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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)

2009

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

For the 2009 calendar year, or tax year beginning 2009, and ending

B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Termination ☐ Amended return ☐ Application pending		C Please use IRS label or print or type. See specific instructions. ENVIRONMENTAL HEALTH FUND, INC. 41 OAKVIEW TERRACE JAMAICA PLAIN, MA 02130		D Employer identification number 04-3429794
				E Telephone number 617-524-6018
				G Gross receipts \$ 2,115,841.
		F Name and address of principal officer: GARY H. COHEN SAME AS C ABOVE		H(a) Is this a group return for affiliates? ☐ Yes ☒ No H(b) Are all affiliates included? ☐ Yes ☒ No If "No," attach a list (see instructions)
I Tax-exempt status ☒ 501(c) (3) (insert no.) ☐ 4947(a)(1) or ☐ 527		J Website: WWW.ENVIRONMENTALHEALTHFUND.ORG		
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other		L Year of formation: 1998		M State of legal domicile: MA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: <u>DEVELOP, IMPLEMENT AND SUPPORT EDUCATIONAL RESEARCH EFFORTS FOR THE PROMOTION OF ENVIRONMENTAL, HUMAN AND ECOLOGICAL HEALTH</u>				
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its assets.				
	3	Number of voting members of the governing body (Part VI, line 1a)	3		
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4		
	5	Total number of employees (Part V, line 2a)	5		
	6	Total number of volunteers (estimate if necessary)	6		
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.	
	b Net unrelated business taxable income from Form 990-T, line 34	7b	0.		
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year	
	9	Program service revenue (Part VIII, line 2g)	709,593.	2,077,408.	
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	51,598.	16,604.	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,357.	4,262.	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	8,106.	16,730.	
			771,654.	2,115,004.	
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	35,000.	389,035.
		14	Benefits paid to or for members (Part IX, column (A), line 4)		
		15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	492,279.	683,112.
		16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b		Total fundraising expenses (Part IX, column (D), line 25)	34,453.		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	208,615.	553,623.	
18		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 18)	735,894.	1,625,770.	
19		Revenue less expenses. Subtract line 18 from line 12	35,760.	489,234.	
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Year	End of Year	
	21	Total liabilities (Part X, line 26)	175,640.	528,953.	
	22	Net assets or fund balances. Subtract line 21 from line 20	151,872.	15,690.	
			23,768.	513,263.	

Part II Signature Block

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.	
	Signature of officer: <i>[Signature]</i>	Date: <i>11/10/11</i>
	Type or print name and title: <i>Kenneth Besser, President</i>	

Paid Preparer's Use Only	Preparer's signature: <i>[Signature]</i>	Date: <i>10/26/10</i>	Check if self-employed: ☐	Preparer's identifying number (see instructions): <i>P00135585</i>
	Firm's name (or yours if self-employed): <i>DEBRA A DOBBINS CPA PC</i>	EIN: <i>35-2204238</i>		
	Address: <i>139 BILLERICA RD</i> City, state, and ZIP: <i>CHELMSFORD, MA 01824-3619</i>	Phone no: <i>(978) 251-8830</i>		

May the IRS discuss this return with the preparer shown above? (see instructions)

BAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

TEEA0113L 12/29/09 Form 990 (2009)

SCANNED DEC 03 2010

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Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:

SEE SCHEDULE O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?

☐ Yes ☒ No

If 'Yes,' describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

☐ Yes ☒ No

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 501(c)(4) organizations and section 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 \$ 805,034. including grants of \$ 325,000.) (Revenue \$ 880,000.)

SEE SCHEDULE O

4b (Code ☐) (Expenses \$ 336,955. including grants of \$ 40,535.) (Revenue \$ 96,225.)

