# **990**

# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

2022

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

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

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

Open to Public Inspection

A	For the	2022 calend	dar year, or tax year begi	nning ,	2022, and end	ding			, 20
В	Check if	applicable:	C Name of organization The	e Oakland Institute				D Empl	oyer identification number
	Address	change	Doing business as					42-1	626352
	Name ch	nange	Number and street (or P.O	. box if mail is not delivered to street ad	dress)	Room/s	suite	E Teleph	none number
	Initial ret	urn	PO Box 18978					(510	)474-5251
	Final retu	urn/terminated	City or town, state or prov	ince, country, and ZIP or foreign postal	code				
	Amende	d return	Oakland, CA 94	1619				<b>G</b> Gross	receipts \$ 923,215.
	Applicat	ion pending	F Name and address of princ	ipal officer:		H	H(a) Is this a gro	oup return fo	or subordinates?  Yes  No
			Anuradha Mittal,	1506 40th Avenue, Oakl	and, CA 94	4601 H	<b>H(b)</b> Are all su	ubordinat	es included?  Yes No
<u> </u>	Tax-exe	mpt status:	X 501(c)(3) 501(c	) ( ) (insert no.) 4947(	a)(1) or 🔲 527	7	If "No," a	ttach a li	st. See instructions.
J	Website	www.o	aklandinstitute	.org		H	<b>-I(c)</b> Group ex	cemption	number
K	Form of	organization: 🛚	Corporation Trust A	Association Other	L Year of for	mation:	2010	M State	of legal domicile: CA
Р	art I	Summa	ry						
	1	Briefly des	cribe the organization's	mission or most significant ac	tivities: The	0aklan	d Institu	ite (OI	) is an independent
S		policy	think tank work	ing to increase publi	c partic	ipati	on and	fair	
nan		debate	on critical soci	ial, economic, and en	vironment	tal i	ssues.		
Activities & Governance	2	Check this	box if the organizat	tion discontinued its operations	or disposed	d of mo	re than 25	% of it	s net assets.
Ĝ	3	Number of	voting members of the	governing body (Part VI, line 1	a)			3	7
∞ ∞	4		-	embers of the governing body (				4	6
ij	5	Total numb	per of individuals emplo	yed in calendar year 2022 (Par	t V, line 2a)			5	5
ξį	6			ate if necessary)				6	3
Ă	7a			from Part VIII, column (C), line				7a	0.
	b	Net unrelat	ted business taxable inc	come from Form 990-T, Part I,	line 11			7b	0.
							Prior Year		Current Year
Revenue	8		ons and grants (Part VIII	689,	642.	914,808.			
	9 Program service revenue (Part VIII, line 2g)							248.	4,268.
Şe.	10		t income (Part VIII, colu		2,	4,139.			
_	11			A), lines 5, 6d, 8c, 9c, 10c, and					
	12	_		11 (must equal Part VIII, colum			692,	885.	923,215.
	13			Part IX, column (A), lines 1-3) .			2,	630.	
		<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)							
es	15			oyee benefits (Part IX, column (A			323,278		344,111.
Expenses	16a			t IX, column (A), line 11e)					
ă	b		aising expenses (Part I)	X, column (D), line 25)	35,303.				
ш	17	•	•	**			169,		249,961.
	18	-	·	must equal Part IX, column (A),			495,		594,072.
- "	19	Revenue le	ess expenses. Subtract	line 18 from line 12			197,		329,143.
Net Assets or Fund Balances			(D 1)(    10)			Begin	nning of Curre		End of Year
Sse	20		ts (Part X, line 16) .				2,665,		2,995,612.
let A	21		ties (Part X, line 26) .			-		699.	11,073.
			re Block	ract line 21 from line 20	<u> </u>		2,655,	396.	2,984,539.
	art II								
				ed this return, including accompanying or than officer) is based on all information					my knowledge and belief, it is
				· · · · · · · · · · · · · · · · · · ·					
Sig	an	Signature of	officer				L Date		
	ere	"		ogutiro Divogtor			Dato		
	<i>.</i> 1 C		radiia Millai, Ex	ecutive Director					
		1 7	preparer's name	Preparer's signature		Date		05.1	☐ if PTIN
Pa		Pubian		Rubian Moss			8/2023	Check self-emp	<b>□</b> "
	epare	r Firm's non		Kaptan moss		1 10/0	Firm's		94-3359608
Us	se Onl	Firm's add		Boulevard Suite 200, Walr	nut Crook	C7 01			<u>94-3359608</u> 25)482-2626
Ma	ıv the IF			parer shown above? See instru		CA 34	יייייייייייייייייייייייייייייייייייייי	, no. (9	. X Yes No

Part	Statement of Program Service According Check if Schedule O contains a response	omplishments	his Part III	
1	Briefly describe the organization's mission: The Oakland Institute (OI) is	an independent		
	policy think tank working to i debate on critical social, eco			
-				
2	Did the organization undertake any significar prior Form 990 or 990-EZ?			☐ Yes ⊠ No
3	Did the organization cease conducting, or services?	make significant changes	in how it conducts, any program	☐ Yes ⊠ No
_	If "Yes," describe these changes on Schedul			
4	Describe the organization's program service expenses. Section 501(c)(3) and 501(c)(4) or the total expenses, and revenue, if any, for each organization is a service expense.	ganizations are required to	report the amount of grants and allo	
4a	(Code: ) (Expenses \$ 528,72	24. including grants of \$	0 . ) (Revenue \$	4,268.)
	See attached note for 2022 pro			
4b	(Code: ) (Expenses \$	including grants of \$	) (Revenue \$	)
	, (Color, (Color	································		/ 
4c	(Code: ) (Expenses \$	including grants of \$	) (Revenue \$	)
		·		
4d	Other program services (Describe on Schedu	ıle ().)		
	(Expenses \$ including grants		enue \$	
4e	Total program service expenses	528,724.	,	

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

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

Part I	V Checklist of Required Schedules (continued)		-	
			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		×
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		×
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	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		
	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		×
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		×
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		×
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		×
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	×	
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		×
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		×
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		×
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>			
24	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	30		×
31 32	Did the organization inquidate, terminate, or dissolve and cease operations? If res, complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	31		×
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If</i> "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 Part V, line 1	34		×
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		×
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		×
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	×	
Part	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	10	_	

