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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

► The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 2008

Inspection

A Fo	r the .	2008 са	lendar yea	r, or tax year begir		and ending 03-31-200)9		
B Ch	eck ıf a	pplicable	Please	C Name of organization National Council for				D Employer id	dentification number
☐ Add	Address change use IRS Improvement Inc label or Doing Business As							13-10853	
☐ Na	me cha	nge	print or type. See	Doing Business As		E lelephone i	Telephone number		
┌ Init	al retu	rn	Specific	Number and street	s not delivered to street addre	ess) Room/suit	(919) 941		
Г Теі	Termination FO Box 13318							G Gross recei	pts \$ 14,582,666
Amended return City or town, state or country, and ZIP + 4								-	
☐ Apr	olication	pending		Research Triangle P	Park, NC 277093318				
			F Nan	L ne and address of i	Principal Officer		Way =		
			ronald		r illicipal o liicei			his a group retur iates?	The for
				(13318	16 277002219				
Research Triangle Park, NC 277093318 I Tax-exempt status							1	all affiliates inclu	
		<u> </u>			1 4347(4)(1) 01 1	327	٦ ٠	No," attach a lis oup Exemption N	st See instructions)
) W	eb sit	e: F ww	w ncası org				H(c) Gro	rup Exemption N	diliber F
К Тур	e of org	janization	Corporat	ion trust associa	ntion other ►		L Year of F	ormation 1943	M State of legal domicile NC
								<u>.</u>	
Pa	rt I	Sum	mary						
				e organization's mi	ıssıon or most sıg	ınıfıcant actıvıtıes			
9		PROVI	DErofSCII	ENTIFIC RESEAR	CH TO THE FOR	EST PRODUCTS INDU	STRY TO AC	HIEVE ENVIRO	NMENTAL GOALS
e e									
Ë									
Governance			·			operations or disposed			
	3		_	_		t VI, line 1a)			19
Activities &	4					ng body (Part VI, line 1	b)		
Ē	5			nployees (Part V , I				5	102
ទ្ធ				olunteers (estimate				0 7-	
•						I, line 12, column (C) D-T, line 34		7a 7b	
	B	Wet am	elated busi	ness taxable incol	ne nom rom syc	7-1, IIIIe 34	Dr	ior Year	Current Year
	8	Contri	hutions and	d grants (Part VIII	line 1 h)			635,698	2,053,438
횰	9			revenue (Part VIII			14,411,010	12,327,962	
Rayent	10	-		·		, and 7d)	220,096	100,081	
æ	11			art VIII, column (/			12,454	81,802	
	12	Totalı	revenue—a	dd lines 8 through	11 (must equal P	ne	•	· · · · · · · · · · · · · · · · · · ·	
		12)						15,279,258	14,563,283
	13			ar amounts paid (P				1,309,952	1,576,216
	14		•	r for members (Pa	, , , , ,	•	_		0
88	15	Salario 10)	es, other co	ompensation, empl	oyee benefits (Pa	rt IX, column (A), lines	5-	8,648,115	9,605,382
<u>∳</u>	16a	Profes	sional fund	raising fees (Part 1	IX, column (A), lır			0	
Expenses	ь	(Total f	undraising exi	penses, Part IX, columi	n (D), line 25 ⁰)			
ш	17	,		(Part IX, column (A		, 11f-24f)		3,821,383	4,012,975
	18	Total	expenses—	add lines 13-17 (must equal Part I	X, line 25, column (A))		13,779,450	15,194,573
	19	Reven	ue less exp	enses Subtract li	ne 18 from line 1	2		1,499,808	-631,290
कुष							Begin	ning of Year	End of Year
90 gg	20	Total	assets (Par	t X, line 16)				11,164,832	9,779,917
Net Assets or Fund Balances	21	Totall	liabilities (F	Part X, line 26)				2,422,962	5,468,831
\$ E	22	Netas	sets or fun	d balances Subtra	act line 21 from lii	ne 20		8,741,870	4,311,086
	it II	Sian	ature Blo	ock				, ,	, ,
		Under p	enalties of pe	rjury, I declare that I h		eturn, including accompanying			
		L		correct, and complete	Declaration of prepar	er (other than officer) is base	ed on all inform I	ation of which prepa	arer has any knowledge
Plea Sign		**** Sign	*** ature of office	or .			201 Dat	0-02-15 e	
Her		'						-	
			ild yeske pres e or print nam						
		Dra				Date	Check If	Preparer's PTIN	V (See Gen Inst)
Paid		Preparer signature				- 415	self-	_ '	. (300 con mot)
	arer's	Firm's n	ame (or yours	s L Johnson Lambert	& Co IIP		empolyed 🕨		
Use		ıf self-er	mployed),					EIN Þ	
-	•	address,	and ZIP + 4	700 Spring Forest				Phone no 🕨	(919) 719-6400
M - ·	-h - T -			Raleigh, NC 276		Coo incharations			<u>`</u>
may :	шетК	uiscus د	s inis retu	ın witii tile prepare	ы эпомпарочеч (See instructions)			▼ Yes

Form 990 (2008) Part III Statement of Program Service Accomplishments (See the instructions.)

	Statement of Program Service Accomplishments (See the instructions.)
1	Briefly describe the organization's mission TO PROVIDE TECHNICAL INFORMATION AND SCIENTIFIC RESEARCH TO THE FOREST PRODUCTS INDUSTRY NEEDED TO ACHIEVE ENVIRONMENTAL GOALS AND PRINCIPLES
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O Did the organization cease conducting or make significant changes in how it conducts any program services?
	If "Yes," describe these changes on Schedule O
4	Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code) (Expenses \$ including grants of \$) (Revenue \$) Southern Regional Program - NCASI's Southern Regional Center (SRC) is a center for excellence in research on air quality management in the pulp & paper and building products industries. Research activities include (a) development of methods for measuring emissions from manufacturing processes, and (b) technical evaluation of options for controlling emissions from manufacturing processes. The SRC program also includes research on sustainable forest management and toxicology. SRC outreach activities include organization and execution of NCASI's annual Southern Regional Meeting. Clients served include environmental professionals in the forest products industry and government agencies. Recent products of the SRC program include. Sulfur Capture in Combination Bark Boilers - An Update Special Report No. 09-02. Emissions of Reduced Sulfur Compounds and Methane from Kraft Mill Wastewater Treatment Plants. Technical Bulletin No. 0956. Biodiversity Response to Stand Structural Features in Southern Pine Forests. A Literature Review. Technical Bulletin No. 0958.
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$) West Coast Regional Program - NCASI's West Coast Regional Center (WRC) focuses on environmental chemistry, climate change, and forest watershed management Research activities in the WRC program include (a) development and evaluation of methods for measuring chemicals in effluents from pulp and paper mills, (b) development of methods for estimating greenhouse gas emissions from manufacturing facilities in the forest products industry, and (c) field studies of the effects of forestry practices on aquatic ecosystems. WRC outreach activities include organization and execution of NCASI's annual West Coast Regional Meeting. Clients served include environmental professionals in the forest products industry and government agencies. Recent products of the WRC program include Water Profile of the United States Forest Products Industry. Technical Bulletin No. 0960 The Greenhouse Gas and Carbon Profile of the U. S. Forest Products Sector Special Report No. 08-05 Determination of the Anthraquinone Paper/Paperboard Simulated Sweat Partition Coefficient for the Estimation of Potential Dermal Contact Exposure. Special Report No. 08-03 NCASI Method AQ-S108 01 - Anthraquinone in Uncoated Papers and Market Pulps by Soxhlet Extraction and GC/MS. Technical Bulletin No. 0953
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$) Western Wildlife Program - NCAST's Western Wildlife Program (WWP) conducts research on wildlife ecology and management in forests of the western United States Much of the research is focused on conservation of northern spotted owls (a threatened species) and elk (an important game species). In addition, the WWP is conducting research on songbirds and other elements of biodiversity. Clients served include natural resource managers in the forest products industry and government agencies. Percent products of the WBC program public.
	government agencies. Recent products of the WRC program include. Fragmentation in the Boreal Forest and Possible Effects on Terrestrial Life. Technical Bulletin No. 0959 The Biological Basis for Forest Practices Rules for Retaining. Coarse Woody Debris in Managed Forests of the Pacific Northwest. Technical Bulletin No. 0954.
	(Expenses \$ including grants of \$) (Revenue \$)
4 e	Total program service expenses \$ Must equal Part IX Line 25 column (B)

