Form **990-PF**

Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No. 1545-0047

2024

Department of the Treasury Internal Revenue Service

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Open to Public Inspection

For ca	iendar	year 2024 or tax year beginning	, 2024,	, and ending		,20	
REST	ORE	NATIVE PLANTS AND WILDLI	FE INC.		Α	Employer identification nun 82-3559181	nber
P.O.	. BO	420 NJ 07436	11.0.		В	Telephone number (see inst 201-240-8468	ructions)
	,				С	If exemption application is pe	nding, check here
G Ch	eck al	l that apply:	Initial return of a forn	ner public charity	D	1 Foreign organizations, chec	k here
Final return Amended return						2 Foreign organizations meet	
H Ch	eck tvi		<u>∧</u> ן name change l(c)(3) exempt private fo	oundation	1	check here and attach comp	
		ction 4947(a)(1) nonexempt charitable tr		orivate foundation	E	If private foundation status w	
			counting method: C Other (specify)	ash X Accrual	_	section 507(b)(1)(A), check h	
•	\$		column (d), must be or	n cash basis.)	F	If the foundation is in a 60-m under section 507(b)(1)(B), c	
Part		nalysis of Revenue and	(a) Revenue and	(b) Net investmer	nt.	(c) Adjusted net	(d) Disbursements
	co ne	xpenses (The total of amounts in lumns (b), (c), and (d) may not cessarily equal the amounts in lumn (a) (see instructions).)	expenses per books	income	ı	income	for charitable purposes (cash basis only)
	1 2	Contributions, gifts, grants, etc., received (attach schedule)	261,152.				
		Check if the foundation is not required to attach Sch. B					
	3 4	Interest on savings and temporary cash investments					
	5a b	Gross rents			000000000000000000000000000000000000000		
	6a	or (loss)					
Ë	b	Gross sales price for all assets on line 10					
Revenue	7 8	Capital gain net income (from Part IV, line 2) Net short-term capital gain					
Re	9	Income modifications					
	1 0 a	Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
		Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	1,444.				
	12	Total. Add lines 1 through 11	262,596.		0.	0.	
	13 14	Compensation of officers, directors, trustees, etc. Other employee salaries and wages	9,286. 31,048.				9,286. 31,048.
SS	15	Pension plans, employee benefits	31,040.				31,040.
penses	16a	Legal fees (attach schedule)					
	b c	Accounting fees (attach sch)	13,308.				11,300.
Ş.	17	Interest					
重	18 19	Taxes (attach schedule)(see instrs). SEE STM 3 Depreciation (attach	5,569.				5,569.
nist		schedule) and depletion	170,979.				
Ē	20	Occupancy	10,289.				10,289.
Αd	22	Printing and publications					
PL	23	Other expenses (attach schedule)	20,512.				20,202.
ğ	24	Total operating and administrative					
atir	25	expenses. Add lines 13 through 23	260,991.				87,694.
Operating and Administrative E)	26	Total expenses and disbursements.	260 001			^	07 604
	27	Add lines 24 and 25	260,991.		0.	0.	87,694.
	а	Excess of revenue over expenses and disbursements	1,605.				
	b	Net investment income (if negative, enter -0-)	1,000.		0.		
	С	Adjusted net income (if negative, enter -0-)		le l		0.	

