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



Address CALIFORNIA WATER EFFICIENCY PARTNERSHIP Name Doing business as 68-031	^{ber} 52-5885 1,181,007.
Address CALIFORNIA WATER EFFICIENCY PARTNERSHIP Name Doing business as 68-031	3069 ^{nber} 52-5885 1,181,007. p return
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	nber 52-5885 1,181,007. p return
Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone num	52-5885 1,181,007. p return
	1 , 181 , 007 . p return
Ireturn/ termin- ated JOT P STREET ZZS YEO 75. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$	p return
Amended SACRAMENTO, CA 95814 H(a) Is this a grou	
	1100 1100 1100 1100 1100 1100
	res included? Yes No
	h a list. See instructions
J Website: WWW.CALWEP.ORG H(c) Group exem	
	K State of legal domicile: CA
Part I Summary	
• 1 Briefly describe the organization's mission or most significant activities: THE PARTNERSHIP IS A	A MEMBERSHIP
ORGANIZATION DEDICATED TO MAXIMIZING URBAN WATER CONSERT 2 Check this box if the organization discontinued its operations or disposed of more than 25% of its new 3 Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b)	/ATION
2 Check this box if the organization discontinued its operations or disposed of more than 25% of its ne	
3 Number of voting members of the governing body (Part VI, line 1a)	3 23
	4 23
5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5 7
 5 Total number of individuals employed in calendar year 2023 (Part V, line 13) 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 	6 30
7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a 0.
b Net unrelated business taxable income from Form 990 T, Part I, line 11	7ь 0.
Prior Year	Current Year
a Contributions and grants (Part VIII, line 1h) 238,692	
9 Program service revenue (Part VIII, line 2g)	
9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 1,891,79	
	0.0.
	0. 0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	
	0. 0.
b Total fundraising expenses (Part IX, column (D), line 25) 0.	3. 301,516.
17 Other expenses (Part IX, column (A), lines 11a-11d, 117-24e)	
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,729,902 19 Revenue less expenses. Subtract line 18 from line 12 161,882	
19 Revenue less expenses. Subtract line 18 from line 12 161,883 5% Beginning of Current Yes	-
20 Total assets (Part X, line 16) 2,113,39 21 Total liabilities (Part X, line 26) 1,073,36	
21Total liabilities (Part X, line 26)1,073,3622Net assets or fund balances. Subtract line 21 from line 201,040,02	
Part II Signature Block	

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

				Data	
Sign	Signature of officer			Date	
Here	TIA FLEMING, EXECUTIVE DI	RECTOR			
	Type or print name and title				
	Print/Type preparer's name	Preparer's signature	Date	Check	PTIN
Paid	JENNIFER Z IWATA	JENNIFER Z IWATA	11/09/	0011 0111010300	P01310188
Preparer	Firm's name GILBERT CPAS			Firm's EIN 68-	0037990
Use Only	Firm's address 2880 GATEWAY OAKS	DR, STE 100			
	SACRAMENTO, CA 95	833		Phone no. $916 -$	646-6464
May the IF	RS discuss this return with the preparer shown abo	ove? See instructions			X Yes No
LHA For	Paperwork Reduction Act Notice, see the separ	rate instructions. 332001 12-21-23			Form 990 (2023)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2023) CALIFORNIA WATER EFFICIENCY PARTNERSHIP 68-0318069 Page 2
Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
-	THE PARTNERSHIP IS A MEMBERSHIP ORGANIZATION DEDICATED TO MAXIMIZING
	URBAN WATER CONSERVATION THROUGHOUT CALIFORNIA BY SUPPORTING AND
	INTEGRATING INNOVATIVE TECHNOLOGIES AND PRACTICES; ENCOURAGING
	EFFECTIVE PUBLIC POLICIES; ADVANCING RESEARCH, TRAINING, AND PUBLIC
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ? Yes X No
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	
та	RESEARCH & PROGRAMS DEVELOPMENT
	- LEAK DETECTION AND REPAIR CERTIFICATION TRAINING WITH VALLEY WATER &
	BAWSCA.
	BAWSCA.
	CALSCAPE NURSERY TRAINING
	- HELD 2 ADVISORY COMMITTEE MEETINGS OF CALWEP MEMBERS TO REVIEW AND
	EXPAND THE NURSERY TRAINING.
4b	(Code:) (Expenses \$ 203,191. including grants of \$) (Revenue \$ 44,418.)
40	(Code:) (Expenses \$ 203, 191. including grants of \$) (Revenue \$44,410.) TECHNICAL ASSISTANCE & TOOLS
	- HELD FRAMEWORK 101 WEBINAR
	- 3 CUTSHEETS DEVELOPED FOR MEMBERS
	- 1 CII CLASSIFICATION GUIDANCE DOC IN PROGRESS
	QUALIFIED WATER EFFICIENT LANDSCAPER TRAINING
	- 162 PROFESSIONALS WERE TRAINED AND CERTIFIED
	- 5 ONLINE CLASSES WERE HELD; 4 IN-PERSON CLASSES WERE HELD (9 TOTAL)
	- 95% EXAM PASS RATE
	- CALWEP RECEIVED A U.S. EPA WATERSENSE EXCELLENCE AWARD FOR THE GROWTH
	OF THIS PROGRAM.
	<u> </u>
40	(Code:) (Expenses \$ 283,623. including grants of \$) (Revenue \$ 829,765.)
40	(Code:) (Expenses \$283,623. including grants of \$) (Revenue \$29,765.) MEMBERSHIP
	$\lambda c \rightarrow pecemper 21 2022 and were use 224 Member c that up the 11 Mem$
	AS OF DECEMBER 31, 2023, CALWEP HAD 224 MEMBERS, INCLUDING 11 NEW
	MEMBERS. ACTIVE COMMITTEES INCLUDE PROGRAM, RESEARCH, PEER TO PEER
	PLANNING, MEMBERS TASK FORCE, ADVOCACY, AND EQUITY. THERE ARE 150
	MEMBERS ENGAGED IN COMMITTEES. CALWEP PUBLISHED 8 CALWEP CONNECTS IN
	2023.
	THE FOLLOWING CHANGES/UPGRADES WERE MADE TO CALWEP.COM:
	- WEBSITE REFRESH: UPDATED ORGANIZATION OF WEBSITE TO BE MORE
	ACCESSIBLE AND SIMPLE FOR MEMBERS.
	- 3 NEW CUTSHEETS WERE RELEASED INCLUDING INDOOR, OUTDOOR AND CII
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 195,845. including grants of \$) (Revenue \$ 34,850.)
4e	Total program service expenses 729,642.
	Form 990 (2023)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		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	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
40	column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> . See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		v
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
~	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i>	20a		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	~		x
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		

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			Yes	No	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on				
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current				
	and former officers, directors, trustees, key employees, and highest compensated employees? 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 to defease				
	any tax-exempt bonds?	24c			
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d			
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit				
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X	
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		X	
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 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 L, Part IV,				
	instructions for applicable filing thresholds, conditions, and exceptions):				
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If				
	"Yes," complete Schedule L, Part IV	28a		X	
	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		X	
29	Did the organization receive more than \$25,000 in noncash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>	29		X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			v	
• •	contributions? If "Yes," complete Schedule M	30		X X	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31			
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	32		x	
	Schedule N, Part II				
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			x	
••	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33			
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			x	
05 -	Part V, line 1	34		X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a			
a	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			
26	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	350			
36	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	30		- 23	
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x	
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	57			
00	· · · ·	38	х		
Pa					
	Check if Schedule O contains a response or note to any line in this Part V				
			Yes	No	
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 34				
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b				
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming				
5	(gambling) winnings to prize winners?	1c	х		

023)				PARTNERSHIP
Statements	Regarding Other I	RS Filing	s and Tax Compli	i ance (continued)