Form **990** (2008)

art IV	Checklist of	Required	Schedules
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			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		No
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νo
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		
5	Section $501(c)(4)$, $501(c)(5)$, and $501(c)(6)$ organizations. Is the organization subject to the section $6033(e)$ notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any accounts where 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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, 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		No
10	Did the organization hold assets in term, permanent,or quasi-endowments? If "Yes," complete Schedule D, Part $\sqrt[4]{3}$	10		No
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII .	12	Yes	
13	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16	Yes	
17	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	17		Νo
18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		Νο
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J	23	Yes	
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 questions 24b-24d and complete Schedule K. If "No," go to question 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section $501(c)(3)$ and $501(c)(4)$ 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	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I	25b		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No

Part VI

Part IV Checklist of Required Schedules (Continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV	28a	Yes	
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV	28b		Νο
c	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV.	28c		Νo
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Νo
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νo
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Νo
36	501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5 percent of its activities through an entity that is not a related	37		No

Pai	Tt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal			
	of U.S. Information Returns. Enter -0- if not applicable			
	1a 32			
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
	1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	_		l <u>.</u> .
	gaming (gambling) winnings to prize winners?	1c		No
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax</i> Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this		.,	
h	return?	3a 3b	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		163	
'1 a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes	
b	If "Yes," enter the name of the foreign country CA			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
_	If "Yes," to 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited	- 36		
C	Tax Shelter Transaction?	5c		
6a	Did the organization solicit any contributions that were not tax deductible?	6a		No
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 provide goods or services in exchange for any quid pro quo contribution of \$75 or more?	7a		
ь	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	79		
	required?	7h		
8	Section $501(c)(3)$ and other sponsoring organizations maintaining donor advised funds and section $509(a)(3)$			
	supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the	8		
_	year?	 		 I
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the 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 10a			
Ь	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations Enter			
а	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	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
-	year 12b			

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Section A.	. Governing	Body and	Management		

					Yes	No				
	For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.									
1a	Enter the number of voting members of the governing body									
Ь	Enter the number of voting members that are independent	1b	18							
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2		Νο				
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co			3	Yes					
4	Did the organization make any significant changes to its organizational documents stilled? $\ \ .$	ince t	he prior Form 990 was	4		Νο				
5	Did the organization become aware during the year of a material diversion of the organization	anızat	on's assets?	5		Νo				
6	Does the organization have members or stockholders?			6	Yes					
7a	Does the organization have members, stockholders, or other persons who may elect governing body?		7a	Yes						
Ь	Are any decisions of the governing body subject to approval by members, stockhold	ers, o	rother persons?	7b		Νo				
8	Did the organization contemporaneously document the meetings held or written active year by the following	ons ur	ndertaken during the							
а	the governing body?			8a	Yes					
Ь	each committee with authority to act on behalf of the governing body?			8b	Yes					
9a	Does the organization have local chapters, branches, or affiliates?			9a		Νο				
b	If "Yes," does the organization have written policies and procedures governing the a affiliates, and branches to ensure their operations are consistent with those of the o			9b						
10	Was a copy of the Form 990 provided to the organization's governing body before it must describe in Schedule O the process, if any, the organization uses to review the			10	Yes					
11	· · · · · · · · · · · · · · · · · · ·									

Section B. Policies

			Yes	No
12a	Does the organization have a written conflict of interest policy? If "No", go to line 13 \cdot .	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision			
а	The organization's CEO, Executive Director, or top management official?	15a	Yes	
b	Other officers or key employees of the organization?	15b	Yes	
	Describe the process in Schedule O			
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		Νo
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

- 17 List the States with which a copy of this Form 990 is required to be filed
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply
 - ☐ own website ☐ another's website ☐ upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

Tammerah Garren 4815 emperor blvd caterbury hall durham, NC 27703 (919) 941-6400

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed

Check this box if the organization did not compensate any officer, director, trustee or key employee

- * List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid
- * 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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- * List all of the organization's **former** officers, key employees, or 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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

The check this box in the organization and i		Posit	(C) chec	:k al				(E)	(F)
(A) Name and Title	(B) Average hours per week	Individual Trustee or Chrector	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
							-			