SEE SCHEDULE O

4c (Code ☐) (Expenses \$ 63,106. including grants of \$ 23,500.) (Revenue \$)

INTEGRATED CAMPAIGN TO ELIMINATE BROMINATED FLAME RETARDANTS:

OVER THE LAST FIVE YEARS, EHF HAS COORDINATED A MULTI-STATE POLICY AND MARKET BASED STRATEGY TO ELIMINATE BROMINATED FLAME RETARDANTS FROM COMMERCE, WITH A STRATEGIC FOCUS ON DECA. DURING THIS PERIOD, EHF HAS WORKED WITH AND PROVIDED GRANTS TO MANY STATE COALITIONS WORKING TO PASS BANS ON DECA. STATE BANS ON DECA HAVE BEEN WON IN WASHINGTON, MAINE, MICHIGAN, VERMONT AND MARYLAND. EHF HAS USED FLAME RETARDANTS AS POSTER CHILD CHEMICALS IN POLICY CAMPAIGNS FOR HIGHLIGHTING THE DANGERS AND UBIQUITY OF THESE UNREGULATED CHEMICALS AND THE NEED FOR CHEMICAL POLICY REFORM AT THE FEDERAL LEVEL.

4d Other program services (Describe in Schedule O) SEE SCHEDULE O

(Expenses \$ 52,604. including grants of \$) (Revenue \$ 54,289.)

4e Total program service expenses ▶ 1,257,699.

Part IV Checklist of Required Schedules

	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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
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		X
4 Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	X	
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		
6 Did the organization maintain any donor advised funds or any similar funds or 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		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III		X
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		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V		X
11 Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	X	
• Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI		
• Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII		
• Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII		
• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX		
• Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X		
• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X		
12 Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	X	
12A Was the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional	Yes	No
		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I		X
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		X
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		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III		X
20 Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II</i>	21 X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If 'Yes,' complete Schedule I, Parts I and III</i>	22	X
23 Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23	X
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, and that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,' go to line 25</i>	24a	X
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? <i>If 'Yes,' complete Schedule L, Part I</i>	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If 'Yes,' complete Schedule L, Part I</i>	25b	X
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? <i>If 'Yes,' complete Schedule L, Part II</i>	26	X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If 'Yes,' complete Schedule L, Part III</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28a	X
b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b	X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If 'Yes,' complete Schedule L, Part IV</i>	28c X	
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If 'Yes,' complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If 'Yes,' complete Schedule N, Part I</i>	31	X
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	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	35	X
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38 X	

BAA

Form 990 (2009)

Part 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		
1b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b If 'Yes,' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b If 'Yes,' enter the name of the foreign country ▶ 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?		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?		
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d If 'Yes,' indicate the number of Forms 8282 filed during the year		
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9 Sponsoring organizations maintaining donor advised funds.		
a Did the organization make any taxable distributions under section 4966?		
b Did the organization make any distribution to a donor, donor advisor, or related person?		
10 Section 501(c)(7) organizations. Enter		
a Initiation fees and capital contributions included on Part VIII, line 12		
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11 Section 501(c)(12) organizations. Enter		
a Gross income from other 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?		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year		

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

Section A. Governing Body and Management

	Yes	No
1a Enter the number of voting members of the governing body	5	
1b Enter the number of voting members that are independent	5	
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?		X
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
7b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	X	

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?		X
b If 'Yes,' does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O		
12a Does the organization have a written conflict of interest policy? If 'No,' go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		X
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this is done		X
13 Does the organization have a written whistleblower policy?		X
14 Does the organization have a written document retention and destruction policy?		X
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?		
a The organization's CEO, Executive Director, or top management official SEE SCHEDULE O	X	
b Other officers of key employees of the organization		X
If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)		
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?		X
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?		