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	×	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		×
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		×
b	If "Yes," enter the name of the foreign country			
E.o.	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	50		×
5a b	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5a 5b		×
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		×
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		×
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		×
d e	If "Yes," indicate the number of Forms 8282 filed during the year	7e		×
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		×
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12			
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
~	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		×
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O .	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		
16	If "Yes," see the instructions and file Form 4720, Schedule N.	40		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. Check if Schedule O contains a response or note to any line in this Part VI	See in	struc	tions.
Secti	on A. Governing Body and Management			
1a	Enter the number of voting members of the governing body at the end of the tax year 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.		Yes	No
b 2	Enter the number of voting members included on line 1a, above, who are independent . Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		×
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		×
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		×
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		×
6 7a	Did the organization have members or stockholders?	6		<u>×</u>
74	one or more members of the governing body?	7a		×
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		×
а	The governing body?	8a	×	
b	Each committee with authority to act on behalf of the governing body?	8b	×	
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? <i>If "Yes," provide the names and addresses on Schedule O</i>	9		×
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.)	
			Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a		<u>×</u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	×	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	×	
b b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	12b	×	
13	Did the organization have a written whistleblower policy?	13	×	
14 15	Did the organization have a written document retention and destruction policy?	14	×	
.0	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	×	
b	Other officers or key employees of the organization	15b	×	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 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			
04	organization's exempt status with respect to such arrangements?	16b		
<b>Secti</b>	ion C. Disclosure  List the states with which a copy of this Form 990 is required to be filed CA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	T (sec	tion 5	501(c)
19	☐ Own website ☐ Another's website ☒ Upon request ☐ Other <i>(explain on Schedule O)</i> Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of and financial statements available to the public during the tax year.	f inter	est p	olicy,
20	State the name, address, and telephone number of the person who possesses the organization's books and re The Oakland Institute, 1506 40th Avenue, Oakland, CA 94601 (510)474-5251	cords.		

Form 990 (2022) Page **7** 

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

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

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

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

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

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

- Check the box in notine, the organization her	arry rolate	u 0.9	۵ <u>ح</u>		0	OPC	,,,,,,	acou arry current	omoor, an ootor,	or tractice.
(A) Name and title	(B)  Average hours per week (list any hours for related organizations below dotted line)	(do n box, office or direct	ot ch unles	Pos neck ss pe	c) sition more		one n an	(D)  Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E)  Reportable compensation from related	(F) Estimated amount of other compensation from the organization and related organizations
(1) Atul Sharan	1.00					0				
Director		×						0.	0.	0.
(2) Jeff Furman Director	1.00	×						0.	0.	0.
(3) Elsadig Elsheikh Director	1.00	×						0.	0.	0.
(4) Sonja Swift Director	1.00	×						0.	0.	0.
(5) Carol Johnson Director	1.00	×						0.	0.	0.
(6) Lewis Gordon Director	1.00	×						0.	0.	0.
(7) Anuradha Mittal Executive Director	40.00	×		×				100,000.	0.	0.
(8)										
(9)										
(10)										
<u>(11)</u>										
(12)										
(13)										
(14)										

Part	VII Section A. Officers, Directors, 7	rustees,	Key I	Em	plo	yee	s, an	d F	lighest Compe	nsated E	mplo	yees (cor	ntinued)	
					•	C)								
	(A)	(B)	(do n	ot ch		ition	e than o	ne	(D)	(E)		(F)		
	Name and title	Average hours	box,	unles	ss pe	rson	is both	n an	Reportable compensation	Reportati compensa		Estimated amount of other		
		per week			_	_	or/trust	<u> </u>	from the	from rela	ted	compen		
		(list any hours for	ndiv or dii	nstit	Officer	(ey	digh	Former	organization (W-2/ 1099-MISC/	organizations 1099-MIS		from organizati		
		related	idua ecto	ltior	욕	mp	est c	₫	1099-NEC)	1099-NE		related orga		
		organizations below	Individual trustee or director	ାଥ tr		Key employee	omp							
		dotted line)	stee	Institutional trustee		ω .	Highest compensated employee							
				ď			ated							
(15)														
(16)														
(4.7)														
(17)			1											
(18)														
X														
(19)														
(20)														
(04)														
(21)			1											
(22)														
\ <del></del> /			1											
(23)														
(24)														
(O.T.)														
(25)			-											
1b	Subtotal								100,000.		0.		0.	
c	Total from continuation sheets to Part	VII, Sectio	n A						1007000:					
d	Total (add lines 1b and 1c)								100,000.		0.		0.	
2	Total number of individuals (including but		d to th	ose	e list	ed	above	e) w	ho received mor	e than \$10	0,000	of		
	reportable compensation from the organi	zation												
•	Did the consciention list our former	- <b>((</b> )		4								Ye	es No	
3	Did the organization list any <b>former</b> of employee on line 1a? <i>If "Yes," complete</i> of the complete of the com								oyee, or nignes 	-		3		
4	For any individual listed on line 1a, is the												×	
	organization and related organizations													
	individual											4	×	
5	Did any person listed on line 1a receive of									tion or indi	vidual			
<u> </u>	for services rendered to the organization	? If "Yes," c	compl	ete	Scr	nedi	ule J 1	or s	such person .		•	5	×_	
Secti 1	on B. Independent Contractors  Complete this table for your five high	oct comp	oncot	-d	inde	2001	ndont		entractors that r	roccived m	oro	than \$100	1 000 of	
•	compensation from the organization. Rep													
	(A)							, , -	(B)		3	(C)		
	Name and business add	ress							Description of serv	vices		Compensatio	n	
												_		
2	Total number of independent contractor	rs (includir	na hi	ıt n	O†	limit	ed to	 ) th	nose listed abov	e) who				
_	received more than \$100,000 of compens						.ou it	, (11	iooc iiotea abuv	C) WIIO				