Part VII Continued

				(tion that a			all			(E)		F)
	(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099-MISC)	amount compe fror organiz rel	mated of other onsation on the ation and ated ozations
1b	Total							 	2,578,1	34	0	725,473
1b 2	Total	ig those in 1									0	725,473
	Total number of individuals (includin	ig those in 1									0 Yes	
	Total number of individuals (includin	g those in 1 ►13 officer, direc	a) who	recei	ved	mor ey e	e thar	n \$1	O0,000 in reportal	ble	<u> </u>	
2	Total number of individuals (includin compensation from the organization) Did the organization list any former	g those in 1 13 officer, directle J for such is the sum of	a) who individu	ruste	ved e, k	mor ey e •	e thar	n \$1 /ee, •	or highest comper	nsated employee	Yes	No No
3	Total number of individuals (includin compensation from the organization) Did the organization list any former on line 1a? <i>If</i> "Yes," complete Schedu For any individual listed online 1a, is organization and related organization	officer, direct le J for such the sum officer the sum of according to the sum	a) who	ruste ual ble c 0,00	ved e, k omp 0? l	ey e ens f "Y fror	employ ation estage ation ation many	ee, and ompi	or highest comper other compensation lete Schedule J for s elated organization	nsated employee on from the uch	Yes	No No
3 4 5	Total number of individuals (including compensation from the organization) Did the organization list any former on line 1a? If "Yes," complete Schedus For any individual listed online 1a, is organization and related organization individual	officer, direct le J for such the sum of	a) who	ruste ual ble c 0,00	ved e, k omp 0? l	ey e ens f "Y fror	employ ation estage ation ation many	ee, and ompi	or highest comper other compensation lete Schedule J for s elated organization	nsated employee on from the uch	Yes 3 4 Yes	No No
3 4 5	Total number of individuals (including compensation from the organization) Did the organization list any former on line 1a? If "Yes," complete Schedus For any individual listed online 1a, is organization and related organization individual	officer, directle J for such the sum of the	a) who determined the composition of the compositio	ruste ual ble c 0,00 ensa	omp 0? I	ey e ens f "Y fror	employ ation (es," co	and sand	or highest comper or highest comper other compensation of the schedule J for selected organization or the schedule or the	nsated employee on from the uch on for services	Yes 3 4 Yes	No No
3 4 5	Total number of individuals (includin compensation from the organization) Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	officer, directle J for such the sum of the	a) who is tor or to individual reportations \$15	ruste ual ble c 0,00 ensa	omp 0? I	ey e ens f "Y fror	employ ation (es," co	and sand	or highest comper or highest comper other compensation of the schedule J for selected organization of the schedule organization or the schedule organization or the schedule organization or the schedule organization or the schedule or the sc	nsated employee on from the uch on for services	Yes 3 4 Yes 5	No No
3 4 5	Total number of individuals (includin compensation from the organization) Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	officer, directle J for such sthe sum of the	a) who is tor or to individual reportations \$15	ruste ual ble c 0,00 ensa	omp 0? I	ey e ens f "Y fror	employ ation (es," co	and sand	or highest comper or highest comper other compensation of the schedule J for selected organization of the schedule organization or the schedule organization or the schedule organization or the schedule organization or the schedule or the sc	nsated employee on from the uch on for services	Yes 3 4 Yes 5	No No
3 4 5	Total number of individuals (includin compensation from the organization) Did the organization list any former on line 1a? If "Yes," complete Schedu For any individual listed online 1a, is organization and related organization individual	officer, directle J for such sthe sum of the	a) who is tor or to individual reportations \$15	ruste ual ble c 0,00 ensa	omp 0? I	ey e ens f "Y fror	employ ation (es," co many erson	and sand	or highest comper or highest comper other compensation of the schedule J for selected organization of the schedule organization or the schedule organization or the schedule organization or the schedule organization or the schedule or the sc	nsated employee on from the uch on for services	Yes 3 4 Yes 5	No No

orm 99	
Part VIII	
V	

				(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC
	1a	Federated campaigns 1a	a		Revenue		512, 513, or 514
ants ints	ь	Membership dues					
ge. Mou	с	Fundraising events	0				
E a	d	Related organizations	20.006				
ا ا ا	e	Government grants (contributions) 16	602,549				
ution her si	f	All other contributions, gifts, grants, and similar amounts not included above	1,411,083				
Contributions, gifts, grants and other similar amounts	g	Noncash contributions included in					
್ ಹ	h	lines 1a-1f \$ Total (Add lines 1a-1f)		2,053,438			
			Business Code				
inua	2a	membership dues	900,099	12,279,113	12,279,113		
Бе	Ь	publication revenue	900,099	48,849	48,849		
93	С .		-				
<u>*</u>	d		-				
S C I	e f	All other program corvice revenue					
Program Serwce Revenue	g	All other program service revenue Total. Add lines 2a-2f	_				
		+ \$ 12,327,962					
	3	Investment income (including divother similar amounts)	·	100,081			100,081
	4	Income from investment of tax-exempt l	▶				
	5	Royalties					
		(i) Real	(II) Personal				
	6a	Gross Rents 30,180					
	ь	Less rental 19,383 expenses					
	С	Rental income 10,797 or (loss)					
	d	Net rental income or (loss)	<u> </u>	10,797		2,012	8,785
	7a	Gross amount from sales of	(II) O ther				
		assets other than inventory					
	b	Less cost or other basis and					
	С	sales expenses Gain or (loss)					
	d	Net gain or (loss)	. •				
	8a	Gross income from fundraising events (not including					
an		\$ of contributions reported on line					
Other Revenue		1c) See Part IV, line 18 Attach Schedule G if total exceeds					
ŗ.	_	\$15,000					
₹	b c	Less direct expensesb Net income or (loss) from fundrais					
0	9a	Gross income from gaming	<u> </u>				
		activities See part IV, line 19 Complete Schedule G if total					
		exceeds \$15,000					
		a					
	b c	Less direct expensesb Net income or (loss) from gaming	activities				
	10a	Gross sales of inventory, less					
		returns and allowances . a)				
	b	Less cost of goods sold b					
	С	Net income or (loss) from sales o Miscellaneous Revenue	Business Code				
	11a	other income	900,099	71,005	71,005		
	ь						
	с						
	d	All other revenue					
	e	Total. Add lines 11a-11d					
	12	Total Revenue. Add lines 1h, 2g,	\$ 71,005 3.4.5.6d.7d.	14,563,283	12,398,967	2,012	108,866
		8c, 9c, 10c, and 11e		,,	,,,-	_,-12	

Part IX Statement of Functional Expenses

A	Section 501(c)(3) and 501(c)(4) orgall other organizations must complete column (A) but are not re).
Do ı	not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	1,536,357			
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations and individuals outside the U.S. See Part IV, lines 15 and 16	39,859			
4	Benefits paid to or for members	,			
5	Compensation of current officers, directors, trustees, and key employees	2,284,655			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	5,615,380			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	369,835			
9	Other employee benefits	835,536			
10	Payroll taxes	499,976			
11	Fees for services (non-employees)				
а	Management				
b	Legal	19,327			
C	Accounting	164,325			
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	572,160			
12	Advertising and promotion				
13	Office expenses	359,455			
14	Information technology	223,729			
15	Royalties				
16	Occupancy	419,907			
17 18	Payments of travel or entertainment expenses for any Federal,	677,061			
10	state or local public officials	214.052			
19 20	Conferences, conventions and meetings	214,052 7,784			
21	Payments to affiliates	7,784			
22	Depreciation, depletion, and amortization	310,376			
23	Insurance	122,643			
24	Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)	122,013			
а	Bad debt expense	549,181			
b	Technical and safety eq	274,918			
c	dues and subscriptions	51,282			
d	miscellaneous expenses	24,272			
e	taxes	21,662			
f	All other expenses	841			
25	Total functional expenses. Add lines 1 through 24f	15,194,573			
26	Joint Costs. Check if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X	Balance	Sheet
	Dalalice	SHEEL

