3a		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
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	_		
	8		
	9a		
	9b		
	9с		
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Schedu	ule A (Form 990) 2023 South Carolina Coastal Conservatior57-088727	<u>8</u>		Page \$
Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
_	provide detail in Part VI.	11c		
Sect	ion B. Type I Supporting Organizations			
	ion an Type i capperaing cigamianone		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		163	140
•				
	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	<i>)</i>		
	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		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			1
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	ion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI			
	how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have			
•	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct	ions)		
' a	The organization satisfied the Activities Test. Complete line 2 below.	0113).		
b				
	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>	inotru	otional	
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	Iristruc		N <sub>a</sub>
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	_		
	that these activities constituted substantially all of its activities.	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		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	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		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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Par	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations								
1									
	instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.								
Sect	ion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)					
1_	Net short-term capital gain	1							
2	Recoveries of prior-year distributions	2							
3	Other gross income (see instructions)	3							
4	Add lines 1 through 3.	4							
5	Depreciation and depletion	5							
6	Portion of operating expenses paid or incurred for production or collection								
	of gross income or for management, conservation, or maintenance of								
	property held for production of income (see instructions)	6							
7	Other expenses (see instructions)	7							
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8							
Sect	ion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)					
1	Aggregate fair market value of all non-exempt-use assets (see								
	instructions for short tax year or assets held for part of year):								
a	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	ion C – Distributable Amount			Current Year					
1	Adjusted net income for prior year (from Section A, line 8, column A)	1							
2	Enter 0.85 of line 1.	2							
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3							
4	Enter greater of line 2 or line 3.	4							
5	Income tax imposed in prior year	5							
6	Distributable Amount. Subtract line 5 from line 4, unless subject to								
•	emergency temporary reduction (see instructions).	6							
7	Check here if the current year is the organization's first as a non-functionally integrat		pe III supporting organiza	tion					
•	(see instructions).	· y	cappog organize	·····					

Schedule A (Form 990) 2023

South Carolina Coastal Conservation57-0887278 Schedule A (Form 990) 2023 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required—provide details in Part VI) 5 Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 9 Distributable amount for 2022 from Section C, line 6 9 Line 8 amount divided by line 9 amount 10 10 (i) (ii) (iii) Section E - Distribution Allocations (see instructions) **Excess Distributions Underdistributions** Distributable Amount for 2023 Pre-2023 Distributable amount for 2023 from Section C, line 6 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 **b** From 2019 **c** From 2020 **d** From 2021 e From 2022 f Total of lines 3a through 3e g Applied to underdistributions of prior years h Applied to 2023 distributable amount i Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2023 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2023 distributable amount c 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 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. 8 Breakdown of line 7: a Excess from 2019 **b** Excess from 2020 ..... c Excess from 2021 . d Excess from 2022 ..... e Excess from 2023

Schedule A (Form 990) 2023

Schedule A (For									<u> 57-0887278</u>		Page 8
Part VI									10; Part II, line		
									11b, and 11c;		
									Part IV, Section 5, 6, and 8; and		
									instructions.)	r ait v,	.,
						-		,	,		
Part I	I, Li	ne 1	0 –	Other	r Inco	ome De	etail	 			
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DAA Schedule A (Form 990) 2023

## Schedule B (Form 990)

#### Schedule of Contributors

OMB No. 1545-0047

2023

Department of the Treasury Internal Revenue Service Attach to Form 990, 990-EZ, or 990-PF.