Section C. Disclosures

17 List the states with which a copy of this Form 990 is required to be filed ► MA DC

18 Section 6104 requires an organization to make its Forms 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 SCHEDULE O

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
 ► JANE ROBINSON 21 LEDYARD ROAD WEST HARTFORD CT 06117 860-916-2207

[illegible]

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization ▶ 1

- | | Yes | No |
|---|-----|----|
| 3 | | X |
| 4 | | X |
| 5 | | X |

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization		
(A) Name and business address	(B) Description of Services	(C) Compensation
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization ► 0		

Part VIII Statement of Revenue

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns	1 a				
	b Membership dues	1 b				
	c Fundraising events	1 c				
	d Related organizations	1 d				
	e Government grants (contributions)	1 e				
	f All other contributions, gifts, grants, and similar amounts not included above	1 f 2,077,408.				
	g Noncash contribns included in lns 1a-1f:	\$				
h Total. Add lines 1a-1f			2,077,408.			
PROGRAM SERVICE REVENUE		Business Code				
	2 a CONSULTING	541900	16,604.	16,604.		
	b -----					
	c -----					
	d -----					
	e -----					
	f All other program service revenue					
g Total. Add lines 2a-2f			16,604.			
OTHER REVENUE	3 Investment income (including dividends, interest and other similar amounts)		5,099.			5,099.
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6 a Gross Rents	(i) Real (ii) Personal				
	b Less rental expenses					
	c Rental income or (loss)					
	d Net rental income or (loss)					
	7 a Gross amount from sales of assets other than inventory	(i) Securities (ii) Other				
	b Less cost or other basis and sales expenses					
	c Gain or (loss)					
	d Net gain or (loss)		-837.			-837.
	8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a				
	b Less direct expenses	b				
	c Net income or (loss) from fundraising events					
	9 a Gross income from gaming activities See Part IV, line 19	a				
	b Less direct expenses	b				
	c Net income or (loss) from gaming activities					
10 a Gross sales of inventory, less returns and allowances	a					
b Less cost of goods sold	b					
c Net income or (loss) from sales of inventory						
Miscellaneous Revenue						
	Business Code					
11 a ADMINISTRATIVE FEES	525920	16,730.			16,730.	
b -----						
c -----						
d All other revenue						
e Total. Add lines 11a-11d			16,730.			
12 Total revenue. See instructions			2,115,004.	16,604.	0.	20,992.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(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	389,035.	389,035.		
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				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	219,887.	7,542.	186,078.	26,267.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0.	0.	0.	0.
7 Other salaries and wages	360,544.	319,887.	39,862.	795.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	52,606.	47,123.	5,483.	
10 Payroll taxes	50,075.	27,142.	21,028.	1,905.
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	18,419.		18,419.	
d Lobbying				
e Prof fundraising svcs. See Part IV, ln 17				
f Investment management fees				
g Other	315,988.	310,276.	3,311.	2,401.
12 Advertising and promotion				
13 Office expenses	84,438.	67,795.	15,482.	1,161.
14 Information technology	8,367.	4,937.	3,179.	251.
15 Royalties				
16 Occupancy	32,241.	20,215.	10,939.	1,087.
17 Travel	53,074.	35,825.	17,249.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	12,105.	10,067.	2,038.	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	4,607.	2,340.	2,026.	241.
23 Insurance	3,375.	1,405.	1,870.	100.
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.)				
a MEALS	11,062.	7,266.	3,796.	
b INTERNET ACCESS	4,772.	2,915.	1,685.	172.
c SUBSCRIPTIONS	2,426.	1,431.	922.	73.
d DONATIONS	2,238.	2,238.		
e MISCELLANEOUS	301.	90.	211.	
f All other expenses	210.	170.	40.	
25 Total functional expenses. Add lines 1 through 24f	1,625,770.	1,257,699.	333,618.	34,453.
26 Joint costs. Check here ☐ 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