					(A)			B)
	1	Cook non interest hearing			Beginning of year 300	1	Endo	fyear 300
	2	Cash—non-interest-bearing			7,032,331	2		6,116,387
	3	Savings and temporary cash investments			7,032,331	3		0,110,507
	4		•		1,327,099			1,409,151
	-	Accounts receivable, net			1,327,099	4		1,409,151
	5	Receivables from current and former officers, directors, trustees, other related parties <i>Complete Part II of Schedule L</i>				5		
	6	Receivables from other disqualified persons (as defined under se persons described in section 4958(c)(3)(B) Complete Part II of S				6		
	7	Notes and loans receivable, net				7		
	8	Inventories for sale or use				8		
\$	9	Prepaid expenses and deferred charges			622,956	9		164,942
Assets	10a	Land, buildings, and equipment cost basis	_{10a}	2,846,658				
•		Lace programulated depresenting Complete Part I/I of	IUa	2,040,000				
	b	Less accumulated depreciation <i>Complete Part VI of Schedule D</i>	10b	1,196,319	1,739,785	10c		1,650,339
	11	Investments—publicly traded securities			416,309	11		415,246
	12	Investments—other securities See Part IV, line 11 <i>Complete Pail Schedule D</i>	t VII of			12		
	13	Investments—program-related See Part IV, line 11 Complete Pa of Schedule D .	rt VIII			13		
	14	Intangible assets				14		
	15	Other assets See Part IV, line 11 Complete Part IX of Schedule D			26,052	15		23,552
	16	Total assets. Add lines 1 through 15 (must equal line 34)			11,164,832	16		9,779,917
	17	Accounts payable and accrued expenses .			1,817,091	17		5,005,110
	18	Grants payable				18		
	19	Deferred revenue			355,125	19		318,750
	20	Tax-exempt bond liabilities				20		
S)	21	Escrow account liability Complete Part IV of Schedule D				21		
Liabilities	22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified						
<u>, E</u>		persons Complete Part II of Schedule L				22		
_	23	Secured mortgages and notes payable to unrelated third parties			250,746	23		144,971
	24	Unsecured notes and loans payable				24		
	25	Other liabilities Complete Part X of Schedule D				25		
	26	Total liabilities. Add lines 17 through 25			2,422,962	26		5,468,831
es —		Organizations that follow SFAS 117, check here ▶ $\overline{\wp}$ and complethrough 29, and lines 33 and 34.	ete line	s 27				
ğ	27	Unrestricted net assets			8,228,201	27		3,451,757
Balance	28	Temporarily restricted net assets			513,669	28		859,329
	29	Permanently restricted net assets			2.2,300	29		
Fund		Organizations that do not follow SFAS 117, check here 🕨 🦵 and	comple	ete				
٥	30	lines 30 through 34.				_		
ets	30	Capital stock or trust principal, or current funds				30		
Assets	31	Paid-in or capital surplus, or land, building or equipment fund.				31		
	32	Retained earnings, endowment, accumulated income, or other fur	us		0.744.070	32		4 244 222
Net	33	Total net assets or fund balances			8,741,870	-		4,311,086
	34	Total liabilities and net assets/fund balances			11,164,832	34		9,779,917
Pa	rt XI	Financial Statements and Reporting						
		<u> </u>					Yes	No
4	۸	ounting method used to prepare the Form 990 Cash V	1				+	

Dart YT	Financial	Statements	and Reporting

				i
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
ь	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
С	If "Yes" to lines 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	Yes	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
ь	If "Yes," did the organization undergo the required audit or audits?	3b		

Software ID: Software Version:

EIN: 13-1085344

Name: National Council for Air and Stream

Improvement Inc

Form 990, Part VII - Section Aaa

Form 990, Part VII - Section Aaa	1									
			tion ((C) ion (check all inat apply) (E)		(D)	(E)	(F)		
(A) Name and Title	(B) Average hours per week	Individual Trustee or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	Reportable compensation from related organizations (W- 2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
jim BO WeN,DIRECTOR	1 00	Х						0	0	0
ROGER BREAR , DIRECTOR	1 00	Х						0	0	0
MICHAEL COVEY , DIRECTOR	1 00	Х						0	0	0
JOHN CROWE , DIRECTOR	1 00	Х						0	0	0
JOHN FARACI, DIRECTOR	1 00	X						0	0	0
DANIEL FULTON , DIRECTOR	1 00	X						0	0	0
GEORGE GLATFELTER , DIRECTOR	1 00	X						0	0	0
JAMES HANNAN , DIRECTOR	1 00	Х						0	0	0
THOMAS HOWATT , DIRECTOR	1 00	Х						0	0	0
TERRY HUSKEY , DIRECTOR	1 00	Х						0	0	0
PATRICK MALEY , DIRECTOR	1 00	Х						0	0	0
DAVID PaTERSON , DIRECTOR	1 00	X						0	0	0
THOMAS STEPHENS , DIRECTOR	1 00	Х						0	0	0
MARK SUWYN , DIRECTOR	1 00	X						0	0	0
LEE THOMAS , DIRECTOR	1 00	X						0	0	0
SCOTT WOCHOS , DIRECTOR	1 00	Х						0	0	0
RONALD YESKE , PRESIDENT	40 00			Х				390,377	0	67,055
PATRICK MOORE , CHAIRMAN	1 00			Х				0	0	0
RICHARD FROST , VICE CHAIRMAN	1 00			Х				0	0	0
JOHN LUKE JR , TREASURER	1 00			Х				0	0	0
ROBERT FISHER , Vp-Bio & CHEM ASSESSMENt	40 00				х			186,722	0	57,383
ASHOK JAIN , REGIONAL MANAGER	40 00				Х			190,851	0	62,384
ALAN LUCIER , SENIOR VICE PRESIDENT	40 00				х			243,307	0	66,912
REID MINER , vp-sustainable MANUFACTU	40 00				х			243,053	0	62,781
JOHN PINKERTON , vp - Air QUALITY	40 00				Х			248,150	0	62,400
KRISTIN VICE , Vp – canadian OPERATIONS	40 00				х			176,435	0	0
PAUL WIEGAND , Vp - Water QUALITY	40 00				Х			170,854	0	55,994
JAY UNWIN , NCASI FELLOW	40 00					Х		168,409	0	62,376
LARRY IRWIN , PRIN RESEARCH SCIENTIST	40 00					Х		146,792	0	57,301
LARRY LAFLEUR , NCASI FELLOW	40 00					Х		141,183	0	57,405

Form 990, Part VII - Section Aaa

orm 550, rure vii Section At	1 U									
		(C) Position (check all that apply)							(5)	(F)
(A) Name and Title	(B) A verage hours per week	Individual Trustae or Director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
PAUL VAN DEUSEN , PRIN RESEARCH SCIENTIST	40 00					х		131,645	0	55,070
t bentley wigley , program manager	40 00					Х		140,356	0	58,412

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Supplemental Financial Statements