22 Entr the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements. 2a 7 bit tates one is reported on line 2a, did the organization file all required fedoral employment tax returns? 2b X bit the enginetation have emerged by war? If Mo ⁺ to line 80, provide an explanation on Schedule O 3b X bit Yes, 'nast filed a Form 300 Tor this year? If Mo ⁺ to line 80, provide an explanation on Schedule O 3b X bit Yes, 'nast filed a Foreign country Sen formation and year of the foreign country Sen instructions for filing requirements for FaCEN Form 114, Report of Foreign Bark and Financial accounts (FEAR). 5a X bit any brackle party holly the organization the Perm 144, Report of Foreign Bark and Financial Accounts (FEAR). 5a X c) If Yes, 'return the as one 5b, did the organization file Perm 8866 77. 5a X c) Does the organization an entry to use on that such contributions on gifts were not tax deductible a contributions and services provided to the ayea? 7a X d) If Yes, 'reductation that may receive deductible contributions under section 170(c). 7b 7b 7b c) Did the organization for Berm 8287 20 ord services proved/dt of the ayea? 7c X d) If Yes, 'rindicat the number of Forms 8282 filed during thy year				Yes	No
b If a test area tree area to a line 2a, dd the organization file al regured teoris employment tax returns? 2b X 3a X	2a				
3a Definition 3a X X b If "Ves," has it field a Form 990 T for this year? If "No" to fire 3b, provide an explanation on Schedule 0 3b X b If "Ves," into during the calendar year, do the organization have an interest in, or a signature or other autionity over, a financial account? 4a X b If "Ves," enter the name of the foreign country. See instructions for fing requirements to FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Sa X b Was the organization in a period to an share more and the enter stansaction on the stansaction on the stansaction on the stansaction on the organization the reganization the reganization the reganization the reganization in the reganization and period se architeck on the reganization regimes and reganization regimes any premume in cases d 5% regimes premumes on a presonal benefit contract? 7a X f Definition selle, exchange, or otherwise diagose of tangible personal property for which it was required to the spontation on the regimes during the reganization file form 8282? 7a X d		filed for the calendar year ending with or within the year covered by this return 2a 27			
b 1 Yes, 'has it field a form 990-T for this yes? If 'No' to fine 3b, provide an explanation on Schedule 0 90 4A At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a transcel account in a foreign country (such as a bank account, securities account, or other financial account (FBAP). 4a X 5b 1' Yes,' enter the name of the foreign country (such as a bank account, securities account, or other financial accounts (FBAP). 5a X 5c 1' Yes,' to be object to a prohibited tax shelter transaction at any time during the tax year? 5a X 5D Did any taxabite party notify the organization that was or is a party to a prohibited tax shelter transaction? 5c 5c 6D Does the organization have non tax deductible ac charitable contribution? 6a X 9D I' Yes,' to dit the organization that was or is a party to a prohibited tax shelter transaction regimes any encess of \$75 made party as a contribution and party for goods and services provided to the payof? 7a X 10 I' Yes,' did the organization necelve apyment in excess of \$75 made party as a contribution and party for goods and services provided to the payof? 7a X 10 I' Yes,' did the organization necelve apyment in excess of \$75 made party as a contribution and party for goods and services provided to the payof? 7a X 11 I' Yes,' did the organization funde	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
4a A any time during the calendary year, dd the organization have an interest in, or a signature or other authority over, a francial account) in a foreign country (such as a bank account, securities account, or other financial account)? 4a X b If 'ves, 'enter the name of the foreign country Sec instructions for fining requirements for FinicEN Form 114, Report of Foreign Bank and Financial Accounts (FBAP). 5a X b Ud any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the tax year? 5a X c If 'ves' is lot the organization in that it was or is a party to a prohibited tax charts transaction? 5a X d If 'ves, 'idd the organization include with every solicitation an express statement that such contributions colls: any contributions that may receive deductible contributions under section 170(c). 6a X d If 'ves, 'idd the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible actinative contributions? 7a X d If 'ves, 'idd the organization include with every solicitation and party for goods and services provided to the payo? 7a X d If 'ves, 'idd the organization include with uncery solicitation and party for goods and services provided? 7c X d If 'ves, 'idd the organization include with a sec or dist and the value of the goods cs services provided? 7c X	3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
If "res," return the name of the rolegin country 4a X b If "res," return the name of the rolegin country 5a X 5a Was the organization a party to a prohibited tax shefter transaction at any time during the tax year? 5a X 5a Was the organization have no unal gross receivity to a prohibited tax shefter transaction? 5a X 5b D Cary taxation have no unal gross receivity to a prohibited tax shefter transaction? 5a X 5b D Cary taxation have not tax deductible as charitable contributions? 5a X 61 M Yes," role the organization the organization the anal model as express statement that such contributions or gitts 6b C 61 M Yes," role the organization need express of \$7 made party as a contribution and party for goods and services provided to the party? 7a X 7 M Yes," role the organization need express dispose of tangible personal property for which twas required to the form 0822? 7c X 10 M Yes, "role the organization need express orbited or role orbits of organization feed express that model orbits or particle the number of Forms 8282 field during the year Zd Z 10 M the organization need express orbits of role orbits of organization feed express that model and services provided to the party orbits of the organization feed express orbits of role orbits of a door advised truth. Zd Zd Zd Zd Zd<	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
b If "Yes," enter the name of the foreign country See instructions for fing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), Sea Was the organization is for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR), Sea Was the organization is for FinCEN Form 888-77. Sea X b If was to its do soft, bid the organization file from 888-77. Sea X cl If was to its do soft, bid the organization in form 888-77. Sea X d If was, 'to its do soft, bid the organization in clude with every solotation an express statement that such contributions or gilts were not tax deductible contributions and express statement that such contributions or gilts Sea X d If 'vas,' idd the organization include with every solotation an express statement that such contributions or gilts were not tax deductible acharhale contributions? Sea X d If 'vas,' idd the organization include with every coldad is services provided? To X d If 'vas,' idd the organization include on the solute of the pode is services provided? To X d If 'vas,' iddicate the number of Form 8282 filed during the year Zd Zd To X d If 'vas,' iddicate the contribution of cars, boats, alplanes, or other whicles, did the organization file were ontibulated indication upperfy, did the organization file were more soribulation of qaris, boats, a	4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
See instructions for ling requirements for FinCEN Form 114, Roport of Poneign Bank and Financial Accounts (FBAR). Sea X Sa Was the organization a party to a prohibited tax sheter transaction at any time during the tax year? Sea X So Dot any taxable party notify the organization that it was or is a party to a prohibited tax sheter transaction? Sea X So Dot should the organization name annual gross receipts that are normally greater than \$100,000, and did the organization solution on the were not tax deductible as charitable contributions? Sea X b If "Yes," id the organization noise of \$57 made party as a contributions? Sea X b If "Yes," id the organization noise of \$57 made party as a contributions and party for goods and services provided to the payor? 7a X a Did the organization noise, strange, or otherwise dispose of tangible personal property for which it was required to file Form 8828? To To X b Did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To X X f Did the organization neceive any tunds, directly or indirectly, to pay premiums on a personal benefit contract? To X X f Did the organization neceived a contribution of case, base, any anxes, or other vehicles, did the organization file Form 8899 as required? To X f Did the organization neceived		financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
5a Mast the organization a party to a prohibited tax sheft transaction at any time during the tax year? 5a X b Did any taxable party notify the organization that it was or is a party to a prohibited tax shefter transaction? 5c Sc Sc <t< th=""><th>b</th><th></th><th></th><th></th><th></th></t<>	b				
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12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b 12b 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a 13a a Is the organization licensed to issue qualified health plans in more than one state? 13a 13a Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13a c Enter the amount of reserves on hand 13b 13c 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 14b 14b 15 Is the organization an educational institution subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X if "Yes," see the instructions and file Form 4720, Schedule O. 16 X if "Yes," complete Form 4720, Schedule O. 16 X if "Yes," complete Form 4720, Schedule O. 17 17	-				
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13 Section 501(c)(29) qualified nonprofit health insurance issuers. 13a a Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. Image: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b Image: See the instructions of reserves on hand c Enter the amount of reserves on hand 13c Image: See the instruction receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> 14b Image: See the instructions and file Form 4720, Schedule N. 15 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X If "Yes," complete Form 4720, Schedule O. Image: Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? Image: Section 501(c)(21) organization of an excise tax under section 4951, 4952 or 4953? Image: Section 502(c)(21) organization of an excise tax under section 4951, 4952 or 4953? <th></th> <th></th> <th></th> <th></th> <th></th>					
a Is the organization licensed to issue qualified health plans in more than one state? 13a Note: See the instructions for additional information the organization must report on Schedule O. Image: Comparization is licensed to issue qualified health plans b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b c Enter the amount of reserves on hand 13c 14a 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> 14b 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X If "Yes," see the instructions and file Form 4720, Schedule N. 16 X If "Yes," complete Form 4720, Schedule O. 16 X If "Yes," complete Form 4720, Schedule O. 16 X If "Yes," complete Form 4720, Schedule O. 17 17					
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b 13b c Enter the amount of reserves on hand 13c 14a X 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X If "Yes," see the instructions and file Form 4720, Schedule N. 16 X If "Yes," complete Form 4720, Schedule O. 16 X If "Yes," complete Form 4720, Schedule O. 16 X If "Yes," complete Form 4720, Schedule O. 16 X If "Yes," complete Form 4720, Schedule O. 16 X If "Yes," complete Form 4720, Schedule O. 17 17	а		13a		
organization is licensed to issue qualified health plans 13b 13b 13c c Enter the amount of reserves on hand 13c 14a X 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X If "Yes," see the instructions and file Form 4720, Schedule N. 16 X 16 If "Yes," complete Form 4720, Schedule O. 16 X 1f "Yes," complete Form 4720, Schedule O. 16 X 17 17		Note: See the instructions for additional information the organization must report on Schedule O.			
c Enter the amount of reserves on hand 13c 14a X 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X If "Yes," see the instructions and file Form 4720, Schedule N. 16 X If "Yes," complete Form 4720, Schedule O. 16 X If "Yes," complete Form 4720, Schedule O. 17 17	b	Enter the amount of reserves the organization is required to maintain by the states in which the			
14a Did the organization receive any payments for indoor tanning services during the tax year? 14a X b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X If "Yes," see the instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X If "Yes," complete Form 4720, Schedule O. 17 16 17					
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Schedule O</i> 14b 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 X If "Yes," see the instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X If "Yes," complete Form 4720, Schedule O. 17 16 X	С				
 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X 16 X 17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 					X
excess parachute payment(s) during the year? 15 X If "Yes," see the instructions and file Form 4720, Schedule N. 16 X 16 X 16 X 17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17 17			14b		
If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O. If "Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	15				v
 16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 X 16 If "Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 			15		Ā
If "Yes," complete Form 4720, Schedule O. 17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?					v
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? 17	16		16		Λ
that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	47				
	17		47		
			17		