Part VIII	Statement of Revenue
	Check if Schedule O contains a response

ı aı ı	•	Check if Schedule O contains a resp	oonse or note to an	ny line in this Pa	art VIII		🗆
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
k S	1a	Federated campaigns	1a				
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues	1b				
يَ ق	С	Fundraising events	1c				
ifts,	d	_	1d				
ָה פֿוּ	е	3 (	1e 102,871.				
Sir	f	All other contributions, gifts, grants,					
utic Jer			<b>1f</b> 811,937.				
ē₽	g	Noncash contributions included in					
on In d	_	·	1g  \$				
O a	h	Total. Add lines 1a-1f		914,808.			
Φ		Post and the second	Business Code	1 0 5 0	1 050		
Program Service Revenue	2a	Program income	900099	4,268.	4,268.	0.	0.
gram Ser Revenue	b						
m (	C						
gra Re	d						
ř.	e f	All other program service revenue .					
<u>п</u>	g	Total. Add lines 2a–2f		4,268.			
	3	Investment income (including divide	nds. interest. and	1,200.			
		other similar amounts)		4,139.	0.	0.	4,139.
	4	Income from investment of tax-exemp	t bond proceeds				
	5	Royalties	· ·				
		(i) Real	(ii) Personal				
	6a	Gross rents 6a					
	b	Less: rental expenses 6b					
	С	Rental income or (loss) 6c					
	d	Net rental income or (loss)					
	7a	Gross amount from (i) Securities	ii) Other				
		sales of assets					
	_	other than inventory 7a					
ne	b	Less: cost or other basis					
evenue		and sales expenses . 7b					
Re		Gain or (loss) 7c					
er		Net gain or (loss)					
Other	8a	Gross income from fundraising					
Ū		events (not including \$ of contributions reported on line					
		4 \ 0 \ D \ 1 \ 1 \ 1 \ 1	Ba				
	h	· ·	Bb				
		Net income or (loss) from fundraising					
		Gross income from gaming					
			9a				
	b	<u>-</u>	9b				
		Net income or (loss) from gaming acti	vities				
		Gross sales of inventory, less					
		returns and allowances 1	0a				
	b	Less: cost of goods sold 1	0b				
	С	Net income or (loss) from sales of inve	entory				
SI			Business Code				
eo re	11a						
an en	b						
scellaneo Revenue	C	***************************************					
Miscellaneous Revenue	d	All other revenue					
_		Total Add lines 11a-11d		002 015	4 000	^	4 120
	12	<b>Total revenue.</b> See instructions .		923,215.	4,268.	0.	4,139.

25

**Total functional expenses.** Add lines 1 through 24e

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here 
if

following SOP 98-2 (ASC 958-720)

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (**D**) Fundraising expenses (B) Program service expenses Do not include amounts reported on lines 6b. 7b. (A) Total expenses Management and general expenses 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 2 individuals. See Part IV, line 22 . . . . Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members . . . . Compensation of current officers, directors, trustees, and key employees . . . . . 100,000. 80,000. 10,000. 10,000. 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . Other salaries and wages 10,592. 182,334. 171,742. 0. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 3,490. Other employee benefits . . . . . . 9 39,618. 33,205. 2,923. 10 Payroll taxes . . . . . . . . . . . . 22,159. 18,549. 1,666. 1,944. Fees for services (nonemployees): 11 Management . . . . . . . 0. Legal . . . . . . . . . . . . . . . . 9,500. 9,500 0. Accounting . . . . . . . . . . . . 7,023. 0. 7,023. 0. Lobbying . . . . . . . . . Professional fundraising services. See Part IV, line 17 Investment management fees . . . . . Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) 71,858. 442. 875. 73,175. 5,299. 12 Advertising and promotion . . . . . 4,815. 10. 474. 13 17,631. 13,920. 1,651. 2,060. Office expenses . . . . . . . . 14 Information technology . . . . . . 15 Occupancy . . . . . . . . . . . . 74,231. 65,665. 3,937. 4,629. 16 22,288. 20,994. 1,147. 147. 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 9,068. 7,391. 945. 732. 20 21 Payments to affiliates . . . . . . . 25,395. 25,364. 10. 21. 22 Depreciation, depletion, and amortization . 23 6,351. 5,721. 291. 339. Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) а C d All other expenses

594,072.

30,045.

35,303.

528,724.