Employer identification number Name of the organization National Council for Air and Stream

provement Inc		13-1085344
organizations Maintaining Donor Acorganization answered "Yes" to Form 99		Funds or Accounts. Complete if the
organization answered Tes to Form 95	(a) Donor advised funds	(b) Funds and other accounts
Total number at end of year		
Aggregate Contributions to (during year)		
Aggregate Grants from (during year)		
Aggregate value at end of year		
Did the organization inform all donors and donor advi funds are the organization's property, subject to the	_	onor advised Yes No
Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben impermissible private benefit?	5 5	•
rt II Conservation Easements. Complete	ıf the organization answered "Yes"	to Form 990, Part IV, line 7.
Purpose(s) of conservation easements held by the o Preservation of land for public use (e.g., recreate Protection of natural habitat Preservation of open space	ion or pleasure)	an historically importantly land area certified historic structure
Complete lines 2a-2d if the organization held a qual on the last day of the tax year	ified conservation contribution in the for	rm of a conservation easement
,,,		Held at the End of the Ye
Total number of conservation easements		2a
Total acreage restricted by conservation easement	ts	2b
Number of conservation easements on a certified h	ıstorıc structure ıncluded ın (a)	2c
Number of conservation easements included in (c)	acquired after 8/17/06	2d
Number of conservation easements modified, transfe	erred, released, extinguished, or termina	ated by the organization during
the taxable year 🕨	, , , , , , , , , , , , , , , , , , ,	
Number of states where property subject to conserva	ation easement is located by	
Does the organization have a written policy regarding enforcement of the conservation easements it holds	g the periodic monitoring, inspection, vio	olations, and Yes No
Staff or volunteer hours devoted to monitoring, inspe	ecting and enforcing easements during t	he year ►
A mount of expenses incurred in monitoring, inspecti	ng, and enforcing easements during the	year ► \$
Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of s	ection Yes No
In Part XIV, describe how the organization reports c balance sheet, and include, if applicable, the text of t the organization's accounting for conservation easer	the footnote to the organization's financi	
t III Organizations Maintaining Collection Complete if the organization answered		s, or Other Similar Assets.
If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fir	5 116, not to report in its revenue stater I for public exhibition, education or resea	arch in furtherance of public service,
If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research	,
(i) Revenues included in Form 990, Part VIII, line 1		► \$
(ii) Assets included in Form 990, Part X		▶ -\$
If the organization received or held works of art, hist following amounts required to be reported under SFA		!
Revenues included in Form 990, Part VIII, line 1		► \$
Assets included in Form 990. Part X		

Part	Organizations Maintaining Collection	is of Art, His	tori	cal Treasu	res, or Othe	r Similar Ass	ets (c	ontinued)
3	Using the organization's accession and other records items (check all that apply)	, check any of th	ne fol	lowing that are	e a significant ι	ise of its collectio	n	
а	Public exhibition	d	Γ	Loan or exch	ange programs			
ь	Scholarly research	e	Γ	Other				
c	Preservation for future generations							
4	Provide a description of the organization's collections Part XIV	and explain ho	w the	y further the o	rganızatıon's ex	kempt purpose in		
5	During the year, did the organization solicit or receive assets to be sold to raise funds rather than to be mail						Yes	Г No
Par	Trust, Escrow and Custodial Arrange Part IV, line 9, or reported an amount or				nızatıon answ	ered "Yes" to F	orm 9	90,
1a	Is the organization an agent, trustee, custodian or oth included on Form 990, Part X?	ner intermediary	forc	ontributions o	r other assets		Yes	┌ No
b	If "Yes," explain why in Part XIV and complete the fol	lowing table				T		
						A mo	unt	
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 amount on Form 990,	Part X, line 21?					Yes	No
	If "Yes," explain the arrangement in Part XIV							
Pa	rt V Endowment Funds. Complete if the org						-151	' DI-
4_		ent Year (b) Prior	rear (c) i w	Years Back (d)	Three Years Back (e)rour r	ears back
1a	Beginning of year balance							
b	Contributions							
с	Investment earnings or losses							
d	Grants or scholarships							
е	Other expenditures for facilities and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the year end bala	ance held as						
а	Board designated or quasi-endowment 🕨							
b	Permanent endowment 🕨							
С	Term endowment ▶							
3a	Are there endowment funds not in the possession of t	he organization	that	are held and a	dmınıstered for	the		
	organization by						Yes	No
	(i) unrelated organizations					3a(i)		<u> </u>
_	(ii) related organizations					3a(ii)		<u> </u>
	If "Yes" to 3a(II), are the related organizations listed	•				<u>3b</u>		<u> </u>
4 Doz	Describe in Part XIV the intended uses of the organiz t VI Investments—Land, Buildings, and E				rt V line 10			
i Cli	t VI Investments—Land, Buildings, and E	quipment. S		<u> </u>		I		
	Description of investment			Cost or other (investment)	(b)Cost or other basis (other)	(c) Depreciation	(d) Bo	ook value
1a	Land			220,471				220,471
b	Buildings			975,126		145,636		829,490
c	Leasehold improvements			82,938		46,515		36,423
d I	Equipment			1,568,123		1,004,168		563,955
е (Other	<u> </u>						
Tota	I. Add lines 1a-1e (Column (d) should equal Form 990, F	Part X, column (B,), line	10(c).)	<u> </u>			1,650,339
						Schedule D (Form 9	90) 2008

Part VII	Investments-Other Securities. See	Form 990, Part X, line 1	2.	
	(a) Description of security or cateory (including name of security)	(b)Book value		d of valuation ·year market value
Financial d	erivatives and other financial products			
	eld equity interests			
Other				
Total. (Colu	mn (b) should equal Form 990, Part X, col (B) line 12) 🕨			
Down VIII	Investments Duesus Polated Co	a Farm OOO Dart V June	12	
Part VIII	Investments—Program Related. Se			d of valuation
	(a) Description of investment type	(b) Book value		year market value
Total (Colu	mn (b) should equal Form 990, Part X, col (B) line 13)			
Part IX		ne 15.		
	(a) Descri			(b) Book value
Total. (Colu	ımn (b) should equal Form 990, Part X, col.(B) line .	15.)		
	Other Liabilities. See Form 990, Part 3			
	(a) Description of Liability	(b) A mount		
Federal Inc	come Taxes			
]	
]	
]	
			1	
			1	
			1	
-			1	
			1	
Total. (Colum	mn (b) should equal Form 990, Part X, col (B) line 25) 🕨		1	
,,	· · · · · · · · · · · · · · · · · · ·	1		

	Total revenue (Form 990, Part VIII, column (A), line 12)	1	14,563,28.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	15,194,57
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-631,290
4	Net unrealized gains (losses) on investments	4	-36,841
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-3,762,65
9	Total adjustments (net) Add lines 4 - 8	9	-3,799,494
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-4,430,784
Par	Reconciliation of Revenue per Audited Financial Statements With Revenue	er Retur	n
1	Total revenue, gains, and other support per audited financial statements	1	14,200,163
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	-382,50
3	Subtract line 2e from line 1	3	14,582,666
4	A mounts 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 XIV)		
С	Add lines 4a and 4b	4c	-19,383
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	14,563,283
•	Reconciliation of Expenses per Audited Financial Statements With Expense		
1	Total expenses and losses per audited financial statements	1	15,323,36
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	-	
Ь	Prior year adjustments	-	
с	Losses reported on Form 990, Part IX, line 25		
d	Other (Describe in Part XIV)		120 70
e	Add lines 2a through 2d	2e	128,79
3	Subtract line 2e from line 1	3	15,194,57
4	A mounts 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 XIV)		
			(
c 5	Add lines 4a and 4b	4c 5	15,194,57

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Ident if ier	Return Reference	Explanation
Part XI, Line 8 - Other Adjustments		unrealized loss on currency exchange -109409 unrecognized net periodic pension benefit/cost -3653242
Part XII, Line 2d - Other Adjustments		unrealized loss -36843 change in temporary net asset - 345660
Part XII, Line 4b - Other Adjustments		rental property expenses -19383
Part XIII, Line 2d - Other Adjustments		rental property expenses 19383 unrealized loss on currency exchange 109409