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

Name of the organization

South Carolina Coastal Conservation

Employer identification number

League, Inc. 57-0887278

Heague, Tile.	37 000	1210					
Organization type (check one):							
Filers of:	Section:						
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization						
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation						
	527 political organization						
Form 990-PF	501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
, ,	covered by the <b>General Rule</b> or a <b>Special Rule</b> . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See						
General Rule							
_	ling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 property) from any one contributor. Complete Parts I and II. See instructions for determining a ntributions.						
Special Rules							
regulations under sec 16b, and that received	lescribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> / <sub>3</sub> % support test of the tions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or d from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
contributor, during the literary, or educational	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.						
contributor, during the contributions totaled n during the year for an General Rule applies	lescribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one e year, contributions exclusively for religious, charitable, etc., purposes, but no such more than \$1,000. If this box is checked, enter here the total contributions that were received a exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the s to this organization because it received nonexclusively religious, charitable, etc., contributions re during the year.						
Caution: An organization tha	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), I	out it					

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

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

Schedule B (Form 990) (2023)

Schedule B (Form 990) (2023) Page 1 of 1 Page 2

Name of organization

South Carolina Coastal Conservation

Employer identification number 57-0887278

Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space i	s needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
. <b>1</b>		\$ 85,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ 100,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
. 3		\$ 75,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Name, address, and ZIP + 4	\$ 100,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$ 200,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$ 80,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)

#### SCHEDULE C (Form 990)

#### Political Campaign and Lobbying Activities

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.
- 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:

- 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.

If the	organization answered "Yes" on Form 990, Part IV,	line 5 (Proxy Tax) (see sep	arate instructions	s) or Form 990-EZ, P	art V, line 35c (Prox
	(see separate instructions), then:				
	ection 501(c)(4), (5), or (6) organizations: Complete Part				
Name	e of organization South Carolina Coas	stal Conservat:	ion	1 ' '	tification number
	League, Inc.			57-08872	
Par	t I-A Complete if the organization is exe	mpt under section 50	1(c) or is a se	ection 527 organi	zation.
1	Provide a description of the organization's direct and inc	direct political campaign activ	ities in Part IV. Se	ee instructions for	
	definition of "political campaign activities."				
2	Political campaign activity expenditures. See instructions	s		\$	
	Volunteer hours for political campaign activities. See ins				
Par	t I-B Complete if the organization is exe	empt under section 50	1(c)(3).		
1	Enter the amount of any excise tax incurred by the orga Enter the amount of any excise tax incurred by organiza	nization under section 4955		\$	
2	Enter the amount of any excise tax incurred by organiza	ation managers under section	4955	\$	□Ves □ No.
3	If the organization incurred a section 4955 tax, did it file	Form 4720 for this year?			Yes No
4a					
b	If "Yes." describe in Part IV.				
Par	t I-C Complete if the organization is exe	empt under section 50	1(c), except s	section 501(c)(3).	
1	Enter the amount directly expended by the filing organiz				
	activities	·		\$	
2	Enter the amount of the filing organization's funds contri	ibuted to other organizations	for section		
	527 exempt function activities	•		\$	
3	Total exempt function expenditures. Add lines 1 and 2. E				
	line 17b			\$	<u></u> <u></u>
4	Did the filing organization file Form 1120-POL for this ye	ear?			☐ Yes ☐ No
5	Enter the names, addresses, and employer identification				
	organization made payments. For each organization liste				-
	the amount of political contributions received that were p	·			
	as a separate segregated fund or a political action comm			•	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) reality	(5) / (3)	(0) 2	filing organization's	contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate
					political organization.  If none, enter -0
(1)					,
(1)					
(2)					
(2)					
(2)					
(3)					
, as					
(4)					
·-·					
(5)					
(6)					
			1	1	I