2 Savings and temporary cash investments	Р	art X				
1 Cash—non-interest-bearing   200,926, 1 552,136, 2 Savings and temporary cash investments   1,657,963, 2 1,659,345. 3     2 Savings and demporary cash investments   1,657,963, 2 1,659,345. 3     3 Pledges and grants receivable, net   4   4   4     4   4   4   4   4   4			Check if Schedule O contains a response or note to any line in this Pa	(A)		(B)
3   Pledges and grants receivable, net   3   4   4   5   5   5   5   5   5   5   5		1	<b>_</b>		1	552,136.
Section   Comparison   Compa		3	Pledges and grants receivable, net	1,657,963.	3	1,659,345.
## Under section 4958(6)(1), and persons described in section 4958(c)(3)(8)  7 Notes and loans receivable, net  8 Inventories for sale or use  9 Prepaid expenses and deferred charges  10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D  10 Less: accumulated depreciation  11 Investments—publicly traded securities  12 Investments—publicly traded securities  13 Investments—publicly traded securities  15 Other assets. See Part IV, line 11  16 Total assets. Add lines 1 through 15 (must equal line 33)  17 Accounts payable and accrued expenses  18 Grants payable and accrued expenses  20 Tax-exempt bond liabilities  21 Escrow or custodial account liability. Complete Part IV of Schedule D  22 Loans and other 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  22 Secured mortgages and notes payable to unrelated third parties  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable to unrelated third parties  25 Other liabilities, including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D  26 Total liabilities, Add lines 17 through 25  27 Net assets with donor restrictions  28 Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  27 Net assets with donor restrictions  29 Capital stock or trust principal, or current funds  30 Paid-in or capital surplus, or land, building, or equipment fund  31 Retained earnings, endowment, accumulated income, or other funds  31 Total liabilities and net assets/fund balances  20 Capital stock or trust principal, or current funds  31 Total liabilities and net assets/fund balances  20 Capital stock or trust principal, or current funds  31 Total liabilities and net assets/fund balances  21 Capital stock or funds balances  22 Capital stock or trust princi			Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
8		6			6	
10a	ets		· · · · · · · · · · · · · · · · · · ·			
10a	Ass		h-	E 42E		6 175
b Less: accumulated depreciation   10b   103,787.   800,781.   10c   777,956.		I .	Land, buildings, and equipment: cost or other	5,425.		0,173.
12   Investments – other securities. See Part IV, line 11   13   Investments – program-related. See Part IV, line 11   13   Intangible assets   14   15   Other assets. See Part IV, line 11   15   15   15   16   Total assets. Add lines 1 through 15 (must equal line 33)   2,665,095   16   2,995,612   17   Accounts payable and accrued expenses   9,699   17   11,073   18   Grants payable   18   19   Deferred revenue   19   20   Tax-exempt bond liabilities   19   Deferred revenue   20   Tax-exempt bond liabilities   20   Tax-exempt bond liabilities   20   Tax-exempt bond liability   Complete Part IV of Schedule D   21   Escrow or custodial account liability   Complete Part IV of Schedule D   21   22   Loans and other 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   22   23   24   Unsecured notes and loans payable to unrelated third parties   24   Unsecured notes and loans payable to unrelated third parties   24   25   Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D   25   25   26   Total liabilities Add lines 17 through 25   9,699   26   11,073   27   2,984,539   28   Net assets with donor restrictions   2,655,396   27   2,984,539   28   Net assets with donor restrictions   2,655,396   27   2,984,539   28   29   20   20   20   20   20   20   20		b	·	800,781.	10c	777,956.
13   Investments—program-related. See Part IV, line 11   14   Intangible assets   14   15   15   15   15   15   16   Total assets. See Part IV, line 11   15   15   15   16   Total assets. Add lines 1 through 15 (must equal line 33)   2,665,095   16   2,995,612   17   Accounts payable and accrued expenses   9,699   17   11,073   18   Grants payable   18   19   Deferred revenue   19   19   18   19   19   19   19   19		11			_	
14					-	
15 Other assets. See Part IV, line 11   16 Total assets. Add lines 1 through 15 (must equal line 33)   2,665,095   16   2,995,612   17   Accounts payable and accrued expenses   9,699   17   11,073   18   18   19   19   19   19   19   19		_	. •			
16   Total assets. Add lines 1 through 15 (must equal line 33)   2,665,095   16   2,995,612.     17   Accounts payable and accrued expenses   9,699   17   11,073.     18   Grants payable   18   19   19   19     20   Tax-exempt bond liabilities   20   21   22   22   22   23   24   24     21   Escrow or custodial account liability. Complete Part IV of Schedule D   21   22   23   24   24     22   Loans and other 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   22   23   24   24     23   Secured mortgages and notes payable to unrelated third parties   23   24   24     24   Unsecured notes and loans payable to unrelated third parties   24   25   25     25   Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D   25   25     26   Total liabilities. Add lines 17 through 25   9,699   26   11,073   25     27   Net assets without donor restrictions   2,655,396   27   2,984,539   27   2,984,539   28   2,984,539   29   29   29   29   20   20   20   2						
17		_	<b>-</b>	2.665.095	-	2.995.612
18   Grants payable   18   19   Deferred revenue   19   20   Tax-exempt bond liabilities   20   Escrow or custodial account liability. Complete Part IV of Schedule D   21   Escrow or custodial account liability. Complete Part IV of Schedule D   21   Escrow or custodial account liability. Complete Part IV of Schedule D   21   Escrow or custodial account liability. Complete Part IV of Schedule D   22   Escrow or custodial account liability. Complete Part IV of Schedule D   22   Escrow or custodial account liability. Complete Part IV of Schedule D   22   Escrow or custodial account liability. Complete Part IV of Schedule D   22   Escrow or custodial account liability. Complete Part IV of Schedule D   22   Escrow or custodial account liability. Complete Part IV of Schedule D   23   Escrow or custodial account liability. Complete Part IV of Schedule D   24   Escrow or custodial account liability. Complete Part IV of Schedule D   25   Escrow or custodial account liability. Complete Part IV of Schedule D   25   Escrow or custodial account liability. Complete Part IV of Schedule D   25   Escrow or custodial account liability. Complete Part IV of Schedule D   22   Escrow or custodial account liability. Complete Part IV of Schedule D   22   Escrow or custodial account liability. Complete Part IV of Schedule D   22   Escrow or custodial account liability. Complete Part IV of Schedule D   22   Escrow or custodial account liability. Complete Part IV of Schedule D   22   Escrow or custodial account liability. Complete Part IV of Schedule D   22   Escrow or custodial account liabilities and net assets/fund balances   22   Escrow or custodial account liability. Complete Part IV of Schedule D   22   Escrow or custodial account liability. Complete Part IV of Schedule D   22   Escrow or custodial account liability. Complete Part IV of Schedule D   23   Escrow or custodial account liability. Complete Part IV of Schedule D   25   Escrow or custodial account liability. Complete Part IV of Schedule D   25   Escrow or custodial acco					-	
19   Deferred revenue   19   20   Tax-exempt bond liabilities   20   21   22   21   22   23   24   25   24   25   25   26   27   27   28   28   27   27   28   28		18		•	18	•
Escrow or custodial account liability. Complete Part IV of Schedule D .   Loans and other 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 .   22		19			19	
Loans and other 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		20	· ·		20	
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons					21	
24 Unsecured notes and loans payable to unrelated third parties .  25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	ilities	22	trustee, key employee, creator or founder, substantial contributor, or 35%		-	
24 Unsecured notes and loans payable to unrelated third parties .  25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	<u>ia</u>	22	· · · · · · · · · · · · · · · · · · ·		_	
Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	_	_	· · · · · · · · · · · · · · · · · · ·		_	
Total liabilities. Add lines 17 through 25			Other liabilities (including federal income tax, payables to related third			
Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  Net assets without donor restrictions	Liabilitie				25	
and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions		26		9,699.	26	11,073.
100 Total habilities and flet assets/full a balances	nces		and complete lines 27, 28, 32, and 33.			
100 Total habilities and flet assets/full a balances	ala		l l	2,655,396.		2,984,539.
100 Total habilities and flet assets/full a balances	Fund B	28	Organizations that do not follow FASB ASC 958, check here		28	
100 Total habilities and flet assets/full a balances	o	29			29	
100 Total habilities and flet assets/full a balances	ets					
100 Total habilities and flet assets/full a balances	\ss					
100 Total habilities and flet assets/full a balances	et 🗸	32	Total net assets or fund balances	2,655,396.	32	2,984,539.
	Ž	33	Total liabilities and net assets/fund balances	2,665,095.	33	2,995,612.