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As Filed Data -

DLN: 93493046015500

2008

OMB No 1545-0047

(Form 990) Department of the Treasury

Internal Revenue Service

SCHEDULE F

▶ Attach to Form 990. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

Statement of Activities Outside the United States

Open to Public **Inspection**

	ne of the organization	h				Employer ide	entification number	
	ional Council for Air and S rovement Inc	tream				13-108534	4	
	art I General Info	rmation on Ac 990, Part IV, Irr		ide the United States	s. Complete			
1	For grantmakers. Do assistance, the grant	es the organiza ees' eligibility fo	tion maintain r or the grants or	records to substantiate assistance, and the se	lection critei	rıa used to a	ward	
2	2 For grant makers. Describe in Part IV the organization's procedures for monitoring the use of grant funds outside the United States							
3	Activites per Region (U	se Schedule F-1	(Form 990) ıf ad	ditional space is needed)				
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	is a progra describe sp	cy listed in (d) am service, ecific type of) in region	(f) Total expenditures in	
nort	h america	1	4	program services, grant making	enviromenta specific to th forest produc	ne canadian	786,216	
Take	ala s	1	4	.[786,216	

Totals .

1 (a) Name o organizatio		(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
	 north america	Preparation For Caribou & Nutrition Research Initiative in Canada	10,629				
	north america	QA/QC of FPAC Pulp & Paper Energy Survey Data for 2008	8,858	check			
	north america	Literature Review on Retained Structures in Boreal Forest	13,286	check			

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) if additional space is needed.										
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non- cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)			
Ungulate Nutrition Literature Database Development (Caribou)	north america	1	7,086	check						
							1			

Schedule F (Form 990) 2008

Identifier	ReturnReference	ired in Part I, line 2, and any other additional information. Explanation
Procedure for Monitoring Grants Outside the U S	ReturnReference	Schedule F, Part I, Line 2 We require that grant recipients prepared technical proposals and sign agreements describing project scope, schedule, budget and deliverables For longer-term projects, we also require periodic progress reports to demonstrate that project is proceeding toward deliverables Continuation of funding is contingent on demonstration of progress
Schedule F, Part IV	Other Information	Schedule F, Part I, Line 3 NCASI-Canada, a regional office in Canada, requires separate accounting of revenues and expenditures because of currency implications and different regulations and statutes in the country the finances for this operation are incorporated into the total audited financial statements for the organization at the end of the fiscal year

Software ID:

Software Version:

EIN: 13-1085344

Name: National Council for Air and Stream

Improvement Inc

Form 990 Schedule F Part II - Grants and Other Assistance to Organizations or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non- cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		north america	Preparation For Caribou & Nutrition Research Initiative in Canada	10,629	check			
		north america	QA/QC of FPAC Pulp & Paper Energy Survey Data for 2008	8,858	check			
		north america	Literature Review on Retained Structures in Boreal Forest	13,286	check			

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Grants and Other Assistance to Organizations,

OMB No 1545-0047

2008

DLN: 93493046015500

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

Complete if the organization answered "Yes," on Form 990, Part IV, lines 21 or 22. Attach to Form 990.

Governments and Individuals in the U.S.

Open to Public Inspect ion

Name of the organization						Employer identi	fication number
National Council for Air and Str Improvement Inc	eam					13-1085344	
	nation on Gra	nts and Assistance	e				
Does the organization ma the selection criteria user Describe in Part IV the organization	intain records to s d to award the grai rganization's proce	ubstantiate the amoun nts or assistance? edures for monitoring th	t of the grants or assista ne use of grant funds in t	he United States			
Form 990, Part I Part IV and Scho	IV, line 21 for ar edule I-1 if addi	ny recipient that rec tional space is	eived more than \$5,0	00. Check this box	tes. Complete if the of the first no one recipient rec	ceived more than \$5,	
1(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	1 (3)	(h) Purpose of grant or assistance
See Additional Data Table							
2 Enter total number of sec organizations					•		23
3 Enter total number of other							▶ 2
For Paperwork Reduction Act Not	ice, see the Instruct	tions for Form 990.		Cat No 500551	P	Sc	hedule I (Form 990) 2008

Part III	Grants and Other Assistance to Individuals in the United States	. Complete if the organiza	ation answered "Y	Yes" on Form 990.	Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.				· ··· · · · · · · · · · · · · · · · ·

			-		
(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

See Additional Data Table

See Additional Data Table	rec Multional Butta Fubic								
Ident if ier	Return Reference	Explanation							
Procedure for Monitoring Grants in the U S	,	Schedule I, Part I, Line 2 We require that grant recipients prepared technical proposals and sign agreements describing project scope, schedule, budget and deliverables For longer-term projects, we also require periodic progress reports to demonstrate that project is proceedling toward deliverables. Continuation of funding is contingent on demonstration of progress.							

Software ID:

Software Version: EIN: 13-1085344

Name: National Council for Air and Stream

Improvement Inc

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

1 01111 330/30110uule 2/1 u	,			o ana organizatio			
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Auburn University301 Samford Hall auburn,AL 36849	63-6000724	501(c)(3)	10,000				Agenda 2020 Wood Production Systems
Ichauway Incroute 2 box 2324 newton, GA 39870	58-1824778		11,620				Study of Forest Bats
Indiana University of Pennsylvania1090 south drive indiana,PA 15701	57-1175778	501(c)(3)	11,828				Cerulean Warbler Study
IUP Research Institute1179 grant street indiana,PA 15701	57-1175778	501(c)(3)	14,579				Cerulean Warbler Study
Louisiana State University Iouisiana state university baton rouge, LA 70803	72-6000848	501(c)(3)	29,722				Dissolved Oxygen Study
michigan state university 301 administration building east lansing, MI 48824	38-6005984	501(c)(3)	148,769				Biodiversity Study
michigan tech university 1400 townsend drive houghton,MI 48824	38-1554664	501(c)(3)	10,000				Support of National Institute for Applied Carbon Science
mississippi state university box 9690 mississippi state, MS 39762	64-6000819	501(c)(3)	138,186				Forest Study, Biodiversity study, Headwater study
oregon state universitypo box 1086 corvallis, OR 97339	48-1278540	501(c)(3)	277,716				Streamflow study, Alsea Watershed Study, Biodiversity Study
regents of the university of minnesota200 oak street se suite 450 minneapolis, MN 55455	41-6007513	501(c)(3)	10,000				Snowshoe Hares & Lynx Response to Alternative Forest Harvesting across Multiple Spatial Scales