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

Schedule C (Form 990) 2023

Scr	nedule C (Form 990) 2023 SOUCII	Carollia Coastal Conserva	ICTOID / = 000 / Z / 0	Page Z					
P	Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under								
	section 501(h)).								
Α	Check if the filing organization	belongs to an affiliated group (and list in Part I'	√ each affiliated group me	ember's name,					
	address, EIN, expenses	, and share of excess lobbying expenditures).							
В	Check if the filing organization	checked box A and "limited control" provisions	apply.						
	Limits on Lobi	ying Expenditures	(a) Filing	(b) Affiliated					
	(The term "expenditures" m	eans amounts paid or incurred.)	organization's totals	group totals					
1	a Total lobbying expenditures to influence p	ublic opinion (grassroots lobbying)	1,370						
	<b>b</b> Total lobbying expenditures to influence a	legislative body (direct lobbying)	31,649						
	c Total lobbying expenditures (add lines 1a	and 1b)	33,019						
	d Other exempt purpose expenditures		5,725,116						
	e Total exempt purpose expenditures (add li	5,758,135							
	f Lobbying nontaxable amount. Enter the ar								
	columns.	437,907							
	If the amount on line 1e, column (a) or (b) is	The lobbying nontaxable amount is:							
	not over \$500,000,	20% of the amount on line 1e.							
	over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.							
	over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.							
	over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.							
	over \$17,000,000,	\$1,000,000.							
	g Grassroots nontaxable amount (enter 25%	of line 1f)	109,477						
	h Subtract line 1g from line 1a. If zero or les	s, enter -0-	0						
	i Subtract line 1f from line 1c. If zero or less	s, enter -0-	0						
	j If there is an amount other than zero on e	ther line 1h or line 1i, did the organization file Form 4	720						
	reporting section 4911 tax for this year?			Yes No					
	4-Year Averaging Period Under Section 501(h)								

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lo	obbying Expenditu	res During 4-Year	Averaging Period	l	
Calendar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	<b>(d)</b> 2023	(e) Total
2a Lobbying nontaxable amount	320,932	312,807	332,790	437,907	1,404,436
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					2,106,654
c Total lobbying expenditures	45,846	37,318	97,248	33,019	213,431
d Grassroots nontaxable amount	80,233	78,202	83,198	109,477	351,110
e Grassroots ceiling amount (150% of line 2d, column (e))					526,665
f Grassroots lobbying expenditures	638		34,579	1,370	36,587

Schedule C (Form 990) 2023

South Carolina Coastal Conservatior57-0887278 Schedule C (Form 990) 2023 Page 3 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 Part II-B (election under section 501(h)). (a) (b) For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed No description of the lobbying activity. Yes Amount During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? **b** If "Yes." enter the amount of any tax incurred under section 4912 ..... c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 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, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year 2a **b** Carryover from last year 2b 2c Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 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 expenditures next year? Taxable amount of lobbying and political expenditures. See instructions ..... 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. Schedule C, Part IV, Additional Information We have worked on environmental legislation at the state level since our founding in 1989. Our legislative office is located in downtown Columbia, South Carolina.

DAA Schedule C (Form 990) 2023

Schedule C (Form	990) 2023	South	Carolina	Coastal	Conservation57-0887278	Page <b>4</b>
Part IV	Supplemental	Informati	i <b>on</b> (continued)			_