Form 990 (2023)

Part V

CALIFORNIA WATER EFFICIENCY PARTNERSHIP

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 Part VI
 Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

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

	Check if Schedule O contains a response or note to any line in this Part VI			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 23			
	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 23			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
	officer, director, trustee, or key employee?	2		Х
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		Х
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		Х
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		X
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 year by the following:			
а	The governing body?	8a	Х	
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		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a		12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	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 decision?		37	
	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
40	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	40		x
	taxable entity during the year?	16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	1Ch		
800	exempt status with respect to such arrangements?	16b		
	tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed CA			
17 19	List the states with which a copy of this Form 990 is required to be filed <u>CA</u> Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3			able
18	for public inspection. Indicate how you made these available. Check all that apply.	is only	, avail	aule
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	d fina	Icial	
13	statements available to the public during the tax year.	u midi	icial	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
_0	PARTNERSHIP OFFICE - (916)552-5885			
	901 F STREET, 225, SACRAMENTO, CA 95814			

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)

who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(1) TIA LEBHERZ 4 (2) SARAH FOLEY 3 (2) CO-EXEC. DIRECTOR-OPERATIONS 3	(B) Average ours per week (list any nours for related ganizations below	box	not cl , unles cer an	ss per	tion ^{more} rson i	than o s both	n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of
(1) TIA LEBHERZ (1) (1) TIA LEBHERZ (1) (2) SARAH FOLEY (2) (2) SARAH FOLEY (3) (3) JOY KEIGHTLEY (3) (4) JOE BERG (4) DIRECTOR (5) (5) BILL MCDONNELL (5) DIRECTOR (6) (6) SARAH MUSIKER (6)	ours per week (list any nours for related ganizations below	box offic	not cl , unles cer an	neck i ss per	more rson i	than o s both	n an	compensation	compensation	amount of
(1) TIA LEBHERZ 4 CO-EXEC. DIRECTOR-EXTERNAL AFFAIRS 3 (2) SARAH FOLEY 3 CO-EXEC. DIRECTOR-OPERATIONS 3 (3) JOY KEIGHTLEY 4 CONTROLLER 4 (4) JOE BERG 5 DIRECTOR 5 05 BILL MCDONNELL 5 DIRECTOR 6	week (list any nours for related janizations below	offic	cer an							
(1) TIA LEBHERZ 4 (2) SARAH FOLEY 3 (2) SARAH FOLEY 3 (3) JOY KEIGHTLEY 4 CONTROLLER 4 (4) JOE BERG 5 DIRECTOR 5 (5) BILL MCDONNELL 5 DIRECTOR 6 (6) SARAH MUSIKER 5	(list any nours for related ganizations below	istee or director						Irom	Irom related	
(1) TIA LEBHERZ 4 CO-EXEC. DIRECTOR-EXTERNAL AFFAIRS 3 (2) SARAH FOLEY 3 CO-EXEC. DIRECTOR-OPERATIONS 3 (3) JOY KEIGHTLEY 4 CONTROLLER 4 (4) JOE BERG 5 DIRECTOR 5 05 BILL MCDONNELL 5 DIRECTOR 6	nours for related ganizations below	istee or direct						the	organizations	other compensation
(1) TIA LEBHERZ 4 CO-EXEC. DIRECTOR-EXTERNAL AFFAIRS 3 (2) SARAH FOLEY 3 CO-EXEC. DIRECTOR-OPERATIONS 3 (3) JOY KEIGHTLEY 4 CONTROLLER 4 (4) JOE BERG 5 DIRECTOR 5 DIRECTOR 5 (5) SARAH MUSIKER 6	related janizations below	istee or				g		organization	(W-2/1099-MISC/	from the
(1) TIA LEBHERZ 4 CO-EXEC. DIRECTOR-EXTERNAL AFFAIRS 3 (2) SARAH FOLEY 3 CO-EXEC. DIRECTOR-OPERATIONS 3 (3) JOY KEIGHTLEY 4 CONTROLLER 4 (4) JOE BERG 4 DIRECTOR 5 BILL MCDONNELL 4 DIRECTOR 4 (6) SARAH MUSIKER 4	below	IST	Istee			en sa te		(W-2/1099-MISC/	1099-NEC)	organization
(1) TIA LEBHERZ 4 CO-EXEC. DIRECTOR-EXTERNAL AFFAIRS 3 (2) SARAH FOLEY 3 CO-EXEC. DIRECTOR-OPERATIONS 3 (3) JOY KEIGHTLEY 4 CONTROLLER 4 (4) JOE BERG 5 DIRECTOR 5 DIRECTOR 5 (5) SARAH MUSIKER 6		tr,	nal tru		oyee	ompe		1099-NEC)		and related
CO-EXEC. DIRECTOR-EXTERNAL AFFAIRS (2) SARAH FOLEY CO-EXEC. DIRECTOR-OPERATIONS (3) JOY KEIGHTLEY (4) JOE BERG DIRECTOR (5) BILL MCDONNELL DIRECTOR (6) SARAH MUSIKER		vidua	Institutional trustee	Cer	Key employee	Highest compensated employee	Former			organizations
CO-EXEC. DIRECTOR-EXTERNAL AFFAIRS (2) SARAH FOLEY CO-EXEC. DIRECTOR-OPERATIONS (3) JOY KEIGHTLEY (4) JOE BERG DIRECTOR (5) BILL MCDONNELL DIRECTOR (6) SARAH MUSIKER	line)	lndi	Inst	Officer	Key	High emp	Forr			
(2) SARAH FOLEY 3 CO-EXEC. DIRECTOR-OPERATIONS 4 (3) JOY KEIGHTLEY 4 CONTROLLER 4 (4) JOE BERG 4 DIRECTOR 5 (5) BILL MCDONNELL 4 DIRECTOR 6 (6) SARAH MUSIKER 5	40.00									
CO-EXEC. DIRECTOR-OPERATIONS 4 (3) JOY KEIGHTLEY 4 CONTROLLER 4 (4) JOE BERG 5 DIRECTOR 5 DIRECTOR 5 OIRECTOR 6 SARAH MUSIKER 5				Х				133,256.	0.	18,119.
(3) JOY KEIGHTLEY 4 CONTROLLER (4) JOE BERG (4) JOE BERG DIRECTOR (5) BILL MCDONNELL DIRECTOR (6) SARAH MUSIKER (6) SARAH MUSIKER	36.00									
CONTROLLER (4) JOE BERG DIRECTOR (5) BILL MCDONNELL DIRECTOR (6) SARAH MUSIKER				Х				125,763.	0.	12,532.
(4) JOE BERG DIRECTOR (5) BILL MCDONNELL DIRECTOR (6) SARAH MUSIKER	40.00									
DIRECTOR (5) BILL MCDONNELL DIRECTOR (6) SARAH MUSIKER						Х		127,913.	0.	7,675.
(5) BILL MCDONNELL DIRECTOR (6) SARAH MUSIKER	1.00									
DIRECTOR (6) SARAH MUSIKER		Х						0.	0.	0.
(6) SARAH MUSIKER	1.00									
		Х						0.	0.	0.
DIRECTOR	1.00									
		Х						0.	0.	0.
(7) JENNA SHIMMIN	1.00									
DIRECTOR		Х						0.	0.	0.
(8) JULIE ORTIZ	1.00									
DIRECTOR		Х						0.	0.	0.
(9) KEN JENKINS	1.00									
DIRECTOR		Х						0.	0.	0.
(10) PATRICK PILZ	1.00									
DIRECTOR		Х						0.	0.	0.
(11) CLAIRE NORDLIE	1.00									
DIRECTOR		Х						0.	0.	0.
(12) TERRENCE MCCARTHY	1.00									
DIRECTOR		Х						0.	0.	0.
(13) RICK FOSTER	1.00									
DIRECTOR		Х						0.	0.	0.
(14) AMY TALBOT	1.00									
DIRECTOR		Х						0.	0.	0.
(15) GREG BUNDESEN	1.00									
DIRECTOR		Х						0.	0.	0.
(16) ELIZABETH LOVSTED	1.00									
DIRECTOR		X						0.	0.	0.
(17) JENYFFER VASQUEZ		L						÷ ·	-	
DIRECTOR	1.00	x						0.	0.	0.