Form 990 (2022) Page **12** 

Part	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)	9:	23,2	15.		
2	Total expenses (must equal Part IX, column (A), line 25)	59	94,0	72.		
3	Revenue less expenses. Subtract line 2 from line 1	3.2	29,1	43.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4	2,6	55,3	96.		
5	Net unrealized gains (losses) on investments					
6	Donated services and use of facilities					
7	Investment expenses					
8	Prior period adjustments					
9	Other changes in net assets or fund balances (explain on Schedule O)					
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B))	2,98	34,5	39.		
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
			Yes	No		
1	Accounting method used to prepare the Form 990:  Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.					
0-		0-		~		
Za	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or	2a		×		
	reviewed on a separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?	2b		×		
b	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a	20				
	separate 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 audit, review, or compilation of its financial statements and selection of an independent accountant? .	2c				
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	3a		×		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits .	3b				

REV 05/17/23 PRO Form **990** (2022)

# **SCHEDULE A** (Form 990)

# **Public Charity Status and Public Support**

OMB No. 1545-0047

Name of the organization

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

Open to Public Inspection

Employer identification number

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

The	Oakland Institute						42-1626352			
Pai	rt I Reason for Pub	lic Charity Status	<b>s.</b> (All organiz	ations mus	t comple	ete this p	oart.) See instructi	ons.		
The o	organization is not a privat		•	_		-	•			
1	A church, convention						0(b)(1)(A)(i).			
2	_ ····································									
3	A hospital or a cooper	•	•				, , , , ,	···· - · · · ·		
4	A medical research or	• .	in conjunction	n with a hosp	oital desc	ribed in s	section 170(b)(1)(A)	(III). Enter the		
_	hospital's name, city,  An organization opera		of a college of		d o		d by a gayaranaant	al wait dagarih	had in	
5	section 170(b)(1)(A)(i		•	or university	owned C	o operate	ed by a government	ai unii deschi	Jea III	
6	A federal, state, or loc					٠,	. , , , , ,			
7	★ An organization that r				port from	a gover	nmental unit or fron	n the general	public	
_	described in <b>section</b>				<b>5</b>					
8	A community trust des				,				_	
9		land-grant college of	of agriculture (s	see instruction	ons). Ente	er the nan	ne, city, and state of	the college of	r	
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 <b>section 509(a)(2)</b> . (Complete Part III.)									
11	☐ An organization organ									
12	☐ An organization organi	•	•	•	-			out the purpo	ses of	
	one or more publicly s									
	the box on lines 12a th	rough 12d that desc	ribes the type	of supporting	g organiza	ation and	complete lines 12e,	12f, and 12g.		
а							rted organization(s),		iving	
							he directors or trust	ees of the		
	, • •	zation. <b>You must co</b>	-	-						
b	<b>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.									
С	: Type III functiona	•	pporting organ	nization ope	rated in c		n with, and function	ally integrated	with,	
اہ		* * * *	,	-		-			. <b>.</b> : (-)	
d	that is not function		organization g	enerally mu	st satisfy	a distribu	ection with its suppo ution requirement an nd Part V.			
е	Check this box if t	he organization rece	eived a written	determination	on from t	ne IRS th	at it is a Type I, Type	e II, Type III		
		ated, or Type III non	•	tegrated su	oporting	organizat	ion.			
f	Enter the number of sup									
g	,						T			
	(i) Name of supported organizat	ion (ii) EIN	(described	of organization I on lines 1–10 e instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount other support instructions	(see	
					Yes	No				
(A)										
(B)										
(C)										
(D)										
(E)										
Toto										

Schedule A (Form 990) 2022 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 **(e)** 2022 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . 795,165. 1,605,154. 919,074. 4,621,152. 611,869. 689,890. Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . The value of services or facilities furnished by a governmental unit to the organization without charge . . . . **Total.** Add lines 1 through 3 4 795,165. 1,605,154. 611,869. 689,890. 919,074. 4,621,152. 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) . . . . 2,763,855. **Public support.** Subtract line 5 from line 4 1,857,297. Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 795,165.1,605,154. 611,869. 919,074.4,621,152. 7 Amounts from line 4 . . . . . . 689,890. 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . . . . 1,291. 4,721. 5,841. 2,995. 4,139. 18,987. Net income from unrelated business 9 activities, whether or not the business is regularly carried on . . . . . . 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . . . . 108. 199 307

11	Total support. Add lines 7 through 10			4,640,446.						
12	Gross receipts from related activities, etc. (see instructions)	. 12	2	7,759.						
13	First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth to									
	organization, check this box and <b>stop here</b>			🔲						
Secti	Section C. Computation of Public Support Percentage									
14	Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	. 14		40.02%						
15	Public support percentage from 2021 Schedule A, Part II, line 14	. 15	;	37.99%						
16a	33¹/3% support test—2022. If the organization did not check the box on line 13, and line 14 box and stop here. The organization qualifies as a publicly supported organization									
b	$33^{1}$ /3% support test-2021. If the organization did not check a box on line 13 or 16a, and line this box and stop here. The organization qualifies as a publicly supported organization			•						
17a	10%-facts-and-circumstances test—2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here</b> . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization									
b	10%-facts-and-circumstances test—2021. If the organization did not check a box on line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check the in Part VI how the organization meets the facts-and-circumstances test. The organization quantum properties of the control of	is box ai alifies as	nd <b>stop he</b> a publicly	ere. Explain supported						
	organization			$\square$						

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# 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) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(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	<b>Total.</b> 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.)						
	on B. Total Support		l	T	ı		
	dar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	<b>(e)</b> 2022	(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						
b	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						
10	<b>3</b>						
12	Other income. Do not include gain or loss from the sale of capital assets						
	(Explain in Part VI.)						
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	•			•		, , , ,
Saat:	organization, check this box and stop he on C. Computation of Public Suppor						· · · <u></u>
15	Public support percentage for 2022 (line 8			13 column (f)		15	%
16	Public support percentage from 2021 Sch						<del></del>
	on D. Computation of Investment In	come Perce	ntage	<u></u>	<u> </u>	1.5	/0
17	Investment income percentage for 2022 (			ov line 13. colu	ımn (f))	17	%
18	Investment income percentage from 2021			-	,		<del>/</del> 6
19a	33 <sup>1</sup> / <sub>3</sub> % support tests—2022. If the organ						
. 54	17 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this box						
b	33 <sup>1</sup> / <sub>3</sub> % support tests—2021. If the organiz	_	_	-		=	_
	line 18 is not more than 331/3%, check this l						
20	Private foundation. If the organization di	_	=	=	-		_

#### Part IV **Supporting Organizations**

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

# Se

Secti	on A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
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 <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?	5с		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with record to a substantial contributor.			
8	with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line	7		
0	7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		
h	Did the organization have any excess business holdings in the tay year? (I se Schedule C. Form 1720, to			

determine whether the organization had excess business holdings.)