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

# Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990,

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Employer identification number Name of the organization South Carolina Coastal Conservation 57-0887278 League, Inc. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds Total number at end of year \_\_\_\_\_ Aggregate value of contributions to (during year) 2 Aggregate value of grants from (during year) Aggregate value at end of year 4 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? 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? Part II **Conservation Easements** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included on line 2a 2c Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ...... Does the organization have a written policy regarding the periodic monitoring, inspection, handling of No violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art. Historical Treasures, or Other Similar Assets Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items. a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Schedule D (Form 990) 2023 SOUTH Ca						-1- /	Page Z
Part III Organizations Maintaini						sets (co	<u>intinuea)</u>
3 Using the organization's acquisition, acceded collection items (check all that apply).	ssion, and other recor	rds, check any of the	following that ma	ake significant ι	ise of its		
a Public exhibition	d 🗌 l	Loan or exchange pro	ogram				
<b>b</b> Scholarly research	e 🗌 (	Other					
c Preservation for future generations	_						
4 Provide a description of the organization'	s collections and expla	ain how they further t	the organization's	exempt purpos	se in Part		
XIII.							
5 During the year, did the organization soli	cit or receive donation	s of art, historical trea	asures, or other:	similar		_	_
assets to be sold to raise funds rather the	an to be maintained a	s part of the organiza	ation's collection?		<u></u>	Yes	No_
Part IV Escrow and Custodial	Arrangements						
Complete if the organizat	ion answered "Ye	s" on Form 990,	Part IV, line 9	), or reported	l an amo	ount on	Form
990, Part X, line 21.							
1a Is the organization an agent, trustee, cus	todian or other interm	ediary for contribution	ns or other assets	s not		_	_
included on Form 990, Part X?						Yes	S No
<b>b</b> If "Yes," explain the arrangement in Part	XIII and complete the	following table.					
						Amount	
c Beginning balance					С		
d Additions during the year				<u>1</u>	d		
e Distributions during the year				<u>1</u>	е		
					f		
2a Did the organization include an amount of	n Form 990, Part X, li	ine 21, for escrow or	custodial accoun	t liability?		Yes	S No
<b>b</b> If "Yes," explain the arrangement in Part	XIII. Check here if the	explanation has bee	n provided on Pa	art XIII			
Part V Endowment Funds							
Complete if the organizat	<u>ion answered "Ye</u>	s" on Form 990,	Part IV, line 1	10.		ı	
	(a) Current year	(b) Prior year	(c) Two years bad				years back
1a Beginning of year balance	14,251,074	13,459,121	15,714,8	379 12 <b>,</b> 8	03,025	12,93	37 <b>,</b> 995
<b>b</b> Contributions							
c Net investment earnings, gains, and							
losses	1,708,879	1,411,114	-1,707,7	48 3,4	06,399	65	55,699
<b>d</b> Grants or scholarships							
e Other expenditures for facilities and							
programs	-642,814	-619,161	-548,0	010 -4	94,545	-79	90,669
f Administrative expenses							
<b>g</b> End of year balance	15,317,139	14,251,074	13,459,1	21 15,7	14,879	12,80	03,025
2 Provide the estimated percentage of the		nce (line 1g, column	(a)) held as:				
a Board designated or quasi-endowment	.00.00 %						
<b>b</b> Permanent endowment %							
c Term endowment %							
The percentages on lines 2a, 2b, and 2c	should equal 100%.						
3a Are there endowment funds not in the po	ssession of the organ	ization that are held	and administered	for the		_	
organization by:							Yes No
(i) Unrelated organizations?						3a(i)	X
						3a(ii)	X
<b>b</b> If "Yes" on line 3a(ii), are the related orga	anizations listed as red	quired on Schedule R				3b	
4 Describe in Part XIII the intended uses of		ndowment funds.					
Part VI Land, Buildings, and E		_		_	_		
Complete if the organizat	ion answered "Ye	<u>s" on Form 990,</u>	Part IV, line 1		<u>m 990, F</u>		
Description of property	(a) Cost or other b	''		(c) Accumulated		(d) Book va	alue
	(investment)	(othe	er)	depreciation			
1a Land							
<b>b</b> Buildings			L3,617	68,0	94		<u>5,523</u>
c Leasehold improvements		37	76,047	126,9			9,109
<b>d</b> Equipment		40	7,298	324,8	66	82	2 <b>,</b> 432
e Other					$\longrightarrow$		
Total. Add lines 1a through 1e. (Column (d) m	ust equal Form 990, F	Part X, line 10c, colun	nn (B))			37'	7,064