Form 990 (2023) CALIFORN	A WATER	RE	SFF	'IC	CIE	ENC	CY	PARTNERSHIP	68-0318	069	Pa	age 8
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
(A) Name and title	(B) Average hours per week	er (do not box, unl officer a		neck i ss pei	ition ^{more} rson i	than is bot	h an	(D) Reportable compensation from	(E) Reportable compensation from related		(F) Estimated amount of other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	f org an	npensa rom th ganizat d relat anizati	e ion ed
(18) DEBBY DUNN DIRECTOR	1.00	x						0.	0.			0.
(19) MADELINE WOOD	1.00							0	0			
DIRECTOR	1.00	X						0.	0.			0.
(20) JUSTIN FINCH DIRECTOR	1.00	x						0.	0.			0.
(21) MATTHEW DICKENS DIRECTOR	1.00	x						0.	0.			0.
(22) CARLO GAVINA	1.00	~						0.	0.			0.
DIRECTOR		х						0.	0.			0.
(23) JAZMINE MOLLOY DIRECTOR	1.00	x						0.	0.			0.
(24) AMY MCNULTY	1.00											
SECRETARY/TREASURER (25) CHARLES BOHLIG	1.00	Х		X				0.	0.			0.
VICE CHAIR		х		х				0.	0.			0.
(26) ROB WHIPPLE CHAIR	1.00	x		x				0.	0.			0.
								386,932.	0.	3	8,3	
1b Subtotal 500,952 0. c Total from continuation sheets to Part VII, Section A 0. 0.							0.					
d Total (add lines 1b and 1c)								386,932.	0.	3	8,3	26.
2 Total number of individuals (including but n compensation from the organization	ot limited to th	iose	liste	d at	ove	e) wł	no re	eceived more than \$100	,000 of reportable		No a	3
3 Did the organization list any former officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for se</i>										3	Yes	No X
4 For any individual listed on line 1a, is the su	m of reportab	le co	mpe	ensa	ation	n and	d otl	her compensation from t	he organization	3		
and related organizations greater than \$150 5 Did any person listed on line 1a receive or a										4	X	
rendered to the organization? If "Yes," com	•							U		5		Х
Section B. Independent Contractors									• · · · · · · · ·			
Complete this table for your five highest con the organization. Report compensation for the organization.										sation	from	
(A) Name and business	address	NC	ONE	2				(B) Description of se	ervices C		C) Insatio	n
							_					
2 Total number of independent contractors (ii \$100,000 of compensation from the organiz	•	ot lir	nited	d to		se li:)	sted	l above) who received m	ore than			

				A WA	TER EFFI	CIENCY PAR	TNERSHIP	68-0318	069 Page 9
Pa	rt VI	II Statement of Re	evenue						
		Check if Schedule O	contains a res	ponse	or note to any lir	ne in this Part VIII			
						(A)	(B) Related or exempt	(C) Unrelated	(D) Revenue excluded
						Total revenue		business revenue	from tax under
									sections 512 - 514
nts	1 a	Federated campaigns		_					
Gra	b	Membership dues	1k						
Αn. (с	Fundraising events		_					
Gif	d	Related organizations	10	I					
in,	е	Government grants (contr	ributions) 1 e	,	117,108.				
er S	f	All other contributions, gifts,	grants, and						
Contributions, Gifts, Grants and Other Similar Amounts		similar amounts not included		_	144,350.				
ti pe	-	Noncash contributions included in	lines 1a-1f	\$					
<u>a Ö</u>	h	Total. Add lines 1a-1f				261,458.			
					Business Code				
e	2 a				900099	829,765.	829,765.		
ervi	b			<u>IF</u>	900099	39,831.	39,831.		
en C	с				900099	34,850.	34,850.		
ran ?ev	d	PUBLICATION S	SALES		900099	4,587.	4,587.		
Program Service Revenue	е								
٩	f	1 5							
	g					909,033.			
	3	Investment income (includ	ding dividends	s, inter	est, and	10 516			10 516
					10,516.			10,516.	
	4	Income from investment of	-						
	5	Royalties		<u></u>					
			(i) Re	eal	(ii) Personal				
		Gross rents	6a						
	b	Less: rental expenses	6b						
	С	()	6c						
		Net rental income or (loss							
	7 a	Gross amount from sales of	(i) Secu	irities	(ii) Other				
		assets other than inventory	7a						
đ	b	Less: cost or other basis							
evenue		and sales expenses	7b		1				
eve		Gain or (loss)	7c						
Other R		Net gain or (loss)			 I				
ţ	вa	Gross income from fundraisi	-						
0		including \$							
		contributions reported on	,						
	Ь	Part IV, line 18							
		Net income or (loss) from		··· 🖵					
		Gross income from gamin							
	Jd	Part IV, line 19	-						
	Ь	Less: direct expenses							
	c c	Net income or (loss) from	naming activi	Loo ties					
		Gross sales of inventory, I							
	10 0	and allowances		10:					
	h	Less: cost of goods sold							
		Net income or (loss) from							
				y	Business Code				
Miscellaneous Revenue	11 a								
ane	b								
eve:	c								
lisc	-	All other revenue							
2		Total. Add lines 11a-11d							
		Total revenue. See instruction				1,181,007.	909.033.	0.	10.516.

Form 990 (2023)	CALIFORNIA	WATER	EFFICIENCY	PARTNERSHIP	68-0318069	Page 10
Part IX Statement of I	Functional Expen	ses				

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 respon	se or note to any line in	this Part IX		
Dor	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	Bb, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		·		•
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	289,670.	188,848.	100,822.	
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	319,740.	208,452.	111,288.	
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	21,348.	13,918.	7,430.	
9	Other employee benefits	41,467.	27,034.	14,433.	
10	Payroll taxes	47,405.	30,905.	16,500.	
11	Fees for services (nonemployees):				
а	Management				
	Legal				
	Accounting	14,800.	11,840.	2,960.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)	36,534.	36,534.		
12	Advertising and promotion	1,762.		1,762.	
13	Office expenses	31,129.	24,154.	6,975.	
14	Information technology	36,615.	32,318.	4,297.	
15	Royalties				
16	Occupancy	59,123.	38,545.	20,578.	
17	Travel	21,653.	21,249.	404.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	80,237.	79,962.	275.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	7,148.	5,405.	1,743.	
23	Insurance	12,515.	10,478.	2,037.	
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 0.)				
а					
b					
с					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,021,146.	729,642.	291,504.	0
	Joint costs. Complete this line only if the organization				
26					
26	reported in column (B) joint costs from a combined				
26					

CALIFORNIA WATER	EFFICIENCY	PARTNERSHIP	68	8–0)
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318069 Page **11**

		Chaoly if Cohodula O accetains a surger	4.4	u line in this Dout V			
		Check if Schedule O contains a response or no	te to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			1,330,624.	1	1,495,287.
	2	Savings and temporary cash investments			228,559.		248,771.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			146,108.	4	155,751.
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the				5	
	6	Loans and other receivables from other disqual					
		under section 4958(f)(1)), and persons describe				6	
s	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			14,102.	8	5,869.
As	9	Prepaid expenses and deferred charges		14,102.		19,808.	
	10a	Land, buildings, and equipment: cost or other			· · · · · · · · · · · · · · · · · · ·		
		basis. Complete Part VI of Schedule D	10a	67,305.			
	b	Less: accumulated depreciation		60,343.	13,382.	10c	6,962.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			366,513.	15	327,141.
	16	Total assets. Add lines 1 through 15 (must equ			2,113,390.	16	2,259,589.
	17	Accounts payable and accrued expenses			101,212.	17	141,285.
	18	Grants payable			18		
	19	Deferred revenue	9,790.	19	18,991.		
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
ŝ	22	Loans and other payables to any current or for	ner offic	cer, director,			
Liabilities		trustee, key employee, creator or founder, subs					
abi		controlled entity or family member of any of the				22	
1	23	Secured mortgages and notes payable to unrel				23	
	24	Unsecured notes and loans payable to unrelate	d third	parties		24	
	25	Other liabilities (including federal income tax, pa	ayables	to related third			
		parties, and other liabilities not included on line	s 17-24)	. Complete Part X			
		of Schedule D			962,361.		899,554.
	26	Total liabilities. Add lines 17 through 25			1,073,363.	26	1,059,830.
6		Organizations that follow FASB ASC 958, ch	eck her	e X			
ice.		and complete lines 27, 28, 32, and 33.					
alar	27	Net assets without donor restrictions			972,577.	27	1,091,356. 108,403.
ΪB	28	Net assets with donor restrictions			67,450.	28	108,403.
nu		Organizations that do not follow FASB ASC 9	958, che	eck here			
Ē		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds				29	
sse	30	Paid-in or capital surplus, or land, building, or e	quipme	nt fund		30	
ťΑ	31	Retained earnings, endowment, accumulated in				31	
Ne	32	Total net assets or fund balances			1,040,027.		1,199,759.
	33	Total liabilities and net assets/fund balances			2,113,390.	33	2,259,589.

