# **Short Form**

OMB No. 1545-0047 2024

# **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.

**Open to Public** 

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990EZ for instructions and the latest information.					Inspection	
A F	or the	2024 calenda	ar year, or tax year beginning 01/01/2024 and ending	12	2/31/202	24
		oplicable:	C Name of organization			entification number
Address change COAST RANGE ASSOCIATION INC			COAST RANGE ASSOCIATION INC		9	3-1066629
1	lame cha	ange	Number and street (or P.O. box if mail is not delivered to street address) Room/su	uite E Tele	phone n	
	nitial retur	rn	PO Box 1001		54	1-231-6651
		n/terminated	City or town, state or province, country, and ZIP or foreign postal code	F Gro	up Exe	
	Amended	return on pending	Corvallis, OR 97339		nber	L
		ting Method:	Cash Accrual Other (specify):	H Check	if the	organization is <b>not</b>
	/ebsite	0	strange.org			ach Schedule B
			ck only one) — 🗹 501(c)(3) 🗌 501(c) ( ) (insert no.) 🗌 4947(a)(1) or 🗌 527	· · · ·		
			Corporation □ Trust □ Association □ Other:	,	,	
			7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or i	f total assets		
			500,000 or more, file Form 990 instead of Form 990-EZ			121,432
Pa	art I	Revenu	e, Expenses, and Changes in Net Assets or Fund Balances (see	the instru	ctions	
			the organization used Schedule O to respond to any question in this F			
	1		ns, gifts, grants, and similar amounts received		1	120,469
	2		ervice revenue including government fees and contracts		2	0
	3	Membersh	p dues and assessments		3	0
	4	Investment	income		4	963
	5a	Gross amo	unt from sale of assets other than inventory 5a	0		
	b	Less: cost	or other basis and sales expenses	0		
	с		s) from sale of assets other than inventory (subtract line 5b from line 5a)		5c	0
	6	Gaming an	d fundraising events:			
e	а		ome from gaming (attach Schedule G if greater than	0		
eni	b	Gross inco	me from fundraising events (not including \$ 0 of contri			
Revenue	-		aising events reported on line 1) (attach Schedule G if the			
			h gross income and contributions exceeds \$15,000) 6b	0		
	с	Less: direc	t expenses from gaming and fundraising events 6c	0		
	d	Net incom	e or (loss) from gaming and fundraising events (add lines 6a and 6b and	d subtract		
		line 6c) .			6d	0
	7a	Gross sale	s of inventory, less returns and allowances 7a	0		
	b		of goods sold	0		
	С		t or (loss) from sales of inventory (subtract line 7b from line 7a)		7c	0
	8		nue (describe in Schedule O)	<u></u>	8	0
	9		nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		9	121,432
	10		similar amounts paid (list in Schedule O)		10	29,996
	11		id to or for members		11	0
Expenses	12		her compensation, and employee benefits		12	86,625
en	13		al fees and other payments to independent contractors		13	45,984
Ц Хр	14 15		v, rent, utilities, and maintenance		14	1,401
ш	15 16		iblications, postage, and shipping		15	4,456
	16 17		nses (describe in Schedule O)	<u></u>	16 17	11,844
	18		nses. Add lines 10 through 16		17	
ets	19		or fund balances at beginning of year (from line 27, column (A)) (must a		10	-38,874
SSI			r figure reported on prior year's return)		19	125,513
Net Assets	20	-	ges in net assets or fund balances (explain in Schedule O)		20	0
ž	20 21		or fund balances at end of year. Combine lines 18 through 20		20	66,639
			ion Act Notice, see the separate instructions. Cat. No. 1064		· - •	Form <b>990-EZ</b> (2024)