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
the nature conservatory 1510 e fort lowell tuscon, AZ 85719	53-0242652	501(c)(3)	60,000				Cerulean Warbler Study	
the ohio state research foundation1960 kenny road columbus,OH 43210	31-6401599	501(c)(3)	46,642				Cerulean Warbler Study	
tiaerbox t0410 stephensville,TX 76402	75-6001870	501(c)(3)	17,500				Modeling Hydrology Water Quality & Herbicides APEX Model Project for Dry Creek	
uga research foundation 475 north lumpkin street athens, GA 30602	58-1353149	501(c)(3)	110,260				Bat Landscape Study, Biodiversity study, Roundwood Wet Storage Task	
university of floridag018 mccarty hall-d po box 110110 gainsville, FL 32611	59-6002052	501(c)(3)	20,000				Ecosystem Recovery in North Florida Bottomland	
university of kentucky researchpo box 93113 cleveland, OH 44193	61-6033693	501(c)(3)	40,000				Biodiversity Response to Intensive Forest Management	
university of tennessee morgan hall room 103 knoxville,TN 37996	62-6001636	501(c)(3)	37,321				Sustainable Forestry Initiative Performance Measure 8 4, Cerulean Warbler Study	
university of washington 12455 collections drive chicago, IL 60693	91-6001537	501(c)(3)	102,109				Vegetation study, biodiversity study, Douglas Fir study, soil study, Productivity Gap Analysis	
university of wisconsin - stevens point2100 main street stevens point, WI 54481	39-1805963	501(c)(3)	60,624				Wildlife Responses to Residual Tree Retention in Red Pine Forests Across the Lake States Region	
usda forest servicepo box 60000 san francisco, CA 94160			52,717				Cerulean Warbler Study, USFS Nitrogen Fate Modeling Project, Salmon habitat study	

Form 990,Schedule 1,	Part II, Gran	ts and Other Ass	sistance to Gove	ernments and O	rganizations in t	ne United States	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
virginia polytechnic institute1880 pratt drive suite 2006 blacksburg,VA 24060	56-6000756	501(c)(3)	92,332				Agenda 2020 Wood Production Systems, Mobile- Tensaw Hardwood Project, Virginia Skid Trail Closure
watershed geodynamics 14145 97th avenue ne bothell, WA 98011			13,320				Road Erosion Model Validation
west virginia researchpo box 6002 morgantown, WV 26506	55-0665758	501(c)(3)	29,276				Cerulean Warbler Study

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As Filed Data -

DLN: 93493046015500

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

2008 OMB No 1545-0047

Open to Public Inspection

National Council for Air and Stream Improvement Inc 13-1085344 **Questions Regarding Compensation** Νo Yes Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First class or charter travel Housing allowance or residence for personal use Payments for business use of personal residence Travel for companions Health or social club dues or initiation fees Tax idemnification and gross-up payments Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If line 1a is checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain **1**b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a Receive a severance payment or change of control payment? Νo Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Yes 4c Νo Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III 501(c)(3) and 501(c)(4) organizations only must complete lines 5-8. For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of a The organization? 5a 5b Any related organization? If "Yes," to line 5a or 5b, describe in Part III For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of

For persons listed in form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed

Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe

If "Yes," to line 6a or 6b, describe in Part III

payments not described in lines 5 and 6? If "Yes," describe in Part III

The organization?

ın Part III

Any related organization?

6a

6b

7

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of		MISC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	
RONALD YESKE	(ı) (ıı)	390,377			51,000	16,055	457,432	
ROBERT FISHER	(ı) (ıı)	186,722			46,000	11,383	244,105	
ASHOKJAIN	(ı) (ıı)	190,851			51,000	11,384	253,235	
ALAN LUCIER	(ı) (ıı)	243,307			51,000	15,912	310,219	
REID MINER	(ı) (ıı)	243,053			51,000	11,781	305,834	
JOHN PINKERTON	(ı) (ıı)	248,150			51,000	11,400	310,550	
KRISTIN VICE	(ı) (ıı)	161,182		15,253			176,435	
PAUL WIEGAND	(ı) (ıı)	170,854			40,101	15,893	226,848	
NIWNU YAL	(ı) (ıı)	168,409			51,000	11,376	230,785	
LARRY IRWIN	(ı) (ıı)	146,792			46,000	11,301	204,093	
LARRY LAFLEUR	(ı) (ıı)	141,183			51,000	6,405	198,588	
PAUL VAN DEUSEN	(ı) (ıı)	131,645			39,291	15,779	186,715	
t bentley wigley	(ı) (ıı)	140,356			46,321	12,091	198,768	
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
	Part I, Line 4a	RONALD YESKE PARTICIPATED IN A SERP RETIREMENT FUND WITH THE FOLLOWING BALANCES INVESTMENTS \$35,780 LIFE INSURANCE \$ 4,720
-		
·		

Schedule J (Form 990) 2008

(F) Compensation

Software ID: Software Version:

EIN: 13-1085344

Name: National Council for Air and Stream

Improvement Inc

Form 990, Schedule J, Part 1	I - Officers, Directors, Trustees, Key Employees, and	l Highest Compens	sated Employees	
(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation	(C) Deferred	(D) Nontaxable	(E) Total of columns

	I INCANTIVA I		(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
RONALD YESKE (I				51,000	16,055	457,432	
ROBERT FISHER (I				46,000	11,383	244,105	
ASHOK JAIN (I				51,000	11,384	253,235	
ALAN LUCIER (I				51,000	15,912	310,219	
REID MINER (I				51,000	11,781	305,834	
JOHN PINKERTON (I				51,000	11,400	310,550	
KRISTIN VICE (I			15,253			176,435	
PAUL WIEGAND (I				40,101	15,893	226,848	
JAY UNWIN (I				51,000	11,376	230,785	
LARRY IRWIN (I				46,000	11,301	204,093	
LARRY LAFLEUR (I				51,000	6,405	198,588	
PAUL VAN DEUSEN (I				39,291	15,779	186,715	
t bentley wigley (i	140,356			46,321	12,091	198,768	

DLN: 93493046015500

Employer identification number

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury

► Attach to Form 990 or Form 990-EZ. ► To be completed by organizations that answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c,

Transactions with Interested Persons

or Form 990-EZ, Part V lines 38b or 40b. Internal Revenue Service Name of the organization National Council for Air and Stream Improvement Inc

Improver	nent Inc					13	3-108	5344	1			
Part I	Excess Benefit Transact To be completed by organization									., Par	t V , lıne	40b
1	(a) Name of disqualifie	d person	(b) Description of transaction						(c) Cor	rected?		
	(a) name or dioquamic		(b) Bescription of dails								Yes	No
	ter the amount of tax imposed on the cities of the cities			or disqualified pers			ear ui	nder •	\$			
3 Ent	ter the amount of tax, if any, on lir	ie 2, above, reimburse	d by t	the organization .				•	\$			
Part I	Loans to and/or From To be completed by organiza			on Form 990, Part	IV, lı	ine 26, or Fo	orm 9	90-E	Z, Part	V, lır	ne 38a	
(a) N	lame of interested person and purpose	(b) Loan to or from the organization?	(c)O riginal principal amount		(d) Balance due		(e) In default?		(f) Approved by board o		r agree	Vritten ement?
		To From	1				Yes	No	Yes	No	Yes	No
												+-
 Total				▶ \$								
Part II		enefitting Interes	sted	Persons	90.	Part IV. lın	e 27					
(a) Name of interested person	(b)Relationship	betv	veen interested per organization					nt or ty	pe of	assista	ance
Part I	Business Transactions To be completed by organ				90,	Part IV, lın	e 28	a, 28	b, or i	28c.		
(a) Name of interested person	(b) Relationship between intereste person and the	o e d	(c) A mount of transaction	nt of (d) Des		1) Description of transaction					ation's
		organization									Yes	No
daniel s t	ruiton	director		560,7	/00	support of a	dditio	nal re	esearch	า		Νo

projects that are not covered by

membership dues

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

▶ Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

2008

Open to Public

Name of the organization National Council for Air and Stream Improvement Inc Employer identification number