Part	Supporting Organizations (continued)			
			Yes	No
11 a	Has the organization accepted a gift or contribution from any of the following persons?  A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
a	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
	A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c,</i>	110		
	provide detail in <b>Part VI</b> .	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Secti	on C. Type II 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Secti	on 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 <b>Part VI</b> 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	instru	ction	s).
a b c 2	<ul> <li>☐ The organization satisfied the Activities Test. Complete line 2 below.</li> <li>☐ The organization is the parent of each of its supported organizations. Complete line 3 below.</li> <li>☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity Activities Test. Answer lines 2a and 2b below.</li> </ul>	(see in	struct <b>Yes</b>	
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> 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>2</b> a		
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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3 a	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i> 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? <i>If "Yes" or "No," provide details in Part VI.</i>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

				•
Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	gani	izations	
1	☐ Check here if the organization satisfied the Integral Part Test as a qualifying	g tru	st on Nov. 20, 1970 (expl	ain in <b>Part VI</b> ). <b>See</b>
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Sect	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	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-functional (see instructions)	ally i	ntegrated Type III suppor	rting organization

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2022 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) Section E—Distribution Allocations (see instructions) **Underdistributions Distributable Excess Distributions** Pre-2022 Amount for 2022 Distributable amount for 2022 from Section C, line 6 2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2022 **a** From 2017 . . . . . From 2018 **c** From 2019 **d** From 2020 . . . . . From 2021 . . . . Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2022 distributable amount Carryover from 2017 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2022 from 4 Section D, line 7: Applied to underdistributions of prior years Applied to 2022 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2023. Add lines 3j and 4c. Breakdown of line 7: Excess from 2018 . . . Excess from 2019 . . . Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 . . .

Schedule A (Form 990) 2022 Part VI Supplemental 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.) Pt II Ln 10: Other Income Part II, Line 10 Description: Miscellaneous 2018: 108. 2019: 199.

# SCHEDULE D (Form 990)

# **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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

The	Oakland Institute		42-1626352
Par	t I Organizations Maintaining Donor Advi	sed Funds or Other Similar Fund	ds or Accounts.
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year) .		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor	advisors in writing that the assets he	ld in donor advised
	funds are the organization's property, subject to the		
6	Did the organization inform all grantees, donors, ar		
	only for charitable purposes and not for the benefit		
	conferring impermissible private benefit?		· · · · · · · · · · · · · · · · · · ·
Par	Conservation Easements.		
	Complete if the organization answered "	Yes" on Form 990 Part IV line 7	
1	Purpose(s) of conservation easements held by the o		
•	Preservation of land for public use (for example, recreations)		f a historically important land area
	Protection of natural habitat		f a certified historic structure
		☐ Freservation o	r a certified historic structure
2	Preservation of open space Complete lines 2a through 2d if the organization hel	d a qualified conservation contribution	in the form of a conservation
_	easement on the last day of the tax year.	a a qualified conservation contribution	
	•		Held at the End of the Tax Year
а			
b	Total acreage restricted by conservation easements		
С	Number of conservation easements on a certified hi		
d	Number of conservation easements included in (c) a historic structure listed in the National Register .		
_	_		
3	Number of conservation easements modified, trans	ferred, released, extinguished, or tern	ninated by the organization during the
	tax year		
4	Number of states where property subject to conserv		
5	Does the organization have a written policy reg		
	violations, and enforcement of the conservation eas		
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violations, and enforcing	g conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting	g, handling of violations, and enforcing o	conservation easements during the year
8	Does each conservation easement reported on line 2		
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports co		
	balance sheet, and include, if applicable, the text of		ancial statements that describes the
	organization's accounting for conservation easemen		
Part	<u> </u>		Other Similar Assets.
	Complete if the organization answered "		
1a	If the organization elected, as permitted under FAS		
	of art, historical treasures, or other similar assets		
	service, provide in Part XIII the text of the footnote t	o its financial statements that describe	es these items.
b	If the organization elected, as permitted under FAS		
	art, historical treasures, or other similar assets held		search in furtherance of public service,
	provide the following amounts relating to these item	s:	
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	<ul><li>(i) Revenue included on Form 990, Part VIII, line 1</li><li>(ii) Assets included in Form 990, Part X</li></ul>		\$
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 FA		3 /1
а	Revenue included on Form 990, Part VIII, line 1 .		\$
b	Assets included in Form 990, Part X		\$

Part	III Organizations Maintaining	Collections of	Art, Hist	torical T	reasures,	or Ot	her Similar Ass	ets (conti	inued)
3	Using the organization's acquisition, collection items (check all that apply):		ner recor	ds, chec	k any of the	follow	ring that make sig	gnificant us	se of its
а	☐ Public exhibition		d	Loan	or exchange	progra	am		
b	☐ Scholarly research		е	Other					
С	☐ Preservation for future generations								
4	Provide a description of the organizat XIII.		and expla	ain how t	hey further t	he org	anization's exem <sub>l</sub>	ot purpose	in Part
5	During the year, did the organization	solicit or receive	donation	s of art,	historical tre	asures	s, or other similar		
	assets to be sold to raise funds rather	than to be mainta	ined as p	part of the	e organizatio	n's co	llection?	☐ Yes	☐ No
Part	IV Escrow and Custodial Arra	angements.							
	Complete if the organization	answered "Yes"	on For	m 990, F	Part IV, line	9, or	reported an amo	ount on F	orm
	990, Part X, line 21.						•		
1a	Is the organization an agent, trustee	custodian or oth	er interm	nediary fo	or contribution	ons or	other assets not		
	included on Form 990, Part X?							☐ Yes	☐ No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the fo	llowing ta	able:				
	, 1	'		J			Am	ount	
С	Beginning balance					1c			
d	Additions during the year					1d			
e	Distributions during the year					1e			
f	Ending balance					1f			
2a	Did the organization include an amoun							Yes	□ No
	If "Yes," explain the arrangement in Pa								
Par									
	Complete if the organization	answered "Yes"	on For	m 990. F	Part IV. line	10.			
	μ τ τ σ σ σ σ σ σ σ σ σ σ σ σ σ σ σ σ σ	(a) Current year		or year	(c) Two years		(d) Three years back	(e) Four year	ars back
1a	Beginning of year balance	, ,	. ,		, , ,		, ,	, ,	
b	Contributions								
С	Net investment earnings, gains, and								
	losses								
d	Grants or scholarships								
	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of t	he current vear en	d balanc	e (line 1a	. column (a))	held a	as:		
а	Board designated or quasi-endowmen		%		, (,)				
b	Permanent endowment	%							
С	Term endowment %	' '							
	The percentages on lines 2a, 2b, and	2c should equal 10	00%.						
3a	Are there endowment funds not in the			zation tha	at are held a	nd adı	ministered for the		
	organization by:	•							s No
	(i) Unrelated organizations							3a(i)	
	(III) = 1							3a(ii)	
b	If "Yes" on line 3a(ii), are the related o	rganizations listed	as requi	red on So	chedule R?			3b	
4	Describe in Part XIII the intended uses	•							
Part									
	Complete if the organization		on For	m 990, F	Part IV, line	11a. S	See Form 990, F	Part X, line	e 10.
	Description of property	(a) Cost or oth			r other basis		Accumulated	(d) Book va	
		(investme			ther)		preciation		
1a	Land		0.	2	55,000.			255	,000.
b	Buildings				00,240.		87,835.		,405.
С	Leasehold improvements								
d	Equipment				26,503.		15,952.	10	,551.
e	Other								
	Add lines 1a through 1e (Column (d) n		00 Part )	Column	(R) line 100	• )		777	956