Par	t II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year	End o	
1201100100200	1	Coch non interest	bearing	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 2		ary cash investments	= - / = -	184,626.	184,626.
	_	Accounts receivable	ary cash investments			
		Less: allowance for a	doubtful accounts			
	4	Pledges receivable				
	•	Less: allowance for a	doubtful accounts			
	5	Grants receivable				
	6	Receivables due from offic	ers, directors, trustees, and other			
	-	disqualified persons (attac	ch schedule) (see instructions)			
	7	Other notes and loans rece				
		Less: allowance for o				
	8		or use			
	9		nd deferred charges			
ξ	1 0 a	Investments – U.S.	and state government chedule)			
Assets	h		stock (attach schedule)			
ď		·	oonds (attach schedule)			
		Investments – land,	,			
	l	equipment: basis			Million.	
		Less: accumulated deprec (attach schedule)	iation			
	12	Investments - morto	gage loans			
	13		(attach schedule)			
	14	Land, buildings, and	equipment: basis <u>6,242,222</u>	2.		
		Less: accumulated deprec (attach schedule)		7. 5,351,024.	5,180,045.	6,242,222.
	15	Other assets (descri	pe SEE STATEMENT 6	_)	14,500.	
	16	see the instructions.	ompleted by all filers — Also, see page 1, item I)	5,377,566.	5,379,171.	6,426,848.
	17	Accounts payable ar	nd accrued expenses			
	18	Grants payable				
8	19					
≅	20		ors,trustees, and other disqualified persons			
Liabilities	21	= =	s payable (attach schedule)			
Ξ	22	Other liabilities (desc	cribe	_)		
	23	Total liabilities (add	lines 17 through 22)	0.	0.	
		Foundations that fol	low FASB ASC 958, check here and			
8		complete lines 24, 25	5, 29, and 30 [X		
Ĕ	24	Net assets without d	onor restrictions	5,377,566.	5,379,171.	
ig						
	25		or restrictions	•		
Ĕ		Foundations that do	not follow FASB ASC 958, check here 6th through 30.	\neg		
Ī	26		rincipal, or current funds	_		
0	27		or land, bldg., and equipment fund			
흱	28		ulated income, endowment, or other funds			
\SS	29	* '	und balances (see instructions)		5,379,171.	
Vet Assets or Fund Balances	30	Total liabilities and r	net assets/fund balances		5,379,171.	
	t III	Analysis of Chan	ges in Net Assets or Fund Bala			<u> </u>
1	Total end-	net assets or fund ba of-vear figure reported	alances at beginning of year — Part II, co	olumn (a), line 29 (must ag	ree with 1	5,377,566.
			line 27a			1,605.
		increases not included in lin				
4					4	5,379,171.
5	Decrea	ases not included in line 2 (itemize)		5	, , , = -
6	Total	net assets or fund ba	alances at end of year (line 4 minus line	5) – Part II, column (b), lir	ne 29 6	5,379,171.