Form **990** (2023)

Form	1990 (2023) CALIFORNIA WATER EFFICIENCY PARTNERSHIP	68-03	318069	Pag	ge 12				
Pa	rt XI Reconciliation of Net Assets								
	Check if Schedule O contains a response or note to any line in this Part XI								
1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,181						
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,021						
3	Revenue less expenses. Subtract line 2 from line 1	3			61.				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,040						
5	Net unrealized gains (losses) on investments	5		-1	29.				
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8	Prior period adjustments	8							
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,								
	column (B))	10	1,199),7	<u>59.</u>				
Part XII Financial Statements and Reporting									
	Check if Schedule O contains a response or note to any line in this Part XII				X				
				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 Schedul	e O.		37					
2a			2a	Х	<u> </u>				
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a							
	separate basis, consolidated basis, or both:								
	X Separate basis Consolidated basis Both consolidated and separate basis				v				
b	Were the organization's financial statements audited by an independent accountant?		2 b		X				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,							
	consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the			v					
	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 Scl	nedule O.							
за	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				x				
-	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		<u>3a</u>		^				
a	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				1				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b						

Form **990** (2023)

(Form 990)

Total

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.

OMB No. 1545-0047
2023
Open to Public

	Attach to Form 990 or Form 990-EZ. genal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.			Open to Public Inspection						
Nam	e of	the organizati	on						Employer	identification number
			CALI	FORNIA WAT	ER EFFICIENC	Y PAR	TNERS	HIP	6	8-0318069
Pa	rt I	Reason	for Public	Charity Status.	(All organizations must o	omplete t	his part.) S	See instructio	ns.	
The o	organ	nization is not a	a private found	dation because it is:	(For lines 1 through 12, c	heck only	one box.)			
1		A church, co	nvention of ch	nurches, or association	on of churches describe	d in sectio	on 170(b)(1)(A)(i).		
2		A school des	cribed in sect	tion 170(b)(1)(A)(ii).	Attach Schedule E (Forn	n 990).)				
3		A hospital or	a cooperative	hospital service org	anization described in s e	ection 170)(b)(1)(A)(i	ii).		
4		A medical res	search organiz	zation operated in co	njunction with a hospita	l describe	d in sectio	on 170(b)(1)(A	(iii). Enter	the hospital's name,
		city, and stat	e:							
5		An organizati	on operated f	or the benefit of a co	ollege or university owned	d or opera	ted by a g	overnmental	unit descrik	oed in
		section 170	(b)(1)(A)(iv). ((Complete Part II.)						
6		A federal, sta	ite, or local go	vernment or governr	mental unit described in	section 1	70(b)(1)(A)	(v).		
7	X	An organizati	on that norma	ally receives a substa	antial part of its support f	rom a gov	vernmenta	l unit or from	the general	public described in
		section 170(b)(1)(A)(vi). (C	Complete Part II.)						
8		A community	trust describ	ed in section 170(b)	(1)(A)(vi). (Complete Par	t II.)				
9		An agricultur	al research or	ganization described	l in section 170(b)(1)(A)(ix) operate	ed in conju	unction with a	a land-grant	college
		or university	or a non-land-	grant college of agric	culture (see instructions).	Enter the	name, cit	y, and state o	of the colleg	je or
		university:								
10		An organizati	on that norma	ally receives (1) more	than 33 1/3% of its sup	port from	contributio	ons, members	ship fees, a	nd gross receipts from
		activities rela	ted to its exer	npt functions, subjee	ct to certain exceptions;	and (2) no	more tha	n 33 1/3% of	its support	from gross investment
		income and ι	unrelated busi	ness taxable income	e (less section 511 tax) fr	om busine	esses acqu	uired by the c	rganization	after June 30, 1975.
		See section	509(a)(2). (Co	mplete Part III.)						
11		An organizati	ion organized	and operated exclus	sively to test for public sa	fety. See	section 50	09(a)(4).		
12		An organizati	ion organized	and operated exclus	sively for the benefit of, to	o perform	the function	ons of, or to c	arry out the	e purposes of one or
		more publicly	v supported or	rganizations describe	ed in section 509(a)(1) o	r section	509(a)(2).	See section	509(a)(3). (Check the box on
		lines 12a thro	ough 12d that	describes the type of	of supporting organizatio	n and con	nplete line	s 12e, 12f, ar	ıd 12g.	
а		Type I. A s	upporting orga	anization operated, s	supervised, or controlled	by its sup	ported or	ganization(s),	typically by	/ giving
		the suppor	ted organizati	on(s) the power to re	egularly appoint or elect a	a majority	of the dire	ctors or trust	ees of the s	supporting
		organizatio	n. You must d	complete Part IV, Se	ections A and B.					
b		Type II. A s	supporting org	anization supervised	d or controlled in connec	tion with i	ts support	ed organizati	on(s), by ha	aving
		control or r	nanagement o	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or man	age the sup	oported
		organizatio	n(s). You mus	st complete Part IV,	Sections A and C.					
с		Type III fui	nctionally inte	egrated. A supportin	g organization operated	in connec	tion with,	and functiona	ally integrat	ed with,
	_	_ its support	ed organizatio	on(s) (see instructions	s). You must complete l	Part IV, Se	ections A,	D, and E.		
d		Type III no	n-functionall	y integrated. A supp	oorting organization oper	ated in co	nnection v	with its suppo	orted organi	ization(s)
		that is not	functionally int	tegrated. The organi	zation generally must sa	tisfy a dist	ribution re	quirement ar	id an attent	iveness
		requiremer	nt (see instruct	tions). You must cor	nplete Part IV, Sections	A and D	, and Part	۷.		
е		Check this	box if the org	anization received a	written determination fro	om the IRS	6 that it is a	а Туре I, Туре	e II, Type III	
		functionally	/ integrated, o	r Type III non-functio	onally integrated support	ing organi	zation.			
f	Ente	er the number	of supported	organizations						
g			-	n about the supporte						
	((i) Name of supp		(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your govern	anization listed ing document?	(v) Amount o	-	(vi) Amount of other
		organizatior	1		above (see instructions))	Yes	No	support (see i	nstructions)	support (see instructions)

Schedule A (Form 990) 2023 CALIFORNIA WATER EFFICIENCY PARTNERSHIP 68-0318069 Page 2 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	377,867.	259,740.	279,740.	238,693.	261,458.	1,417,498.
2	Tax revenues levied for the organ-						
	ization'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	377,867.	259,740.	279,740.	238,693.	261,458.	1,417,498.
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)						65,817.
	Public support. Subtract line 5 from line 4.						1,351,681.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	377,867.	259,740.	279,740.	238,693.	261,458.	1,417,498.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources \dots	3,480.	1,349.	253.	3,262.	10,516.	18,860.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on \dots						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)		20,150.	2,570.	68.		22,788.
11	Total support. Add lines 7 through 10						1,459,146.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12 4	,908,927.
13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3)	
_	organization, check this box and stor						
	ction C. Computation of Publ						00 64
	Public support percentage for 2023 (14	92.64 %
	Public support percentage from 2022					15	93.23 %
16a	33 1/3% support test - 2023. If the c						
	stop here. The organization qualifies						
b	33 1/3% support test - 2022. If the c						
4-	and stop here. The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the fact			-	-	-	
	meets the facts-and-circumstances te	-		• • • •	-	17a and line 15 is i	
b	10% -facts-and-circumstances tes						IU% Or
	more, and if the organization meets the						
40	organization meets the facts-and-circ						
18	Private foundation. If the organization	in did not check a	box on line 13, 16	a, 160, 17a, or 17b	o, check this box a	ind see instruction:	s

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023 CALIFORNIA WATER EFFICIENCY PARTNERSHIP 68-0318069 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not	I					
	include any "unusual grants.")	ſ					
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-						
	iness under section 513	ſ					
4	Tax revenues levied for the organ-	1					
•	ization's benefit and either paid to						
	or expended on its behalf	ſ					
5	The value of services or facilities						
Ŭ	furnished by a governmental unit to	ſ					
	the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
10	3 received from disgualified persons	ſ					
k	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						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support				1		
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6						
10 <i>a</i>	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income	ſ					
	(less section 511 taxes) from businesses	ſ					
	acquired after June 30, 1975						
c	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.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for th	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organiz	ation,
	check this box and stop here						
Se	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2023 (line 8, column (f), c	livided by line 13,	column (f))		15	%
16	Public support percentage from 2022	Schedule A, Part	III, line 15			16	%
Se	ction D. Computation of Invest	stment Incom	e Percentage				
17	Investment income percentage for 20)23 (line 10c, colur	nn (f), divided by l	ne 13, column (f))		17	%
	Investment income percentage from					18	%
	33 1/3% support tests - 2023. If the					33 1/3%, and line	e 17 is not
	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2022. If the						6, and
~	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						