Part VII	Investments—Other Securities.	000 5 1 11/1	441.0. 5	000 D 13/ 11 40
	Complete if the organization answered "Yes" on For			
	(a) Description of security or category (including name of security)	(b) Book value		hod of valuation: -of-year market value
(1) Financial	derivatives			
	neld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G) (H)				
	mn (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments – Program Related.			
	Complete if the organization answered "Yes" on For	m 990, Part IV, lin	e 11c. See Form	990, Part X, line 13.
	(a) Description of investment	(b) Book value		hod of valuation: -of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	mn (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.			
I di tix	Complete if the organization answered "Yes" on For	m 990. Part IV. lin	e 11d. See Form	990. Part X. line 15.
	(a) Description	,,		(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)	(b) 100 d f = 100 D t V = 1 (D) 100 d f			
Part X	mn (b) must equal Form 990, Part X, col. (B) line 15.) Other Liabilities.	<u> </u>		
PartA	Complete if the organization answered "Yes" on For	m 000 Part IV lin	o 11o or 11f Soc	Form 000 Part Y
	line 25.	iii 330, i ait iv, iiii	e i le di i ii. dec	er omi 990, ran X,
1.	(a) Description of liability			(b) Book value
(1) Federal in				(,,
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	mn (b) must equal Form 990, Part X, col. (B) line 25.)			
	r uncertain tax positions. In Part XIII, provide the text of the footnotes is liability for uncertain tax positions under FASB ASC 740. Check			

Part			Return.
	Complete if the organization answered "Yes" on Form 990, F	Part IV, line 12a.	
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines <b>2a</b> through <b>2d</b>		2e
3	Subtract line <b>2e</b> from line <b>1</b>		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)		
	Add lines <b>4a</b> and <b>4b</b>		4c
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form</i> 990, <i>Part I, line</i>		5
Part			-
	Complete if the organization answered "Yes" on Form 990, F		
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		· ·
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	-
C	Other losses	2c	-
d	Other (Describe in Part XIII.)	2d	-
	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)		-
		UTU	
	Add lines 4a and 4b		40
С	Add lines <b>4a</b> and <b>4b</b> Total expenses Add lines <b>3</b> and <b>4c</b> (This must equal Form 990, Part I, line		4c
с 5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line		4c 5
c 5 Part	Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line Supplemental Information.	e 18.)	5
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line Supplemental Information.	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line
<b>5</b> Part Provid	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line Supplemental Information.  e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	e 18.)	5 b; Part V, line 4; Part X, line

Schedule D (Fo	rm 990) 2022	Page \$
Part XIII	Supplemental Information (continued)	

#### SCHEDULE L (Form 990)

# **Transactions With Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open To Public Inspection

rvarric c	ine organization							Linpio	yer rae	iiiiioat	ion nai	IIIDCI			
The	Oakland Insti	tute						42-	1626	5352					
Part								ction 501(c)(29) 5a or 25b, or For					40b.		
1	(a) Name of disqualit	fied person	(b) Relationship between disqualified person and organization					(c) Description	n of trai	nsactio	n		(d) Correct		
•		·											Yes	No	
(1)															
(2)															
(3)															
(4)															
(5)															
(6)															
2	Enter the amount of under section 4958		ed by the organ		_	-		d persons durir	_	-	r \$				
3	Enter the amount of		on line 2, above								\$_				
Dout															
Part	Complete if th	ne organizatio	erested Persor on answered "Ye mount on Form	es" on F				38a or Form 99	90, Pa	art IV,	line 2	6; or	f the		
(a) Name of interested person		(b) Relationshi with organization		loan from t		(.,				(g) In default?		1		(i) Written agreement?	
				То	From	1			Yes	No	Yes	No	Yes	No	
(1)															
(2)															
(3)															
(4)															
(5)															
(6)															
(7)															
(8)															
(9)															
(10)															
Total								\$							
Part			nefiting Intereson answered "Ye			0, Part IV, I	ine 27	7.							
(a)	Name of interested person		onship between inte on and the organizati			mount of istance	(	(d) Type of assistanc	e	(e	) Purpo	ose of a	ssistan	ce	
(1)															
(2)															
(3)															
(4)															
(5)															
(6)															
(7)															
(8)															
(9)															

(10)

	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization revenues?	
				Yes	No
Anuradha Mittal	Executive Director	42,000.	rent for organization's offices		×
V Supplemental Information. Provide additional information	on for responses to questions o	n Schedule L (see	instructions).		
	· ·	· · ·	,		

# SCHEDULE O (Form 990)

# Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Open to Public Inspection

Employer identification number

The Oakland Institute	42-1626352
Pt VI, Line 11b: Organization's Process to Review Form 990: Form 990	is reviewed
and approved by Board before filing.	
Pt VI, Line 12c: Enforcement of Conflicts Policy: Discussed at every	Board meeting.
Pt VI, Line 15a: Compensation Process for Top Official: Compensation	for key
employees is compared to compensation by other nonprofits in the are	a.
Pt VI, Line 15b: Compensation Process for Officers: Compensation for	key employees
is compared to compensation by other nonprofits in the area.	
Pt VI, Line 19: Governing Documents Disclosure Explanation: Public of	locuments
are available upon request.	
Pt IX, Line 11g:	
Description: Graphic design	
Total: \$2,875	
Program services: \$2,777	
Management and general: \$8	
Fundraising: \$90	
Description: Website	
Total: \$11,916	
Program services: \$11,083	
Management and general: \$250	
Fundraising: \$583	
Description: Researchers	