		(A) Beginning of year		(B) End of year
ASSETS	1 Cash – non-interest-bearing	29,094.	1	107,257.
	2 Savings and temporary cash investments		2	146,582.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D	10a 27,299.		
	b Less accumulated depreciation	10b 17,080.	7,800.	10c 10,219.
	11 Investments – publicly-traded securities	4,317.	11	4,707.
	12 Investments – other securities See Part IV, line 11		12	
	13 Investments – program-related See Part IV, line 11		13	
	14 Intangible assets		14	2,844.
	15 Other assets See Part IV, line 11	134,429.	15	257,344.
16 Total assets Add lines 1 through 15 (must equal line 34)	175,640.	16	528,953.	
LIABILITIES	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities Complete Part X of Schedule D	151,872.	25	15,690.
	26 Total liabilities. Add lines 17 through 25	151,872.	26	15,690.
NET ASSETS OR FUND BALANCES	Organizations that follow SFAS 117, check here ☒ and complete lines 27 through 29 and lines 33 and 34.			
	27 Unrestricted net assets	18,616.	27	506,623.
	28 Temporarily restricted net assets	5,152.	28	6,640.
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, and equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances.	23,768.	33	513,263.
	34 Total liabilities and net assets/fund balances	175,640.	34	528,953.

BAA

Form 990 (2009)

Part XI Financial Statements and Reporting

1 Accounting method used to prepare the Form 990 ☒ Cash ☐ Accrual ☐ Other

If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

	Yes	No
2a		X
2b	X	
2c	X	
3a		X
3b		

b Were the organization's financial statements audited by an independent accountant?

c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both

☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis

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?

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

BAA

Form 990 (2009)

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants'.)	603,324.	823,168.	656,522.	709,593.	2,077,408.	4,870,015.
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						0.
3 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge						0.
4 Total. Add lines 1-through 3	603,324.	823,168.	656,522.	709,593.	2,077,408.	4,870,015.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						1,663,752.
6 Public support. Subtract line 5 from line 4						3,206,263.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4	603,324.	823,168.	656,522.	709,593.	2,077,408.	4,870,015.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	3,777.	2,290.	4,882.	2,712.	5,360.	19,021.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) SEE PART IV	2,910.	5,634.	30,678.	8,106.	16,730.	64,058.
11 Total support. Add lines 7 through 10						4,953,094.
12 Gross receipts from related activities, etc. (see instructions)					12	264,527.

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	14	64.7 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	47.3 %

16a 33-1/3 support test – 2009. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization. ☒

b 33-1/3 support test – 2008. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ☐

17a 10%-facts-and-circumstances test – 2009 If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ☐

b 10%-facts-and-circumstances test – 2008. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ☐

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions. ☐

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

(Complete only if you checked the box on line 9 of Part I)

Section A. Public Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions and membership fees received (Do not include 'unusual grants'.)						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here. ▶ ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	%
19a 33-1/3 support tests – 2009. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ ☐		
b 33-1/3 support tests – 2008. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ ☐		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ▶ ☐		

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

This image shows a full page of white paper with horizontal dashed lines, typical of primary-ruled notebook paper. The lines are evenly spaced and run across the entire width of the page. There are no margins, text, or other markings present.

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► **Complete if the organization is described below.**

► **Attach to Form 990 or Form 990-EZ. ► See separate instructions.**

OMB No 1545-0047

2009

Open to Public Inspection

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations complete Part I-A only.

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B. Do not complete Part II-A.

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax), then

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

Name of organization

ENVIRONMENTAL HEALTH FUND, INC.

Employer identification number

04-3429794

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ► \$ _____
- 3 Volunteer hours

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ► \$ _____ 0.
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ► \$ _____ 0.
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a Was a correction made? ☐ Yes ☐ No
- b If 'Yes,' describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ► \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ► \$ _____
- 3 Total of exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ► \$ _____ ☐ Yes ☐ No
- 4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

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

Schedule C (Form 990 or 990-EZ) 2009

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check ☐ if the filing organization belongs to an affiliated group
- B** Check ☐ if the filing organization checked box A and 'limited control' provisions apply

Limits on Lobbying Expenditures –
(The term 'expenditures' means amounts paid or incurred.)(a) Filing
organization's totals(b) Affiliated
group totals**1a** Total lobbying expenditures to influence public opinion (grass roots lobbying)

19,247.

b Total lobbying expenditures to influence a legislative body (direct lobbying)

19,247.