(a) List and describe	(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (b) How acc P - Purch D - Dona					
1a N/A						
b						
С						
d						
e						
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other l plus expense of		(h) Gain or ((e) plus (f) n		
a						
b						
С						
d						
е						
Complete only for assets show	ving gain in column (h) and owned b	by the foundation on 12/31	1/69.	(I) Gains (Col.	(h)	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. over col. (j), if an		pain minus col. (k), b an -0-) or Losses (fr	ut not less	
a						
b						
c						
d						
e						
If gain, also enter in Part I, lin in Part I, line 8	(loss) as defined in sections 1222(5) e 8, column (c). See instructions. If on Investment Income (Secti	(loss), enter -0-	3 48 – see instruct	ions)		
and controlled and an encontrolled and an encount.	Ţ	, , , , , , , , , , , , , , , , , , , ,		•		
1a Exempt operating foundations describe	ed in section 4940(d)(2), check here					
Date of ruling or determination letter:		etter if necessary — see ir				
	s enter 1.39% (0.0139) of line 27b. E			1	0	
4% (0.04) of Part I, line 12, co	ol. (b)					
2 Tax under section 511 (domes	tic section 4947(a)(1) trusts and tax	able				
foundations only; others, ente	r -0-)			2	0	
3 Add lines 1 and 2				3	0 .	
4 Subtitle A (income) tax (dome	stic section 4947(a)(1) trusts and ta	xable foundations only; of	thers, enter -0-).	4	0 .	
5 Tax based on investment inco	me. Subtract line 4 from line 3. If ze	ero or less, enter -0		5	0 .	
6 Credits/Payments:						
a 2024 estimated tax pymts and 2023 ov	erpayment credited to 2024	6a				
b Exempt foreign organizations	tax withheld at source	6b				
c Tax paid with application for e	xtension of time to file (Form 8868).	6c				
d Backup withholding erroneous	ly withheld	6d				
	dd lines 6a through 6d				0	
8 Enter any penalty for underpa	yment of estimated tax. Check here	if Form 2220 is atta	ached	8		
	s more than line 7, enter amount owed				0 .	
10 Overpayment. If line 7 is more than t	ne total of lines 5 and 8, enter the amount ov	erpaid		10		
11 Enter the amount of line 10 to be: Cre	dited to 2025 estimated tax		Refunded	11		
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Part VI-A Statements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?			
	See the instructions for the definition	1b		X
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.			
С	Did the foundation file Form 1120-POL for this year?	1c		Χ
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
۵	(1) On the foundation. \$ 0. (2) On foundation managers. \$ 0. Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
·	foundation managers. \$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
_	If "Yes," attach a detailed description of the activities.	_		4.
•				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		Х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
•	If "Yes," attach the statement required by General Instruction T.			21
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
•	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6		Х
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	Х	
-	Enter the states to which the foundation reports or with which it is registered. See instructions.	-		
	NJ			
h	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
D	(or designate) of each state as required by <i>General Instruction G?</i> If "No," attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)			
,	for calendar year 2024 or the tax year beginning in 2024? See the instructions for Part XIII. If "Yes," complete Part XIII.	9	Χ	
10	Did any persons become substantial contributors during the tay year? If "Yes " attach a schedule listing their names			
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	Х	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had	.		,.
40	advisory privileges? If "Yes," attach statement. See instructions.	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address. RESTORENATIVEPLANTS.ORG			
14	The books are in care of DONNIE O'BRIEN Telephone no. 201-24	<u>u-8</u>	468_	
15	Located at PO BOX 420 OAKLAND NJ ZIP + 4 07436	N/A		
15		TA \ \ \ \ \ \ \ \		
	and enter the amount of tax-exempt interest received or accrued during the year		V.	N/A
16	At any time during calendar year 2024, did the foundation have an interest in or a signature or other authority over a	16	Yes	No
	bank, securities, or other financial account in a foreign country?	16		Χ
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes,"			
D A A	enter the name of the foreign country	m 00) DE /	2024V
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Par	t VI-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a (1)		Х
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			X
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a (3)		X
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a (4)		X
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?	1a (5)		X
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.).	1a (6)		X
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
С	Organizations relying on a current notice regarding disaster assistance, check here			
d	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2024?	1d		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
a	At the end of tax year 2024, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2024? If "Yes," list the years.	2a		Х
	20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement — see instructions.)	2b		L
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	3a		Х
t	If "Yes," did it have excess business holdings in 2024 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2024.)	3b		
4 a	Did the foundation invest during the year any amount in a manner that would jeopardize its			
	charitable purposes?	4a	100000000000000000000000000000000000000	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2024?	4b		X
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Part VI-B Statements Regarding Activit	ies for Which Forn	n 4720 May Be Red	uired (continued)	,,,,,,		5	
5a During the year, did the foundation pay or incu	r any amount to:	•			Yes	No	
(1) Carry on propaganda, or otherwise attemp	t to influence legislation	(section 4945(e))?		5a(1)		Х	
(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registra	ic election (see section 4	4955); or to carry		5a(2)		X	
(3) Provide a grant to an individual for travel,						X	
(4) Provide a grant to an organization other th in section 4945(d)(4)(A)? See instructions.	an a charitable, etc., or	ganization described		5a(4)		X	
(5) Provide for any purpose other than religiou educational purposes, or for the prevention	us, charitable, scientific, n of cruelty to children o	literary, or or animals?		5a(5)		X	
b If any answer is "Yes" to 5a(1)—(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? N/A							
c Organizations relying on a current notice regar							
d If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?							
If "Yes," attach the statement required by Regu	ulations section 53.4945	-5(d).					
6a Did the foundation, during the year, receive an on a personal benefit contract?	y funds, directly or indir	rectly, to pay premiums		6a		Χ	
b Did the foundation, during the year, pay premit						X	
If "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the found	ation a norty to a probib	sited toy aboltor transce	tion?	7a		Х	
b If "Yes," did the foundation receive any procee	. , .					Λ	
8 Is the foundation subject to the section 4960 ta							
or excess parachute payment(s) during the yea	ar?			8		X	
Part VII Information About Officers, Dire	ectors, Trustees, Fo	undation Managers	, Highly Paid Empl	oyees,			
1 List all officers, directors, trustees, and foundation	ation managers and thei	ir compensation. See in	structions.				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other a			
DR. BENJAMIN BURTON	TRUSTEE	0.	0.			0.	
6 NORTH SHORE DRIVE	20.00						
OAKLAND, NJ 07436							
	PRESIDENT	3,439.	0.			0.	
2 DEER LEDGE ROAD OAKLAND, NJ 07436	20.00						
	VICE PRESIDEN	2,967.	0.			0.	
2 DEER LEDGE ROAD	20.00	2,507.	••			٠.	
OAKLAND, NJ 07436							
DANIEL NOONAN 2 DEER LEDGE ROAD	TREASURER 20.00	2,880.	0.			0.	
OAKLAND, NJ 07436							
2 Compensation of five highest-paid employees		ded on line 1 – see ins					
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense other a	se acce allowar	ount, ices	
<u>NONE</u>							