Schedule A (Form 990) 2023

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If* "Yes," *answer lines 3b and 3c below.*
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If* "Yes," *describe in* **Part VI** *when and how the organization made the determination.*
- c 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.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," *and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*
- **b** 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.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 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).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* Part VI.
- 7 Did the organization provide a grant, Ioan, 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).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- **c** 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.*
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Yes No 1 2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b

Schedule A (Form 990) 2023 CALIFORNIA WATER EFFICIENCY PARTNERSHIP 68-0318069 Page 5

			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		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No

- Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
 Did the organization operate for the benefit of any supported organization other than the supported
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization (s) that operated, supervised, or controlled the supported organization(s) that operated, supervised, or controlled the supporting organization.
 Section C. Type II Supporting Organizations

Section C. Type in Supporting Organizations					

 Yes
 No

 1
 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).
 1
 1
 1
 1
 1

Sec	ction 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		

supported organizations played in this regard. Section 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 yea(see instructions).
- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*
- c _____ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- a 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.
- 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.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" provide details in **Part VI.**
- **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.*

No

Yes

1

2

CALIFORNIA WATER EFFICIENCY PARTNERSHIP 68-0318069 Page 6 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	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-function	ally integrate	ad Type III supporting or	anization (see

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

Schedule A (Form 990) 2023

Part V Type III Non-Funct						Tager
Schedule A (Form 990) 2023	CALTFORNTA	WATER	EFFICIENCY	PARTNERSHIP	68-0318069	Page 7

Par	t V Type III Non-Functionally Integrated 509	v(a)(3) Supporting Orga	inizations (continue	<u>ed)</u>	
Secti	on D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		1	
2	Amounts paid to perform activity that directly furthers exempt	pt purposes of supported			
	organizations, in excess of income from activity		2		
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	s	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which t	he organization is responsive	,		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	;	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
а	From 2018				
b	From 2019				
с	From 2020				
d	From 2021				
е	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: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2019				
b	Excess from 2020				
с	Excess from 2021				
d	Excess from 2022				
е	Excess from 2023				

Schedule A (Form 990) 2023

Schedule A	. (Form 990) 2023	CALIFORNIA	WATER	EFFICIE	NCY PA	RTNERSHI	e 68-031806	9 Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D, Section D, lines 5, 6, and (See instructions.)	, 2, 3b, 3c, 4b, 4c, 5a, lines 2 and 3; Part IV,	6, 9a, 9b, 9c, Section E, line	, 11a, 11b, and es 1c, 2a, 2b, 3	11c; Part I\ a, and 3b; I	/, Section B, lines Part V, line 1; Part	1 and 2; Part IV, Sect V, Section B, line 1e;	ion C,

Schedule B

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information.

Schedule of Contributors

OMB No. 1545-0047

2023

Employer identification number

Department of the Treasury
Internal Revenue Service

(Form 990)

Name of the organization

	CALIFORNIA	WATER	EFFICIENCY	PARTNERSHIP
Organization type (che	eck one):			

68-0318069

Filers of:	Section:
Form 990 or 990-EZ	\fbox 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not 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

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

📙 For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year ______ \$ _

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) Name of organization

323452 12-26-23

CALIFORNIA WATER	EFFICIENCY	PARTNERSHIP
------------------	------------	-------------

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ <u>50,585.</u>	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$38,750.	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
3		\$ <u>10,000.</u>	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		\$13,373.	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		\$6,000.	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		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

68-0318069

Schedule B (Form 990) (2023)
Name of organization

CALIFORNIA WATER EFFICIENCY PARTNERSHIP

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ <u>19,900.</u>	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
8		\$9,500.	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
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll On Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll On Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

68-0318069

Name of organization

CALIFORNIA WATER EFFICIENCY PARTNERSHIP

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

68-0318069

Schedule	B (Form 990) (2023)		Page 4
Name of o	organization		Employer identification number
CALIF	ORNIA WATER EFFICIENCY	PARTNERSHIP	68-0318069
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, of	through (e) and the following line en	section 501(c)(7), (8), or (10) that total more than \$1,000 for the year http:. For organizations less for the year. (Enter this info. once.) \$
	Use duplicate copies of Part III if additional	space is needed.	• less for the year. (Enter this into, once.) •
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	[
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No.		[
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	ift
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	ift
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gi	ift
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee

SCHEDULE C	Political Campaign and Lobbying Activities
(Form 990)	
	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.

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.

Department of the Treasury Internal Revenue Service

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 separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

INAII	ne or orga					loyer identification number
			NIA WATER EFFICI			68-0318069
Pa	art I-A	Complete if the org	anization is exempt und	ler section 501(c)	or is a section 527 of	organization.
2 3	Political Voluntee	campaign activity expendit r hours for political campai	ration's direct and indirect politio ures gn activities			3
Pa	art I-B	Complete if the org	janization is exempt und	ler section 501(c)	(3).	
			incurred by the organization une			
			incurred by organization manag			
			n 4955 tax, did it file Form 4720			
						Yes II No
	olf "Yes,"	describe in Part IV.	anization is exempt und	lar contian 501(a)	avaant coation 501	(0)(3)
			d by the filing organization for se			
			ization's funds contributed to of			
2				•		5
3			. Add lines 1 and 2. Enter here a			·
					•	8
4			1120-POL for this year?			
5			mployer identification number (E			
			tion listed, enter the amount pai			
			omptly and directly delivered to			ate segregated fund or a
	political	. ,	additional space is needed, prov			I
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

OMB No. 1545-0047

2023 Open to Public Inspection

Employer identification number

	chedule C (F			CALIFORNIA WATER EFFICIENCY PARTNERSHIP 68-0318069 Page 2				
F	Part II-A		nplete if the organization is exempt under section 501(c)(3) and fil tion 501(h)).	ed Form 5768 (e	lection under			
A	Check		if the filing organization belongs to an affiliated group (and list in Part IV each affiliated expenses, and share of excess lobbying expenditures).	l group member's nan	ne, address, EIN,			
В	3 Check if the filing organization checked box A and "limited control" provisions apply.							
			Limits on Lobbying Expenditures	(a) Filing	(b) Affiliated group			

	(The term "expenditures" m	eans amounts paid or incurred.)	totals	totals
1a	Total lobbying expenditures to influence pub	lic opinion (grassroots lobbying)		
b	Total lobbying expenditures to influence a leg	gislative body (direct lobbying)		
с	Total lobbying expenditures (add lines 1a and	d 1b)		
d	Other exempt purpose expenditures			
е	Total exempt purpose expenditures (add line	s 1c and 1d)		
f	Lobbying nontaxable amount. Enter the amo	unt from the following table in both columns.		
	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% o	f line 1f)		
h	Subtract line 1g from line 1a. If zero or less, e	enter -0-		
i	Subtract line 1f from line 1c. If zero or less, et	nter -0-		
j	If there is an amount other than zero on eithe	r line 1h or line 1i, did the organization file Form 4720		

_____ 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.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2023

🗌 No

___ Yes

reporting section 4911 tax for this year?

CALIFORNIA WATER EFFICIENCY PARTNERSHIP 68-0318069 Page3

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(;	a)	(k)
of the lobbying activity.	Yes	No	Amo	ount
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?		X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X		
c Media advertisements?		X		
d Mailings to members, legislators, or the public?		X		
e Publications, or published or broadcast statements?		X		
f Grants to other organizations for lobbying purposes?		X		
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	<u> </u>	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	<u> </u>	
i Other activities?	X			L,950.
j Total. Add lines 1c through 1i			1	L,950.
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		X		
b If "Yes," enter the amount of any tax incurred under section 4912				
f 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)(6).	on 501(c))(5), or se	ction	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the	ne prior yea	ır? 3		
Part III-B Complete if the organization is exempt under section 501(c)(4), section	on 501(c))(5), or se	ction	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	"No" OF	R (b) Part	III-A, lin	e 3, is
answered "Yes."				
1 Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politi	cal			
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year		2b		
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	cess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	oolitical			
expenditures next year?		4		
5 Taxable amount of lobbying and political expenditures. See instructions		5		
Part IV 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	o list); Part I	I-A, lines 1 a	and 2 (see	
instructions); and Part II-B, line 1. Also, complete this part for any additional information.				
PART II-B, LINE 1, LOBBYING ACTIVITIES:				
CALWEP CONTINUED TO ENGAGE ON THE "MAKING CONSERVATIO	N A CZ	ALIFOR	NIA WZ	ΑY
OF LIFE" REGULATION. THIS INCLUDES ENGAGING WITH THE	RELEVA	ANT ST	ATE	
AGENCIES, SUBMITTING A COMMENT LETTER, AND MAINTAININ	G WHZ	AT THE		
FRAMEWORK?" BLOG. ADDITIONALLY, CALWEP ALSO ENGAGED C	N VAR	IOUS S	TATE	
LEGISLATION. THIS INCLUDES PROVIDING FEEDBACK ABOUT A	SSEMBI			
		Schedu	le C (Form	990) 2023

Part IV Supplemental Information (continued)
1572 AND AB 1573 AND SUPPORTING THE FOLLOWING BILLS: AB 1572, SENATE
BILL (SB) 597, AND SB 867 (CALWEP SPECIFICALLY HAD A SUPPORT IF AMENDED
POSITION FOR THIS BILL). LASTLY, CALWEP SUBMITTED A COMMENT LETTER TO
US EPA WATERSENSE REGARDING POTENTIAL REVISIONS TO TANK TYPE TOILET
SPECIFICATIONS.