Sched Par	XI Reconciliation of Revenue per Audited Financial S				Page 4
Гаі	Complete if the organization answered "Yes" on Form		•	Netui	11
1 7	otal revenue, gains, and other support per audited financial statements	330, T alt IV,	1116 12a.	1	6,535,212
	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			•	0/333/212
	Net unrealized gains (losses) on investments	2a	913,168		
b [	Donated services and use of facilities	2b	876,435		
c F	Recoveries of prior year grants	2c	,		
d (	Other (Describe in Part XIII.)				
е /	Add lines 2a through 2d			2e	1,789,603
3 5	Subtract line 2e from line 1			3	4,745,609
4 /	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				_
a l	nvestment expenses not included on Form 990, Part VIII, line 7b	4a	120,574		
b (	Other (Describe in Part XIII.)	4b			
C A	Add lines 4a and 4b			4c	120,574
	otal revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12			5	4,866,183
Par	t XII Reconciliation of Expenses per Audited Financial			er Re	turn
	Complete if the organization answered "Yes" on Form	990, Part IV,	line 12a.		
				1	6,513,998
	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1			
	Donated services and use of facilities		876,435		
b F	Prior year adjustments	2b			
<b>C</b> (	Other losses	2c			
d (	Other (Describe in Part XIII.)	2d	2		006 400
	Add lines 2a through 2d			2e	876,437
	Subtract line 2e from line 1			3	5,637,561
	Amounts included on Form 990, Part IX, line 25, but not on line 1:		100 554		
	nvestment expenses not included on Form 990, Part VIII, line 7b		120,574		
	Other (Describe in Part XIII.)				100 574
	Add lines <b>4a</b> and <b>4b</b> otal expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 1			4c 5	120,574 5,758,135
	t XIII Supplemental Information	8.)		3	5,/56,135
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	1: Part IV lines 1	h and 2h: Dart \/ line	1. Part	Y line
	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to			7 4, Fait	Λ, ιιιιο
	rt V, Line 4 - Intended Uses for Endo				
	ic v, line i - incended obeb for Endo	willelle Ful	145		
Tn	accordance with Conservation League	policy th	ne board de	esia	nated
	decordance with compervation heagae	POTTO, 01	ic boara a	~ <u>~</u>	
en	dowment is recorded at the amount stip	pulated h	ov the Boar	rd o	f Directors
<del></del>	<del></del>	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	7 <b>2</b> <del>5</del>	·	
an	d classified as unrestricted net asset	s. It is	the inter	ntion	of the Boar
		********			
of	Directors to maintain the designation	ns in pe	rpetuity w	ith	subsequent
	·············· <del>··</del> ····················				· · · · · · · · · · · · · · · · · · ·
ac	cumulations of total investment return	n classif	ied as uni	rest	ricted net
as	sets until those amounts are appropria	ated for	expenditur	e by	y the
Co	nservation League in a manner consiste	ent with	their poli	icy.	
			· · · · · · · · · · · · · · · · · · ·		
Pa	rt XII, Line 2d - Expense Amounts Inc	luded in	Financials	3 - (	Other
				_	
Ва	d debt expense			\$	2
Ва	d debt expense			\$	2
Ва	d debt expense			\$	2
Ва	d debt expense			\$	2

Schedule D	(Form 990) 202	23 <b>Sc</b>	uth	Carolina	Coastal	Conservation57-0887278	Page <b>5</b>
Part XIII	Suppleme	ental	Inforn	nation (continue	ed)	Conservation57-0887278	
• • • • • • • • • • • • • • • • • • • •							
• • • • • • • • • • • • • • • • • • • •							

#### **SCHEDULE J** (Form 990)

**Compensation Information**For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** 

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

Department of the Treasury Internal Revenue Service Name of the organization South

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

Carolina Coastal Conservation

Employer identification number

OMB No. 1545-0047

Open to Public

Inspection

57-0887278

_	League, IIIC.   57-066/2/6	<u>,                                     </u>		
Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel  Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account  Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to			
		1b		
	explain	10		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2		
_	Indicate which if you of the following the consciention would be establish the consequention of the			
3	Indicate which, if any, of the following the organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  Approval by the board or compensation committee			
	Approval by the board of compensation committee			
4	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:			
а	Receive a severance payment or change-of-control payment?	4a		X
	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
	Proficients in an arrange of the second seco	4c		X
C		40		
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:			
9	The assessing time?	5a		х
				X
b	Any related organization?	5b		Λ
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а		6a		х
				X
b	Any related organization?	6b		Λ
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
U				
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			37
	in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