Form S	990-EZ (2024)					Page <b>2</b>
Par	t II Balance Sheets (see the instructions f	or Part II)				1
	Check if the organization used Schedule	O to respond to an	ny question in this l	Part II....		🗹
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments		[	136,214	22	64,122
23	Land and buildings		[	0	23	0
24	Other assets (describe in Schedule O)		[	0	24	6,487
25	Total assets			136,214	25	70,609
26	Total liabilities (describe in Schedule O)		[	10,701	26	3,970
27	Net assets or fund balances (line 27 of column	(B) must agree with	n line 21)	125,513	27	66,639
Part	0					
	Check if the organization used Schedule	O to respond to an	ny question in this l	Part III  . 🗌	(5	Expenses
What	is the organization's primary exempt purpose?	See Schedule O, Sta	itement 1		· ·	uired for section c)(3) and 501(c)(4)
Desc	ribe the organization's program service accomplis	shments for each of	f its three largest p	rogram services.	•	nizations; optional for
	easured by expenses. In a clear and concise m				othe	rs.)
perso	ons benefited, and other relevant information for ea	ch program title.				
28	Conservation advocacy for marine biodiversity and r	resilient communities	. We conduct public	education		
	events, support ocean conservation and play a key r	ole in the Oregon Ma	rine Reserve Partner	ship (OMRP).		
	Coast Range Association staff play a leading role in	the OMRP Commuine	cations Program.			
	(Grants \$ 0) If this amount	includes foreign gra	ints, check here .	🗌	28a	32,156
29	Private Forests & Climate Education: Our program for	ocus addresses the p	olitical economy of i	ndustrial		
	forests and the use of financially driven forest mana	gement. Significant r	esearch occurred int	o the back-end		
	financial system of forest owning Real Estate Investi	ment Trusts.				
	(Grants \$ 0) If this amount	includes foreign gra	ints, check here .	🗌	29a	13,847
30	Public Lands Management: We monitor, support and	provide input into th	ne USDA Forest Servi	ice		
	management of the Siuslaw National Forest. We mor					
	forest management in the Coast Range region.					
	(Grants \$ 0) If this amount	includes foreign gra	ints, check here .		30a	51,381
31	Other program services (describe in Schedule O)	See Schedule O, Sta	itement 2			
	(Grants \$ 28,296) If this amount				31a	39,058
32	Total program service expenses (add lines 28a t	hrough 31a)			32	136,442
Part	List of Officers, Directors, Trustees, and Key	r Employees (list each	n one even if not comp	pensated-see the ir	nstruc	tions for Part IV)
	Check if the organization used Schedule	O to respond to an	ny question in this l	Part IV		🗆
			(c) Reportable	(d) Health benefits.		
	(a) Name and title	(b) Average hours per week	compensation (Forms W-2/1099-MISC/	contributions to employ		
	(a) rearrie and the	devoted to position	1099-NEC)	benefit plans, and deferred compensation		ther compensation
			(if not paid, enter -0-)			
Yoko	Silk	3.00	0		0	0
Boar	d President					
Joan	Stephens	2.00	0		0	0
Boar	d member					
Alex	Lackey	3.00	0		0	0
Treas	surer & Board Member					
Tom	Petrusich	3.00	0		0	0
Vice	President & Board Member					
Chuc	k Willer	40.00	17,490	3,42	6	0
Exec	utive Director & Officer					
Lacy	Todd	2.00	0		0	0
Boar	d Member					
		-				
					_	

Part	90-EZ (2024)		P	age 🖁
	V Other Information (Note the Schedule A and personal benefit contract statement requirements instructions for Part V.) Check if the organization used Schedule O to respond to any question in this			
			Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		V
4	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the			
_	change on Schedule O. See instructions	34		~
5a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		V
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		
С	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		~
6	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		v
7a	Enter amount of political expenditures, direct or indirect, as described in the instructions <b>37a 0</b>			V
b		37b		~
Ba	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were			
b	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? . If "Yes," complete Schedule L, Part II, and enter the total amount involved	38a		~
9	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on line 9			
a b	Gross receipts, included on line 9, for public use of club facilities	-		
)a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:	-		
	section 4911: 0; section 4912: 0; section 4955: 0			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	4.01		
_		40b		~
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912,			
	4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter			
	transaction? If "Yes," complete Form 8886-T	40e		V
I	List the states with which a copy of this return is filed: OR			
a	The organization's books are in care of: Chuck Willer Telephone no.	541-23	1-665	
	Located at:       1303 NW 13th, Corvallis, OR 97330       ZIP + 4         At any time during the calendar year, did the organization have an interest in or a signature or other authority over	973	330	
b			Yes	
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		V
	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and			
	Financial Accounts (FBAR). At any time during the calendar year, did the organization maintain an office outside the United States?	42c		V
с	If "Yes," enter the name of the foreign country:			_
с				
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the tax year			
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 – Check here		Yes	N
}	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 – Check here		Yes	
3	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 – Check here	 44a	Yes	
a b	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 – Check here and enter the amount of tax-exempt interest received or accrued during the tax year	44b	Yes	
3 la	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 – Check here	44b 44c	Yes	
a b c d	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 – Check here	44b 44c 44d	Yes	
la b c d	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 – Check here	44b 44c	Yes	
3 la b c	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 – Check here	44b 44c 44d	Yes	No V V