Department of the Treasury

Internal Revenue Service

(Form	990)
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Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 3 Open to Public Inspection

Name of the organization

CALIFORNIA WATER EFFICIENCY PARTNERSHIP

Employer identification number 68-0318069

I Total number at end of year (a) Donor advised funds (b) Funds and other accounts I Total number at end of year (a) Aggregate value of contributions to (during year) (b) Funds and other accounts A Aggregate value of contributions to (during year) (c) Funds and other accounts (c) Funds and other accounts Comparization inform all donors and donor advisors in writing that the assets held in donor advisor funds (c) Funds and other accounts For dot the organization inform all grantees, chorns, and donor advisors in writing that grant funds can be used only for charitable purposes and for the benefit of the donor or donor advisors in writing that grant funds can be used only for charitable purposes and for the benefit of the donor advisors in writing that grant funds can be used only for charitable purposes and to for the benefit of the donor advisors in writing that grant funds can be used only for charitable purposes and to for the benefit of the donor advisor in education) Preservation of a historicably inportant land area Protection of natural habitat Preservation of open space 2 comptelle inse 2 at hough 2 if the organization held a qualified conservation contribution in the form of a conservation easements include on line 2 a acquired at the 2 dod donor and a non- an instorie structure land in the X acquire date aduly 25, 2006, and not on a historie structure land in the X acquired atter aduly 25, 2006, and not on a historie structure land in the X acquired atter aduly 25, 2006, and not on a historie structure land enders A Number of conservation easements include of nine 2 a acquired atter aduly 25, 2006, and not on a historie stru	Par	t I Organizations Maintaining Donor Advise organization answered "Yes" on Form 990, Part IV, lin		is or Accounts. Complete if the
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 violations, and enforcement of the conservation easements it holds? Ves No 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)(i)? Yes No 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 asserted "Yes" on Form 990, Part IV, line 8. 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. 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. 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 in Part XIII the text of the footnote to its financial statements that describes these items. 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 rese	4	Number of states where property subject to conservation ea	sement is located	
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 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 8 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)? Yes No 9 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 IIII 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 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 If the organization neceived or held works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service,		violations, and enforcement of the conservation easements i	t holds?	Yes 📖 No
 8 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)? Yes No 9 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. 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. c) Revenue included on Form 990, Part X f 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 X b A	6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing co	nservation easements during the year
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and section 170(h)(4)(B)(ii)? Yes No 9 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. Ia 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. 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 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. b If the organization neceived or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FA	_			
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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 X b Assets included in Form 990, Part X	Da		f Art Historical Treasures or	Other Similar Assets
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 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				·
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 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				
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 \$	2			
a Revenue included on Form 990, Part VIII, line 1 \$ b Assets included in Form 990, Part X \$	2	-		
b Assets included in Form 990, Part X \$	9			\$
				Schedule D (Form 990) 2023

Sche		NIA WATER						031806		age 2
Pa	t III Organizations Maintaining C	Collections of A	rt, Hist	torical Tr	easures, or C	Other S	Similar As	sets(conti	inued)	
3	Using the organization's acquisition, access	ion, and other record	ds, checl	k any of the	following that ma	ake sign	ificant use o	f its		
	collection items (check all that apply).									
а	Public exhibition	c	ı 📖 ı	Loan or excl	hange program					
b	Scholarly research	e		Other						
с	Preservation for future generations									
4	Provide a description of the organization's c	ollections and explai	in how th	ey further t	ne organization's	exempt	t purpose in	Part XIII.		
5	During the year, did the organization solicit of	or receive donations	of art, hi	storical trea	sures, or other si	milar as	sets		_	-
	to be sold to raise funds rather than to be m							Yes		No
Pai	t IV Escrow and Custodial Arran		te if the	organizatior	answered "Yes"	on For	m 990, Part	V, line 9, or		
	reported an amount on Form 990, Pa									
1 a	Is the organization an agent, trustee, custod							—]		٦
	on Form 990, Part X?							Ves		∐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	ollowing t	able:		I				
								Amour	11	
	Beginning balance									
	Additions during the year						1d			
e	Distributions during the year						1e 1f			
20	Ending balance Did the organization include an amount on F							Yes		No
	If "Yes," explain the arrangement in Part XIII					-]
Pa									<u> </u>	<u></u>
		(a) Current year		rior year	(c) Two years ba		Three years ba	ack (e) Fou	ir years	back
1a	Beginning of year balance								-	
b	Contributions									
c	Net investment earnings, gains, and losses									
	Grants or scholarships									
	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur	rent year end baland	ce (line 1	g, column (a	a)) held as:					
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
с	Term endowment	<u>%</u>								
	The percentages on lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the posse	ession of the organiz	ation tha	at are held a	nd administered	for the				
	organization by:								Yes	No
	(i) Unrelated organizations?							3a(i)	L	
	(ii) Related organizations?							3a(ii)	 	
	If "Yes" on line 3a(ii), are the related organiza							3b		L
4	Describe in Part XIII the intended uses of the		owment	funds.						
Pa	t VI Land, Buildings, and Equipn		0 Dort IV	/ lina 11a C	oo Form 000 Do	rt V lind	10			
	Complete if the organization answere							(-1) D		
	Description of property	(a) Cost or c basis (investr		(b) Cost basis		depred	mulated	(d) Boo	ik valu	B
1-	Land	· · · · ·	nong	04313		aspiel				
	Land									
	Buildings Leasehold improvements									
	Equipment			4	5,010.	3	8,481.		6,5	29.
	Other				2,295.		1,862.			33.
	Add lines 1a through 1e. (Column (d) must e		X, line 1		-				6,9	
-	Z , , , , , , , , , , , , , , , , , , ,									

Schedule D (Form 990) 2023

Complete if the organization answered "Yes" (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or	end-of-vear market value
		(c) Method of Valuation. Cost of	enu-or-year market value
1) Financial derivatives			
2) Closely held equity interests2) Other			
(A) (A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or	end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1) OPERATING LEASE, RIGHT-OF	-USE-ASSET		327,141
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, co	ol. (B))		327,141
Part X Other Liabilities			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line	25.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) PROGRAM REBATE POOL			534,258
(3) ACCRUED VACATIONS			28,473
(4) PAYROLL TAXES PAYABLE			1,239
(5) SALES TAX PAYABLE			78
(6) PAYROLL BENEFITS PAYABLE			3,504
(7) OPERATING LEASE LIABILITY			332,002
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 25, co	ol. (B))	······	899,554

organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... 🗴

Schedule D (Form 990) 2023 CALIFORNIA WATER EFFICIENCY PARTNERSHIP 68-0318069 Page 3

Sche	dule D	D (Form 990) 2023	CALIFORNIA	WATER	EFFICIENCY	PARTNERSHIP	68-0)318069	Page 4
Pa	t XI	Reconciliation o	f Revenue per Au	dited Fin	ancial Statement	ts With Revenue p	er Return		
		Complete if the organ	ization answered "Yes'	' on Form 99	00, Part IV, line 12a.				
1	Total	revenue, gains, and oth	er support per audited	financial sta	atements		1		
2	Amou	unts included on line 1 b	out not on Form 990, Pa	art VIII, line ⁻	12:				
а	Net u	Inrealized gains (losses)	on investments			2a			
b	Dona	ated services and use of	facilities			2b			
с	Reco	overies of prior year gran	ts			2c			
d		r (Describe in Part XIII.)				2d			
е	Add I	lines 2a through 2d					2e		
3									
4		unts included on Form 9							
а	Inves	stment expenses not inc	luded on Form 990, Pa	rt VIII, line 7	b	4a			
b	Othe	r (Describe in Part XIII.)				4b			
с									
5	Total	revenue. Add lines 3 an	d 4c. (This must equal	Form 990, F	Part I, line 12.)		5		
Pa	rt XII	Reconciliation o	f Expenses per A	udited Fir	nancial Statemer	nts With Expenses	per Retur	rn	
			ization answered "Yes						
1	Total	expenses and losses pe	er audited financial sta	tements			1		
2	Amou	unts included on line 1 b	out not on Form 990, P	art IX, line 25	5:				
а	Dona	ated services and use of	facilities			2a			
b	Prior	year adjustments				2b			
с	Othe	r losses				2c			
d	Othe	r (Describe in Part XIII.)				2d			
е	Add I	lines 2a through 2d					2e		
3	Subt	ract line 2e from line 1					3		
4	Amou	unts included on Form 9	90, Part IX, line 25, but	t not on line	1:				
а	Inves	stment expenses not inc	luded on Form 990, Pa	rt VIII, line 7	b	4a			
b	Othe	r (Describe in Part XIII.)				4b			
с	Add I	lines 4a and 4b					4c		
5				al Form 990,	Part I, line 18.)		5		
Pa	rt XII	Supplemental In	formation						

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

PART X, LINE 2:

THE PARTNERSHIP APPLIES THE AMENDED ACCOUNTING PRINCIPLES RELATED TO

ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES AND HAS DETERMINED THAT THERE

IS NO MATERIAL IMPACT ON THE FINANCIAL STATEMENTS.