13-1085344

ldentifier	Return Reference	Explanation
Form 990, Part III, line 2	New Program Services	Life Cycle Assessment - It is a widely used approach to understanding the complete environmental impacts of a product or product system. It examines the impacts of all of the stages of making, distributing, using and reusing, and disposing of a product. Our industry's customers and stakeholders are very interesting in understanding how forest products impact the environment. We are engaged in a series of studies to address this interest.

ldentifier	Return Reference	Explanation
Form 990, Part III, Ime 4d	Other Program Services	Eastern Wildlife, statistical model development, southern aquatic biology, aquatic biology, sustainable forestry, northern center (solid waste)

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 3		The executive committee may act on behalf of the board of governors. The Executive Committee is a smaller subset of 12 members of the Board of Governors which can act on behalf of the Board of Governors. The scope of authority of the Executive Committee is not limited.

ldentifier	Return Reference	Explanation			
Form 990, Part VI, Section A, line 6		NCASI has three classes of Membership Regular Membership applies to Member Companies with certain manufacturing operations or industrial timberlands in the United States Canadian Membership applies to Member Companies with manufacturing operations or timberlands in Canada International Membersip applies to companies with manufacturing operations or industrial timberlands in other countries			

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		According to the organization by-law's, regular and canadian membership provides for the right to elect members of the governing body

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		The completed form 990 is reviewed by members of the governing body prior to filing the return with the IRS

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		The President is required under the conflict of interest policy to monitor compliance with that policy and identify potential violations to the governing board on a timely basis

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		Annually, at the direction of the Executive Committee of the Board, the President compiles a Compensation Report that documents (i) the results of published surveys of compensation of individuals in selected positions of responsibility in comparable non-profit organizations, and (ii) the executive and key employee compensation reported in the Form 990 reports of other, similar or releated, non-profit organizations. This Compensation report is provided to the Executive Committee, together with any requested references cited in the report, prior to the annual compensation setting process conducted by the Executive Committee of the Board. In addition, A salary survey is conducted of a select number of our member companies to determine the annual average salary increase budgeted or projected for the coming year. This data is used to determine the overall salary increase amount to be presented to and approved by the Board, if any. Individual salary increases are determined based on pre-established goals and performance expectations outlined in individual job descriptions.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		The conflict of interest policy, w histleblow er policy, and records retention policy of the governing Board are published on the public sector of NCASI w ebsite. These policies and other governing documents are provided to the public upon request. NCASI's audited financial statements are provided to the membership upon request, but are not available to the general public.

Identifier	Return Reference	Explanation
		Form 990, Part XI, Line 2c The Audit Committee of the Board was empowered in 2008 by the governing Board to oversee the audit, the selection of an independent auditor, and the review of the audited financial statements before they are finalized

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

Cat No 51056K

Schedule O (Form 990) 2008

DLN: 93493046015500

OMB No 1545-0047

2008

Open to Public Inspection

Employer identification number

SCHEDULE R (Form 990)

Name of the organization

Department of the Treasury Internal Revenue Service

Attach to Form 990. To be completed by organizations that answerd "Yes" to Form 990, Part IV, lines 33, 34, 35, 36, or 37. ► See separate instructions.

Related Organizations and Unrelated Partnerships

National Council for Air and Stream Improvement Inc				13-1085344	
Part I Identification of Disregarded Entities					
(A) Name, address, and EIN of disregarded entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Total income	(E) End-of-year assets	(F) Direct controlling entity
Part II Identification of Related Tax-Exempt Organizat	ions				
(A) Name, address, and EIN of related organization	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Exempt Code section	Public charity sta (if section 501(c))	(F) tus Direct controlling (3)) entity
ncasi foundation po box 13318 research triangle park, NC27709 31-1745612	publicly supported foundation	NC	501(c)(3)	9	N/A
					- · · · - · - · - · - · - · - · - ·

(A) Name, address, and EIN of related organization		(B) nary activity	(C) Legal domicile (state or foreign country)	(D) Direct controlling entity	incom	(E) lominant le(related, lestment, related)	Share	(F) e of total income	(G) Share of end-of- year assets	(H Disprop allocat	l) ortionate tions?	(I) Code V—UBI amount on Box 20 of K-1	Gene mana part	agıng
										Yes	No		Yes	No
Part IV Identification of R	Related	l Organizations	Taxable as	a Corporation	ı or Tr	ust								
(A) Name, address, and EIN of related organization		(B) Primary activity		(C) Legal domicile (state or foreign country)		(D) Direct contro	olling	(E) Type of entity (C corp, S corp or trust)	(F) Share of total income	end	(G) hare of l-of-yea assets	(H) Percentage r ownership		

Part V	Transactions with Related Organizations
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Note. Complete line 1 if any entity is listed in Parts II, III or IV		Y	es No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a	1	No
b Gift, grant, or capital contribution to other organization(s)	1b	•	No
c Gift, grant, or capital contribution from other organization(s)	1c	Y	25
d Loans or loan guarantees to or for other organization(s)	1d		No
e Loans or loan guarantees by other organization(s)	1e	:	No
f Sale of assets to other organization(s)	1f		No
g Purchase of assets from other organization(s)	1g	ı	No
h Exchange of assets	1h		No
i Lease of facilities, equipment, or other assets to other organization(s)	1i		No
j Lease of facilities, equipment, or other assets from other organization(s)		+	No
k Performance of services or membership or fundraising solicitations for other organization(s)	1k		No
l Performance of services or membership or fundraising solicitations by other organization(s)	11		No
m Sharing of facilities, equipment, mailing lists, or other assets	1n	n Y	es
n Sharing of paid employees	1n	Y	ès
• Reimbursement paid to other organization for expenses	10	,	No
p Reimbursement paid by other organization for expenses	1p		No
q O ther transfer of cash or property to other organization(s)	1q	1	No
r Other transfer of cash or property from other organization(s)	1r		No

	(A) Name of other organization(s)	(B) Transaction type(a-r)	(C) Amount Involved
(1)	ncası foundation	С	12,807
(2)	ncası foundation	М	0
(3)	ncası foundation	N	0
(4)			
(5)			
(6)			

Part VI Unrelated Organizations Taxable as a Partnership

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

									_											
(A) Name, address, and EIN of entity	(B) Primary activity	(C) Legal domicile (state or foreign country)	(D) Are all partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		partners section 501(c)(3) organizations?		(E) Share of end-of-year assets			(G) Code V—UBI amount on Box 20 of K-1	(H) General o managing partner?)
			Yes	No		Yes	No		Yes	No										
			•	•		•		Cabadul	D / Form											