Schedule J (Form 990) 2023 South Carolina Coastal Conservatior57-0887278

Page 2

#### Part II 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 aren't listed on Form 990, Part VII.

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

	(B) Breakdown of W-2	and/or 1099-MISC and/or		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990
Faith Rivers James (i)	205,283	100	C	12,607	9,997	227,987	0
1 Executive Director (ii)		0	C	0			0
(i)							_
_2 (ii)							
(i) (ii)	•						
(i)							
4 (ii)	•						
(i)							
5 (ii)	•						
(i)							
6 (ii)	•						
(i)							
7 (ii)	•						
(i)							
8 (ii)							
(i)							
9 (ii)							
(i)							
10 (ii)							
(i)							
11 (ii)							
(i)							_
12 (ii)							
(i)							
13 (ii)							
(i)	<u> </u>		<del></del>				
14 (ii)							
			l	<u> </u>	l		
15 (ii)							
				<u> </u>	l		
16 (ii)							

Schedule J (Form 990) 2023

Schedule J (Form 990) 2023 South Carolina Coastal Conservation57-0887278  Part III Supplemental Information	Page 3
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 Pa or any additional information.	rt II. Also complete this par

## 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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization South

Attach to Form 990 or Form 990-EZ. Go to <a href="https://www.irs.gov/Form990">www.irs.gov/Form990</a> for the latest information.

Carolina Coastal Conservation

Open to Public Inspection

Employer identification number

League, Inc.	57-0887278
Form 990 - Additional Information	
Page 1, Part I, Line 1 - Continued	
landscapes are protected for generations to c	ome.
Form 990, Part III - Additional Information	
Page 2, Part III, Line 4a - Continued	
Examples of priority projects include:	
Protecting beaches from seawalls and inapprop	riate development through
policy and regulatory updates;	
Strengthening local laws around single-use pl	astic pollution and educating
citizens through litter sweeps and outreach;	
Fighting inappropriately sited mines that three	eaten coastal resources and
disproportionately impact communities;	
Advancing local and state resilience policies	such as minimizing
development in flood-prone areas, protecting	wetlands in the aftermath of
Clean Water Rule rollbacks, and prioritizing	the use of natural green
infrastructure for coastal protection;	
Protecting our shoreline and marine habitats	
saltmarsh: and	

Schedule O (Form 990) 2023 Page 2 Employer identification number Name of the organization South Carolina Coastal Conservation 57-0887278 Restoring and protecting wildlife habitat in places such as Deveaux Bank and advocating for strengthening enforcement and regulations. Communities and Transportation The objective of this program is to advocate for land conservation and quality of life in South Carolina coastal communities by advocating for sustainable urban growth patterns, efficient and clean transportation systems, and permanent land protection where appropriate. The Conservation League provides technical and professional assistance to local residents to help preserve their land and communities, advocates for good land use policies, and provides community organizing expertise. Examples of priority projects include: Advocating for public transportation and mobility solutions like the King Street Bike Lane and the Lowcountry Rapid Transit project; Advocating against harmful highways, such as 1-526, I-73, and US Highway 22 Extension, that contribute to suburban sprawl and disproportionately impact minority communities; Advancing conservation funding in counties and at the state level; Ensuring that wetland fill is avoided in development projects, and when necessary, adequately mitigated through land protection and restoration; and Page 1 of 5

Schedule O (Form 990) 2023  Name of the organization	Page 2 Employer identification number
South Carolina Coastal Conservation	57-0887278
Working through local land use planning to e	
and urban service boundaries, especially in	Georgetown County, Jasper
County, and Johns Island.	
Energy	
The objective of this program is to advocate	for clean energy as component
of a healthy ecosystem and quality of life,	through policy reform, public
awareness campaigns, and educational outreach	h. The Conservation League
promotes energy efficiency, energy conservat:	ion, retirement of fossil
fueled energy equipment, and renewable energy	y as the cheapest and most
effective solutions to the climate, health,	and social justice crises
associated with our current energy system.	
Examples of priority projects include:	
Defeating omnibus energy legislation that see	eks to significantly expand
natural gas, which would increase harmful po	llution and require
infrastructure through vulnerable habitat and	d communities;
Creating and implementing regulatory processe	es that ensure fair
consideration of clean energy in the planning	g and operation of the
electricity and natural gas supply, transmis	sion, and distribution systems
Establishing regulatory and financial mechan	isms to promote implementation
of energy efficient technologies;	
Reducing carbon emissions from dirty fuel so	urces, like coal and other
	Page 2 of 5