3 Five highest-paid independent contractors for professional services. See ins	structions. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part VIII-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistics organizations and other beneficiaries served, conferences convened, research papers produced, etc.	al information such as the number of	Expenses
1 TO CONSERVE, PROTECT, MAINTAIN AND PRESERVE LAN ECOLOGY, WILDLIFE, NATURAL RESOURCES, AND HISTOR LANDMARKS.		
2		
3		
4		
Part VIII-B Summary of Program-Related Investments (see instr Describe the two largest program-related investments made by the foundation dur		Amount
	ing the tax year on lines I and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		
Tatal Add lines 1 Have ush 2		
Total. Add lines 1 through 3		0. Form 990-PF (2024)
500		

3a

3b

4

87,694. Form **990-PF** (2024)

Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: a Average monthly fair market value of securities..... 1a 1b 10,642 c Fair market value of all other assets (see instructions). 1c 1d 10,642 d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and Acquisition indebtedness applicable to line 1 assets..... 2 Subtract line 2 from line 1d..... 3 10,642 Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions). 160 Net value of noncharitable-use assets. Subtract line 4 from line 3. 5 10,482 Minimum investment return. Enter 5% (0.05) of line 5..... 6 524 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here \overline{X} and do not complete this part.) Minimum investment return from Part IX, line 6. N/A. 1 2a Tax on investment income for 2024 from Part V, line 5..... 2a Income tax for 2024. (This does not include the tax from Part V.)..... 2b c Add lines 2a and 2b. 2c Distributable amount before adjustments. Subtract line 2c from line 1..... 3 Recoveries of amounts treated as qualifying distributions 4 5 Deduction from distributable amount (see instructions). 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1.......... Part XI Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: a Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26..... 1a 87,694. b Program-related investments — total from Part VIII-B. 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the:

Cash distribution test (attach the required schedule).

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4.....

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Par	t XII Undistributed Income (see insti	ructions)	N/A		
		(a) Corpus	(b) Years prior to 2023	(c) 2023	(d) 2024
1	Distributable amount for 2024 from Part X, line 7.				
2	Undistributed income, if any, as of the end of 2024:				
	Enter amount for 2023 only				
	Total for prior years: 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2024:				
	From 2019				
	From 2020				
С	From 2021				
d	From 2022				
е	From 2023				
f	Total of lines 3a through e				Hilling hos.
4	Qualifying distributions for 2024 from Part XI,				
	line 4: \$				
а	Applied to 2023, but not more than line 2a		Millions.		
b	Applied to undistributed income of prior years (Election required — see instructions)				
С	Treated as distributions out of corpus (Election required — see instructions)				
d	Applied to 2024 distributable amount				
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2024 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
	Prior years' undistributed income. Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable amount — see instructions.				
е	Undistributed income for 2023. Subtract line 4a from line 2a. Taxable amount — see instructions				
f	Undistributed income for 2024. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2025				
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)				
8	Excess distributions carryover from 2019 not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2025. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
а	Excess from 2020				
b	Excess from 2021				
С	Excess from 2022				
d	Excess from 2023				
е	Excess from 2024				
BAA	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·			Form 990-PF (2024)