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			Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition			
	to candidates for public office? If "Yes," complete Schedule C, Part I	46		~

Part VI	Section 501(c)(3) Organizations Only
	All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines
	50 and 51

	Check if the organization used Schedule O to respond to any question in this Part VI			
			Yes	No
47	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	47		~
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48		~
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a		~
b	If "Yes," was the related organization a section 527 organization?	49b		
E۵	Complete this table for the organization's five highest compensated employees (other then officers, directors, t	ruoto		dkov

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	<b>(b)</b> Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/ 1099-NEC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	
None				

f Total number of other employees paid over \$100,000 . . . .

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
None		
d Total number of other independent contractors each receiving	over \$100,000	

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a

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.

Sign Here	Signature of officer Chuck Willer, Executive Director			Date			
	Type or print name and title						
Paid Preparer	Print/Type preparer's name	Preparer's signature	Date		Check if self-employed	PTIN	
Use Only	Firm's name			Firm's EIN			
	Firm's address			Phone no.			
May the IRS	Any the IRS discuss this return with the preparer shown above? See instructions						

SCHEDULE A (Form 990)

# **Public Charity Status and Public Support**

OMB No. 1545-0047

Department of the Treasu	n
Internal Revenue Service	

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

20 <b>24</b>	
pen to Public Inspection	

Name of the organization

Employer identification number

COAST RANGE ASSOCIATION INC	93-1066629

Part IReason for Public Charity Status. (All organizations must complete this part.) See instructions.

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

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	-		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part IISupport 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<br/>Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Secti	on A. Public Support			· •	1	,	
Calen	dar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	<b>(d)</b> 2023	(e) 2024	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	55,963	63,341	71,156	175,851	120,469	486,780
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
4	Total. Add lines 1 through 3	55,963	63,341	71,156	175,851	120,469	486,780
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)						
6	Public support. Subtract line 5 from line 4						486,780
	on B. Total Support	(-) 0000	(1-) 0001	(-) 0000	(-1) 0000	(-) 000 (	
Calen 7	dar year (or fiscal year beginning in) Amounts from line 4	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024 120,469	(f) Total
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	55,963	63,341	71,156	175,851		486,780
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	82	68	<u>1,816</u> 0	963	3,124
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0	0	0	0	0	0
11	Total support. Add lines 7 through 10						489,904
12	Gross receipts from related activities, etc					12	
13 Secti	First 5 years. If the Form 990 is for the organization, check this box and stop he on C. Computation of Public Support	re			-	ear as a sectio	
14	Public support percentage for 2024 (line (			11, column (f))		14	99.36 %
15	Public support percentage from 2023 Sch					15	99.44 %
16a	<b>33</b> <sup>1</sup> / <sub>3</sub> % <b>support test</b> — <b>2024.</b> If the organization qua						_
b	33 <sup>1</sup> / <sub>3</sub> % support test—2023. If the organization this box and stop here. The organization	zation did not	check a box o	n line 13 or 16	a, and line 15	is 331/3% or m	ore, check
17a							
b							
18	<b>Private foundation.</b> If the organization instructions	did not check	a box on line	13, 16a, 16b	, 17a, or 17b,	check this bo	x and see
						Schedule A	A (Form 990) 2024

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

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

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	<b>(e)</b> 2024	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
Secti	on B. Total Support			•			
Calen	dar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	<b>(e)</b> 2024	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the	e organization	's first, second	l, third, fourth,	, or fifth tax ye	ar as a seo	ction 501(c)(3)
	organization, check this box and stop he						[
Secti	on C. Computation of Public Suppor	-					
15	Public support percentage for 2024 (line a					15	%
16	Public support percentage from 2023 Scl					16	%
Secti	on D. Computation of Investment In		-				
17	Investment income percentage for 2024 (			-		17	%
18	Investment income percentage from 2023					18	%
19a	331/3% support tests-2024. If the organ						
	17 is not more than $33^{1/3}$ %, check this box	-	-	-		-	
b	331/3% support tests-2023. If the organiz						
	line 18 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this	-	-	-			
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b,	check this box	and see ins	tructions .