0.

c Total lobbying expenditures (add lines 1a and 1b)

1,606,523.

d Other exempt purpose expenditures

1,625,770.

0.

e Total exempt purpose expenditures (add lines 1c and 1d)

231,289.

f Lobbying nontaxable amount Enter the amount from the following table in both columns

If the amount on line 1e, column (a) or (b) is.	The lobbying nontaxable amount is
Not over \$500,000	20% of the amount on line 1e.
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000
Over \$17,000,000	\$1,000,000

g Grassroots nontaxable amount (enter 25% of line 1f)

57,822.

0.

h Subtract line 1g from line 1a. If zero or less, enter -0-

0.

0.

i Subtract line 1f from line 1c. If zero or less, enter -0-

0.

0.

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?☐ Yes☐ No**4-Year Averaging Period Under Section 501(h)**
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying non-taxable amount				231,289.	231,289.
b Lobbying ceiling amount (150% of line 2a, column (e))					346,934.
c Total lobbying expenditures				19,247.	19,247.
d Grassroots nontaxable amount				57,822.	57,822.
e Grassroots ceiling amount (150% of line 2d, column (e))					86,733.
f Grassroots lobbying expenditures					0.

BAA

Schedule C (Form 990 or 990-EZ) 2009

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

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If 'Yes,' describe in Part IV			
j Total Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3 is answered 'Yes.'

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i. Also, complete this part for any additional information.

Part IV	Supplemental Information <i>(continued)</i>
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**SCHEDULE D
(Form 990)**Department of the Treasury
Internal Revenue Service

Name of the organization

ENVIRONMENTAL HEALTH FUND, INC.

Supplemental Financial Statements

- Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
► Attach to Form 990. ► See separate instructions

OMB No 1545-0047

2009**Open to Public
Inspection**

Employer identification number

04-3429794

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	☐ Yes	☐ No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermissible private benefit?	☐ Yes	☐ No

Part II Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e.g., recreation or pleasure)	☐ Preservation of an historically important land area
☐ Protection of natural habitat	☐ Preservation of certified historic structure
☐ Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition

d ☐ Loan or exchange programs

b ☐ Scholarly research

e ☐ Other _____

c ☐ Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements Complete if organization answered 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

b If 'Yes,' explain the arrangement in Part XIV

Part V Endowment Funds Complete if organization answered 'Yes' to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net Investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ _____ %

b Permanent endowment ▶ _____ %

c Term endowment ▶ _____ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

(ii) related organizations

b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book Value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment		26,777.	17,055.	9,722.
e Other		522.	25.	497.

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ▶ 10,219.

BAA

Schedule D (Form 990) 2009

Part VII	Investments—Other Securities See Form 990, Part X, line 12.	N/A
-----------------	--	-----

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990 Part X, col (B) line 12.) ▶		

Part VIII	Investments—Program Related (See Form 990, Part X, line 13)	N/A
------------------	--	-----

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total.		

Part IX	Other Assets (See Form 990, Part X, line 15)
----------------	---

(a) Description	(b) Book value
AGENCY FUNDS	6,244.
DUE FROM AFFILIATE	248,954.
EMPLOYEE ADVANCE	46.
SECURITY DEPOSITS	2,100.
Total. (Column (b) must equal Form 990, Part X, col (B), line 15)	257,344.

Part X	Other Liabilities (See Form 990, Part X, line 25)
---------------	--

(a) Description of Liability	(b) Amount
Federal Income Taxes	
AGENCY FUNDS	6,244.
CREDIT CARD LIABILITIES	9,446.
Total (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	15,690.