Schedule O (Form 990) 2023 Page 2 Employer identification number Name of the organization South Carolina Coastal Conservation 57-0887278 fossil fuels, through advocacy and state policy reform; and Promoting market-based procurement processes that can speed the transition to cleaner energy systems. Page 2, Part III, Line 4b - Continued than \$11.7 million of revenue back to South Carolina's small and mid-sized farmers over the last nine years. Today, GrowFood Carolina works with more than 120 growers producing on more than 5,000 acres throughout South Carolina. GrowFood Carolina markets more than 375 items including fresh fruits, vegetables, nuts, grains, dairy, honey, eggs, and salt to 350 restaurants, and a growing number of institutions and corporate campuses. GrowFood Carolina has developed a robust Food Access program as part of their mission. Working with government grants, medical institutions, and their Soil to Sustenance Program to support nutrition initiatives in the community. Over 779,000 pounds of produce have been donated to families through the Soil to Sustenance Program. GrowFood reaches 700 to 1,000 families on a bi-weekly basis as part of their partnership with the Charleston County Head Start program. produce boxes resulted in \$120,000 returned to growers last year. The growth of the Wholesale program and continuation of the Food Access program positions GrowFood Carolina to continue supporting farmers in the Lowcountry and contribute to improved health in the community.

Page 3 of 5

Schedule O (Form 990) 2023

Name of the organization

South Carolina Coastal Conservation

Page 2

Employer identification number

57-0887278

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

A copy of the form 990 was provided to all Board members after reviewed by management, and the Audit and Risk Management Committee. Prior to filing, the Board of Directors were given 10 days in which to present questions and/or comments about the form. Once these comments are addressed, the form 990 is filed in accordance with requirements.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

The conflict of interest policy is reviewed annually, and the Board of

Directors must disclose any potential conflicts annually as well as when or

if they arise during the year.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

The Executive Committee of the Board of Directors conducts the annual

performance review for the Executive Director and approves his/her salary.

Salary surveys are also reviewed as part of the process.

Form 990, Part VI, Line 15b - Compensation Process for Officers

The Executive Director recommends salary increases for top management and key employees following year end review. The proposed increases are then reviewed and agreed upon by the Executive Committee.

Form 990, Part VI, Line 17 - Other States Where Copy of Return is Filed Mississippi, North Carolina, New Hampshire, New Jersey, New Mexico, New York, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Utah, Virginia, Wisconsin, West Virginia

Page 4 of 5

ichedule O (Form 990) 2023  Tame of the organization	Page <b>2</b> Employer identification number
South Carolina Coastal Conservation	57-0887278
	, , , , , , , , , , , , , , , , , , , ,
Form 990, Part VI, Line 18 - No Public Disclo	sure Explanation
The organization makes its form 990 available	for public inspection upon
THE Organizacion makes its form 990 available	Tor public inspection upon
request at its corporate offices. The forms ar	re also available to
registered members at http://www.charitynaviga	ator.org or
http://www.guidestar.org.	
nttp://www.guidestar.org.	
Form 990, Part VI, Line 19 - Governing Document	nts Disclosure Explanation
The organization makes these documents availab	ole upon public request at i
corporate offices.	
Form 000 Port VI line 0 Other Changes in	Not Aggota Employation
Form 990, Part XI, Line 9 - Other Changes in 1	Net Assets Explanation
Bad debt expense	\$ -2