Par	T XIII Private Operating Foundat	t ions (see instru	ictions and Par	t vi-A, question	9)	
1a	If the foundation has received a ruling or do is effective for 2024, enter the date of the r				and the ruling	8/01/22
b	Check box to indicate whether the foundation	J			4942(j)(3) or	X 4942(j)(5)
2 a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part IX for	(a) 2024	(b) 2023	(c) 2022	(d) 2021	, ,
	each year listed					N/A
	85% (0.85) of line 2a					N/A
	line 4, for each year listed	87,694.	161,880.	177,488.	277,278.	704,340.
	Amounts included in line 2c not used directly for active conduct of exempt activities				86,486.	86,486.
	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	87,694.	161,880.	177,488.	190,792.	617,854.
	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test — enter:					NT / 7\
	(1) Value of all assets					N/A
h	section 4942(j)(3)(B)(i)					N/A
J	minimum investment return shown in Part IX,	349.	2 267	E 472	22 120	21 210
c	line 6, for each year listed	349.	3,367.	5,473.	22,130.	31,319.
Ŭ	(1) Total support other than gross					
	investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					N/A
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from an exempt organization.					N/A
	(4) Gross investment income					N/A
Par	t XIV Supplementary Information			foundation had	l \$5,000 or mo	1
	assets at any time during th		structions.)			
1 a	Information Regarding Foundation Manager List any managers of the foundation who had close of any tax year (but only if they have DR. BENJAMIN BURTON	ave contributed more	e than 2% of the to an \$5,000). (See se	tal contributions rec ection 507(d)(2).)	eived by the found	ation before the
b	List any managers of the foundation who or a partnership or other entity) of which the f NONE	wn 10% or more of t oundation has a 10%	he stock of a corpo 6 or greater interes	ration (or an equally t.	/ large portion of t	ne ownership of
2	Information Regarding Contribution, Grant	Cift Loan Scholar	ship ote Program	ic.		
2	Check here X if the foundation only m requests for funds. If the foundation makes	akes contributions to	preselected charit	table organizations a		
	2a, b, c, and d. See instructions.		f the nersen to who	m applications abou	ld bo oddroood.	
d	The name, address, and telephone number	or email address o	r the person to who	т аррисацона ѕпос	nd be addressed.	
b	The form in which applications should be so	ubmitted and inform	ation and materials	they should include	:	
С	Any submission deadlines:					
d	Any restrictions or limitations on awards, so	uch as by geographi	cal areas, charitabl	e fields, kinds of ins	titutions, or other	factors:

3 Crants and Contributions Paid During the Year or Approved for Future Payment Recipient Mescipient Secuption Secuption	3 Grants and Contributions Paid During the Year or Approved for Future Payment						
a Paid during the year	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution			
a Paid during the year	Name and address (home or business)	or substantial contributor	recipient	commodition			
		or šubstantial contributor	recipient				
	Total			3a			
Total							

Inter gros	s amounts unless otherwise indicated.	Unrelated	business income	Excluded by s	section 512, 513, or 514	(e)
1 Prog	ram service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
a						
b						
с						
d						
е						
f						
-	and contracts from government agencies					
	bership dues and assessments					
	est on savings and temporary cash investments					
	dends and interest from securities					
	rental income or (loss) from real estate:					
	t-financed property.					
	debt-financed property					
	ental income or (loss) from personal property					
	or (loss) from sales of assets other than inventory					
	income or (loss) from special events					
	revenue: a OTHER INCOME			1	844.	
II Ottlet	L DENU INCOME			1	600.	
				+ +	600.	
	c d					
	d e					
		.				
12 Subt	total Add columns (b) (d) and (e)				1 444	
	total. Add columns (b), (d), and (e)				1,444.	1 444
13 Tota	II. Add line 12, columns (b), (d), and (e)				1,444.	1,444
13 Tota See work:	II. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	ıs.)				1,444
13 Tota See work: Part XV	II. Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the	s.) Accomplis	shment of Exemp	pt Purpose	13 [
13 Tota See work:	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	II. Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the
13 Tota See work: Part XV Line No.	Add line 12, columns (b), (d), and (e)sheet in line 13 instructions to verify calculation Relationship of Activities to the Explain below how each activity for which income.	e Accomplis	shment of Exemp	pt Purpose		the

Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1 0	م طلح ا	vaanisatian diraa	the or indiroathe on	anan in any of H	ha fallawina with	ony other o	vaani-atian				Yes	No
d	escribe	d in section 501(c	tly or indirectly en :) (other than sect	igage in any of the sion 501(c)(3) org	ne ioliowing witr ganizations) or ir	n any other c n section 52.	organization 7,					
	~	to political organiz										
			ng foundation to a		. •					445		
•	•									1a(1)		X
	•									1a (2)		X
		ansactions:	a a a la a d'ha la							41.71		3.7
•	•		oncharitable exer							1b(1)		X
•	•		rom a noncharital							1b(2)		X
•	•		uipment, or other							1b (3)		X
•	•		gements							1b (4)		X
•	•	-	ees							1b(5)		X
•	•		es or membershi							1b(6)		X
CS	nanng	or racilities, equip	ment, mailing list	s, other assets,	or paid employe	es				1c		X
d If th ai	the ange good	swer to any of the ls, other assets, o saction or sharing	e above is "Yes," or services given l arrangement, sh	complete the folloy the reporting to ow in column (d)	lowing schedule foundation. If the the value of the	. Column (b) e foundation e goods, oth) should alw received le er assets, c	ays show the ss than fair	ne fair m market received	arket valu value in	e of	
(a) Line		(b) Amount involved	*	f noncharitable exem			cription of tran				gements	3
N/A			,,,			, ,			,			
-												
d	escribe	undation directly of in section 501 (c	or indirectly affilia	ted with, or relat ion 501(c)(3)) or	ed to, one or me in section 527?	ore tax-exen	npt organiza	utions		. Yes	X	No
		Name of organiz		(h) Type	of organization		(c	Description	on of rela	tionshin		
N/A	(a)	Traine of organiz	ation	(b) Type	or organization		(0	, Description	on on tele	шоныпр		
IV / A												
	Under pe	enalties of periury. I decla	are that I have examined	this return, including a	ccompanying schedule	s and statements	s, and to the best	of my knowled	ge and belie	f. it is true.		
Cian	correct,	and complete. Declara	tion of preparer (other	than taxpayer) is base	ed on all information	of which prepar	er has any knov	wledge.	3			
Sign										May the this retur	IRS disc n with th	uss ne
Here						TRU	JSTEE			preparer : See instr	shown be uctions.	low?
	Signa	ture of officer or trustee	e		Date	Title					Yes	No
		Preparer's name		Preparer's s	signature	Da	ate	Check	X if	PTIN		
Paid		ROBERT J V	ALAS					self-emp	loyed	P01464	1497	
Prepa	rer	Firm's name	CULLARI CA	RRICO ,LLC	•			Firm's EIN	27-0	623664		
Use C		Firm's address		AD SUITE 3					-			
	,		FAIRFIELD,	NJ 07004				Phone no.	973-	406-39	55	
BAA						_				Form 99		2024)

Schedule B (Form 990)

(Rev. December 2024)
Department of the Treasury

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Employer identification number Name of the organization RESTORE NATIVE PLANTS AND WILDLIFE INC. 82-3559181 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)((enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 X or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year..... Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line

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

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (Rev. 12-2024)

-		

Name of organization	Employer identification number

RESTORE NATIVE PLANTS AND WILDLIFE INC.

82-3559181

Pan I	Contributors (see instructions). Use duplicate copies of Part I if additional sp	ace is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	REDACTED 	\$250,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-,		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

RESTORE NATIVE PLANTS AND WILDLIFE INC.

82-3559181

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A		
	<u></u>	\$	
		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-	
	<u></u>	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		ļ S	
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-	
		P	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<u> </u>	ė	
	<u> </u>	\\	
D A A	TEF 40703 01/02/25		- 000\ (D 10 000

RESTORE NATIVE PLANTS AND WILDLIFE INC.

Employer identification number

	, -				
82-	3	55	91	81	

Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	N/A					
		(e) Transfer of gift				
	Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
		(e) Transfer of gift	. — — — — — — — — — — — — — — — — — — —			
	Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
				·		
	(e) Transfer of gift Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee		
			· — — — — — — — — — — — — — — — — — — —			