2. FIN 48 Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	2,115,004.
2	Total expenses (Form 990, Part IX, column (A), line 25)	1,625,770.
3	Excess or (deficit) for the year Subtract line 2 from line 1	489,234.
4	Net unrealized gains (losses) on investments	261.
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV)	
9	Total adjustments (net) Add lines 4 through 8	261.
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	489,495.

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	2,116,102.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	261.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV) SEE PART XIV	2d	837.
e	Add lines 2a through 2d	2e	1,098.
3	Subtract line 2e from line 1	3	2,115,004.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	2,115,004.

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	1,626,607.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV) SEE PART XIV	2d	837.
e	Add lines 2a through 2d	2e	837.
3	Subtract line 2e from line 1	3	1,625,770.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investments expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	1,625,770.

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Part XIV	Supplemental Information <i>(continued)</i>
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SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments and Individuals in the United States**

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

OMB No 1545-0047

2009

Open to Public
Inspection

Name of the organization

ENVIRONMENTAL HEALTH FUND, INC.

Employer identification number

04-3429794

Part I: General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States **SEE PART IV**

Part II: Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ☐

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CLEAN WATER FUND 262 WASHINGTON ST., #301 BOSTON, MA 02108	52-1043444	501 (C) (3)	6,000.	0.			PBDE
CT COALITION OF ENV. JUSTICE PO BOX 2022 HARTFORD, CT 06145	06-1511861	501 (C) (3)	65,000.	0.			SCHF
ENVIRONMENTAL DEFENSE FUND 257 PARK AVENUE SOUTH NEW YORK, NY 10010	11-6107128	501 (C) (3)	165,000.	0.			SCHF
HEALTH CARE WITHOUT HARM 1901 N. MOORE ST., #509 RESTON, VA 22209	52-2358837	501 (C) (3)	51,000.	0.			SCHF & UNEP
NC CONSERVATION NETWORK 19 E. MARTIN ST., STE 300 RALEIGH, NC 27601	58-2504713	501 (C) (3)	7,500.	0.			GCSP
VT PUBLIC INTEREST RSRCH & EDUC. 141 MAIN STREET, SUITE 6 MONTPELIER, VT 05602	51-0163801	501 (C) (3)	7,500.	0.			PBDE
WASHINGTON TOXICS COALITION 4649 SUNNYSIDE AVE, N, STE 540 SEATTLE, WA 98103	91-1214158	501 (C) (3)	70,000.	0.			SCHF
WOMEN'S VOICES FOR THE EARTH 114 W. PINE STREET MISSOULA, MT 59807	81-0501011	501 (C) (3)	6,000.	0.			PBDE

2 Enter total number of section 501 (c)(3) and government organizations

3 Enter total number of other organizations

8
0

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

TEEA3901L 02/10/10

Schedule I (Form 990) 2009

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 22.
Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount 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.

PART I, LINE 2 - GRANTMAKER'S DESCRIPTION OF HOW GRANTS ARE USED

FINAL REPORTS ARE SUBMITTED ON THE MANNER IN WHICH FUNDS ARE SPENT AND THE PROGRESS MADE IN ACCOMPLISHING THE PURPOSE OF THE GRANT. GRANTEE BOOKS AND RECORDS ARE TO BE MADE AVAILABLE TO EHF AT REASONABLE TIMES FOR INSPECTION. GRANTEES ARE TO PROVIDE UPON REQUEST ANY OTHER WRITTEN REPORT OR INFORMATION WHICH EHF BELIEVES NECESSARY TO KEEP IT FULLY APPRISED OF THE STATUS OR USE.

SCHEDULE L
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Transactions with Interested Persons**

► **Complete if the organization answered**
'Yes' on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c,
or Form 990-EZ, Part V, line 38a or 40b.
► **Attach to Form 990 or Form 990-EZ. ► See separate instructions.**

OMB No 1545-0047

2009**Open to Public
Inspection**

Name of the organization

ENVIRONMENTAL HEALTH FUND, INC.