Schedule A (Form 990) 2024

## 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, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990).*
- 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

### Section B. Type I Supporting Organizations

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

### Section C. Type II Supporting Organizations

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).

#### Section D. All Type III Supporting Organizations

Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 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.

## Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1
- а The organization satisfied the Activities Test. Complete **line 2** below.
- The organization is the parent of each of its supported organizations. *Complete line 3 below.* b
- С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of а 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.
- 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.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Yes No

1

2

1

3

2a

2b

3a

3b

Yes No

Yes No

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			ions 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	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
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	allv i	ntegrated Type III suppo	rting organization

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

Schedule A (Form 990) 2024

Schedu	le A (Form 990) 2024			Page <b>7</b>
Part	V Type III Non-Functionally Integrated 509(a)(3	B) Supporting Organi	zations (continued)	
Sect	on D-Distributions			Current Year
1	Amounts paid to supported organizations to accomplish e		1	
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	orted	
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations 3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required-	–provide details in <b>Part</b>	<i>VI</i> ) 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 whic (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	sponsive 8	
9	Distributable amount for 2024 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	)
Sect	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required — <i>explain in Part VI</i> ). See instructions.			
3	Excess distributions carryover, if any, to 2024			
а	From 2019			
b	From 2020			
С	From 2021			
d	From 2022			
е	From 2023			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2024 distributable amount			
i	Carryover from 2019 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2024 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2024 distributable amount			
C	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in <b>Part VI</b></i> . See instructions.			
6	Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7	<b>Excess distributions carryover to 2025.</b> Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2020			
b	Excess from 2021			
С	Excess from 2022			
d	Excess from 2023			
е	Excess from 2024			

Schedule A (Form 990) 2024

Part VISupplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)


SCHEDULE O	Supplemental Information to Form 990 or 990-EZ		
(Form 990) (Rev. December 2024)	Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.	ו	OMB No. 1545-0047
Department of the Treasury	Attach to Form 990 or Form 990-EZ.		Open to Public
Internal Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information		Inspection
Name of the organization		Employer iden	tification number
COAST RANGE ASSO	CIATION INC	9	3-1066629
Form 990-EZ, Part I, Li	ne 10 - Part I Line 10 - North Coast Communities for Watershed Protection \$700, La	ne County Co	nmunity Rights
\$500, Oregon Wild \$50	0 Central Coast Food Web \$28,296 was the balance of a fiscally sponsored grant. T	he Food Web	was granted their
501c3 status.			
	ne 16 - Form 990EZ Part I Line 16 Books, information and data \$963 Board meeting		
	tings \$248 Liability Insurance \$700 Business registration fees \$273 Bank charges &	tees \$769 Off	ce supplies and
Software Services \$54.	29 Travel \$586 Advertising \$966 Car Expenses \$688.		
Form 990-F7, Part II, I	ine 24 - Receivable from Network for Good of Dec 2024 online donations.		
Form 990-EZ, Part II, L	ine 26 - Form 990EZ, Part II, Line 24 - Accounts Payable: Contractor Service \$2736,	Payroll Tax pa	yable \$1234.
			·

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Form: Form 990-EZ (2024)

Page: 2

Part III

EIN: 93-1066629

COAST RANGE ASSOCIATION INC

#### **Primary Exempt Purpose**

#### Primary Exempt Purpose

Conservation of forests and rivers and building sustainable communities in the Coast Range region of Oregon.

Schedule O, Statement 2	COAST R	ANGE ASSO	CIATION INC
Form: Form 990-EZ (2024)		EIN	1: 93-1066629
Page: 2		Pa	art III, Line 31
Other Program Service Accomplishments			
Description	Grants And Allocations	Includes Foreign Grants	Program Service Expenses
Sponsorship of the Central Coast Food Web grants pending approval of the organization's 501c3 status. The organization was granted 501c3 status in 2024 and we transferred the balance of remaining grant money to the Food Web (\$28296).	28,296		39,058
Total:			39,058