SC	HEDULE J Compensation Information	OMB No.	1545-00	47		
	rm 990) For certain Officers, Directors, Trustees, Key Employees, and Highest	2023				
•	Compensated Employees	ΖU	ZJ			
Dono	Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.	Open to	Publ	ic		
	Attach to Form 990. al Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.	Inspe	ction			
Nan	e of the organization Employer id			mber		
		31806	9			
Pa	rt 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					
	L Tax indemnification and gross-up payments L Health or social club dues or initiation fees					
	Discretionary spending account Personal services (such as maid, chauffeur, chef)					
Ŀ.	If any of the bayes on line to are checked, did the exception follow a written relieves reading remains an					
a	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimburgement or provision of all of the organization described above? If "No." complete Part III to explain	46				
0	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	1 b				
2		2				
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?					
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.					
	X Compensation committee					
	Independent compensation consultant					
	X Form 990 of other organizations X Approval by the board or 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		
b	Participate in or receive payment from a supplemental nonqualified retirement plan?			X		
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		X		
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.					
	Only section $E(1/c)/2$, $E(1/c)/2$, and $E(1/c)/20$, organizations must complete lines $E_{-}0$					
5	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation					
Ŭ	contingent on the revenues of:					
а	The organization?	5a		x		
	Any related organization?			X		
~	If "Yes" on line 5a or 5b, describe in Part III.					
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation					
	contingent on the net earnings of:					
а	The organization?	6a		Х		
	Any related organization?			Х		
	If "Yes" on line 6a or 6b, describe in Part III.					
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments					
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х		
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the					
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X		
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in					
	Regulations section 53.4958-6(c)?					
F	Constructly Deduction Act Nation, and the Instructions for Form 000		000			

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

Schedule J (Form 990) 2023

CALIFORNIA WATER EFFICIENCY PARTNERSHIP 68-0318069

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.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation				(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) TIA LEBHERZ	(i)	133,256.	0.	0.		9,551.	151,375.	0.
CO-EXEC. DIRECTOR-EXTERNAL AFFAIRS	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

Schedule J (Form 990) 2023

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Information to Form 990 or 990-EZ

CALIFORNIA WATER EFFICIENCY PARTNERSHIP

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Employer identification number 68 - 0318069

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THROUGHOUT CALIFORNIA.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

EDUCATION; AND BUILDING ON COLLABORATIVE APPROACHES AND PARTNERSHIPS.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

VALLEY WATER LANDSCAPE SUMMIT

- DEVELOPED AND CONDUCTED A LANDSCAPE SUMMIT IN THE VALLEY WATER

SERVICE AREA IN 2023.

- FEATURED TOPIC: REDUCE, REUSE, REPLENISH

- 61 IN PERSON ATTENDEES, 114 VIRTUAL ATTENDEES

PUBLICATIONS

- 3,100 ENGLISH PRACTICAL PLUMBING HANDBOOKS SOLD

- 1,000 SPANISH PRACTICAL PLUMBING HANDBOOKS SOLD

SMART REBATES

- 7 AGENCIES PARTICIPATING

- 366 REBATES APPROVED

- \$152,776 IN REBATES ISSUED.

FLUME DIRECT DISTRIBUTION PROGRAM

- 12 AGENCIES PARTICIPATING IN PROGRAM

- 3,696 DEVICES DISTRIBUTED

Name of the organization

CALIFORNIA WATER EFFICIENCY PARTNERSHIP

RACHIO DIRECT DISTRIBUTION PROGRAM

- 11 AGENCIES PARTICIPATING IN PROGRAM

- 3,049 DEVICES DISTRIBUTED

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

STANDARDS.

- 1 COMMENT LETTER ON DRAFT FRAMEWORK REGULATION

- 1 NEW GUIDE WAS RELEASED ON FIRE-RESILIENT LANDSCAPING

STRATEGIC PLANNING - A STRATEGIC PLANNING WORKSHOP WAS HELD IN AUGUST

2023 FOLLOWING A BOARD-DRIVEN PROCESS TO UPDATE THE CURRENT STRATEGIC

PLAN.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

MEMBER TRAINING & EVENTS

PEER TO PEER - MAY 31- JUNE 1 IN LONG BEACH AT HOTEL MAYA

- FEATURED TOPIC: CONTROVERSIAL STATEMENTS - NONFUNCTION TURF

- \$93,500 IN SPONSORSHIPS

- 220 ATTENDEES

- 14 SESSIONS HELD OVER TWO DAYS.

SPRING PLENARY- MARCH 9 AT THE PINNACLE ROOM IN EASTVALE

- HOSTED BY JURUPA COMMUNITY SERVICES DISTRICT

- FEATURED TOPIC: ASSESSING READINESS FOR FRAMEWORK COMPLIANCE

- 172 ATTENDEES

FALL PLENARY- AUGUST 31 AT THE SIERRA 2 CENTER IN SACRAMENTO

- HOSTED BY REGIONAL WATER AUTHORITY

Name of the organization

CALIFORNIA WATER EFFICIENCY PARTNERSHIP

Page 2

- FEATURED TOPIC: DWR & SWRCB REPORTING REQUIREMENTS FOR CONSERVATION

FRAMEWORK

- 100 ATTENDEES

FRAMEWORK 101 WEBINAR - SEPTEMBER 27 - ONLINE

- 307 ATTENDEES

WINTER PLENARY - DECEMBER 11 LOCATED AT SF STATE - SEVEN HILLS

CONFERENCE CENTER

- HOSTED BY SAN FRANCISCO PUBLIC UTILITIES COMMISSION

- FEATURED TOPIC: WHAT ARE CLIMATE READY LANDSCAPES?

- 80 ATTENDEES

EXPENSES \$ 195,845. INCLUDING GRANTS OF \$ 0. REVENUE \$ 34,850.

FORM 990, PART VI, SECTION B, LINE 11B:

THE 990 IS FIRST REVIEWED BY PARTNERSHIP STAFF AND THEN BY THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 12C:

STAFF ARE REQUIRED TO CONFIRM RECEIPT OF THE CONFLICT OF INTEREST POLICY CONTAINED IN THE EMPLOYEE HANDBOOK BY SIGNATURE. ADDITIONALLY, OFFICERS AND MEMBERS OF THE BOARD OF DIRECTORS ARE REQUIRED TO DISCLOSE ANY CONFLICT OF INTEREST AS THEY OCCUR AND CANNOT VOTE ON ANY THAT MAY BE RELATED TO THE CONFLICT OF INTEREST.

FORM 990, PART VI, SECTION B, LINE 15:

THE BOARD OF DIRECTORS EVALUATE THE COMPENSATION OF THE EXECUTIVE DIRECTOR

AT AN EXECUTIVE SESSION. NO OTHER OFFICERS RECEIVE COMPENSATION. THIS

Name of the organization

CALIFORNIA WATER EFFICIENCY PARTNERSHIP

Employer identification number 68 - 0318069

PROCESS WAS LAST UNDERTAKEN IN 2022.

THE EXECUTIVE DIRECTOR IS RESPONSIBLE FOR HIRING STAFF AND DETERMINING

THEIR COMPENSATION BASED ON THE TOTAL COMPENSATION AMOUNTS APPROVED BY THE

BOARD OF DIRECTORS. THIS PROCESS WAS LAST UNDERTAKEN IN 2023.

FORM 990, PART VI, SECTION C, LINE 19:

THE PARTNERSHIP MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY,

AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC ON ITS WEBSITE AND UPON

REQUEST.

FORM 990, PART XII, LINE 2C

NEITHER THE PROCESS FOR OVERSIGHT OF THE FINANCIAL STATEMENT

AUDIT/REVIEW NOR THE PROCESS FOR SELECTION OF AN INDEPENDENT ACCOUNTANT

HAS CHANGED FROM THE PRIOR YEAR.