REV 05/17/23 PRO

Schedule O (Form 990) 2022 Name of the organization **Employer identification number** The Oakland Institute 42-1626352 Total: \$47,234 Program services: \$46,900 Management and general: \$167 Fundraising: \$167 Description: Other Total: \$11,150 Program services: \$11,098 Management and general: \$17 Fundraising: \$35

### Form 990 p 2: Line 4a Description-1

The Oakland Institute's research, communications and advocacy strategy is initiated at the request of communities seeking partnership in defense of their land, human rights, and the environment. Over the past year we took on powerful actors - governments, international institutions, and corporations - and held them accountable.

A sampling of 2022 accomplishments includes the following:

### Dismantling "Fortress" Conservation

We have taken head on neo-colonial "fortress" conservation model in Tanzania and Kenya that denies Indigenous communities their ancestral lands and human rights. Instead, we advocate for a rights-based approach to conservation. Here are some details on how we have challenged forced evictions in Tanzania.

Tanzania: Challenging Violent Evictions and Forced Resettlement of the Maasai Since our 2018 report, Losing the Serengeti, shattered the silence around the plight of the Maasai, our research and advocacy has continued tirelessly to expose, document and update the situation. Our 2021 report, The Looming Threat of Eviction, sounded the alarm on the government's plans to evict 80,000 Maasai from their homes in the Ngorongoro Conservation Area (NCA). In May 2022, our report, Flawed Plans for Relocation of the Maasai from the Ngorongoro Conservation Area, raised serious concerns with the resettlement process, feasibility of the selection sites, and major discrepancies between government promises and the reality on the ground.

On June 8, 2022, the government initiated the violent demarcation of 1,500 km2 of land in nearby Loliondo, with the intent to displace 70,000 Maasai, which led to dozens of serious injuries, widespread arrests, and displacement of thousands of women and children. Together with our Maasai partners, the Institute has been at the forefront of the struggle - alerting the world while also providing desperately needed resources for legal and medical support to the impacted communities.

Our research has dismantled government lies about land management plans being about conservation - and instead, exposed that forced evictions, livelihood restrictions, and elimination of education and health services - are really about forcing the Maasai to become "volunteers" for resettlement to increase tourism revenues for foreign corporations and the government. Our timely advocacy led to international condemnation of the Tanzanian government, including from the African Commission on Human and Peoples' Rights, the UN Permanent Forum on Indigenous Issues, and nine UN Special Rapporteurs; it put the international spotlight on the crisis through widespread media coverage; and major donor countries to Tanzania - including United States - are now organizing travel to meet with the impacted communities. This multipronged strategy has prevented the government from swiftly removing the Maasai from their ancestral lands as it had hoped for.

### Holding the Powerful Accountable

Nicaragua: Targeted Sanctions

In June 2022, the US Treasury announced sanctions against ENIMINAS, the state-owned Nicaraguan Mining Company. Our research and advocacy has exposed the involvement of the gold mining sector in the violent theft of Indigenous and Afro-descendant peoples' lands on the Caribbean coast of Nicaragua. We also exposed the involvement of US-based gold mining companies and private equity firms. President Biden's Executive Order in October 2022 made it illegal for Americans from doing business with Nicaragua's gold industry. This marks the

# Form 990 p 2: Line 4a Description-1 (Continued)

first time a specific sector of the economy has been identified as off-limits.

Ukraine: Struggle Against the Corporate Takeover of Agricultural Land

A year after the Russian invasion of Ukraine, our report War and Theft: The Takeover of Ukraine's Agricultural Land laid bare how oligarchs and financial interests are expanding their control over Ukraine's agricultural land with the help and financing of Western financial institutions. Our findings, which received extensive media coverage in Ukraine and globally, brought attention to an overlooked yet central question - who controls agricultural land in the country known as the "breadbasket of Europe."

We revealed that the total amount of land controlled by oligarchs, corrupt individuals, and large agribusinesses exceeds 28 percent of Ukraine's arable land. The largest landholders are a mix of Ukrainian oligarchs and foreign interests - most of who are indebted to Western funds and institutions, notably the European Bank for Reconstruction and Development (EBRD) and the World Bank. This Western financing is also tied to a drastic structural adjustment program that imposed austerity and privatization, including a 2021 law that established a market for agricultural land, despite widespread opposition. Our work echoed the desperate calls of Ukrainian civil society, academics, and farmers to suspend this new law and all land transactions and together with them we are calling for prioritizing an agricultural model free from oligarchy and corruption.

### Challenging False Solutions to the Climate Crisis

Exposing false solutions to the climate crisis is paramount at a time when carbon schemes are becoming the new El Dorado for banks, speculators, and the fossil fuel industry who foresee substantial profit-making opportunities.

Debunking Midwest Carbon Express: A False Climate Solution Threatens the Midwestern US Alerted by citizens and Indigenous groups in the Midwest, we debunked with our research the world's largest carbon capture and storage (CCS) project - Summit Carbon Solutions' \$5.1 billion Midwest Carbon Express. Led by agribusiness baron Bruce Rastetter, the 2,000-mile pipeline plans to capture carbon from ethanol biorefineries across Iowa, Minnesota, Nebraska, and South Dakota, before injecting and storing it underground in North Dakota.

Our two reports exposed the major environmental risks with the project if built, as well as the checkered history of Bruce Rastetter, previously implicated in the largest land grabbing scheme in Tanzania, which we exposed and ended in 2011. We also unmasked the billion-dollar financial interests and high-level political forces driving the project despite massive opposition from Indigenous groups, farmers, and environmentalists.

Our research is fueling the fierce advocacy campaign led by the local groups, who hand-delivered our report to the Iowa Utilities Board, the State Capitol, Governor Kim Reynolds, and Summit Carbon Solutions' lawyer. Our advocacy is also targeting the Biden administration and members of the Congress, calling on them to stop subsidizing CCS projects and oppose the pipeline's construction. Of the investors of the project that we unmasked, we demand they divest.

For more information on the Institute's work, please visit www.oaklandinstitute.org.