Employer identification number

04-3429794

Part I Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only).
Complete if the organization answered 'Yes' on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Description of transaction	(c) Corrected?	
			Yes	No

2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under section 4958 ► \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ► \$

Part II Loans to and/or From Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 26 or Form 990-EZ, Part V, line 38a.

(a) Name of interested person and purpose	(b) Loan to or from the organization?		(c) Original principal amount	(d) Balance due	(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
	To	From			Yes	No	Yes	No	Yes	No
Total				► \$						

Part III Grants or Assistance Benefitting Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount and type of assistance

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction \$	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
HEALTH CARE WITHOUT HARM	SHARED EXEC DIR.	51,000.	GENERAL SUPPORT		X

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or 990-EZ.

Schedule L (Form 990 or 990-EZ) 2009

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on
Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

**Open to Public
Inspection**

Name of the organization

ENVIRONMENTAL HEALTH FUND, INC.

Employer identification number

04-3429794

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

TO TRANSFORM THE POLICIES, REGULATIONS AND PRACTICES THAT AFFECT THE ENTIRE
LIFECYCLE OF TOXIC CHEMICALS WITH THE GOAL OF ACHIEVING A HEALTHIER AND MORE
SUSTAINABLE FUTURE IN WHICH THESE POLLUTANTS NO LONGER CONTAMINATE OUR BODIES, FOOD,
HOMES, COMMUNITIES, AND THE BROADER ENVIRONMENT.

FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS

SAFER CHEMICALS HEALTHY FAMILIES CAMPAIGN (SCHF):

EHF HAS BEEN THE ADMINISTRATIVE AND ORGANIZING COORDINATING BODY FOR SCHF, THE
NATIONAL CAMPAIGN TO REFORM THE NATION'S FAILED AND FATALLY FLAWED CHEMICAL POLICY,
KNOWN AS THE TOXIC SUBSTANCES CONTROL ACT. EHF STAFF HAS PLAYED CRITICAL ROLES IN
THIS EFFORT.

OVER THE COURSE OF THE YEAR, THE CAMPAIGN HAS BEEN ABLE TO ACHIEVE IMPRESSIVE
RESULTS:

* BUILT A COALITION OF 250 ORGANIZATIONS AND ESTABLISHED SCHF AS THE KEY CIVIL
SOCIETY ENTITY TO DEAL WITH ON THIS ISSUE, WHICH INCLUDED CONGRESSIONAL LEADERS,
ADMINISTRATION OFFICIALS, THE CHEMICAL INDUSTRY AND OTHER BUSINESSES.

* PARTICIPATED IN THE NEGOTIATION OF A BILL TO BE INTRODUCED IN BOTH THE SENATE AND
THE HOUSE, DESPITE AN ENORMOUS AMOUNT OF CONGRESSIONAL ATTENTION BEING CONSUMED BY
HEALTH CARE REFORM AND CLIMATE CHANGE DURING THE YEAR.

* FRAMED THE ENTIRE CAMPAIGN IN HEALTH TERMS THAT TRANSCENDED TRADITIONAL
ENVIRONMENTAL ISSUES AND BROUGHT IN MANY HEALTH-BASED CONSTITUENCIES AS KEY SPOKES
PEOPLE AND MESSENGERS.

* BUILT A COALITION OF TRUST BETWEEN STATE AND NATIONAL BASED GROUPS AS WELL AS WHITE
GROUPS AND ORGANIZATIONS LED BY PEOPLE OF COLOR.

EHF WILL BE DOING SOME WORK TO EDUCATE THE PUBLIC IN SOME KEY STATES ABOUT THE

Name of the organization

ENVIRONMENTAL HEALTH FUND, INC.

Employer identification number

04-3429794

FORM 990, PART III, LINE 4A - PROGRAM SERVICE ACCOMPLISHMENTS (CONTINUED)

IMPORTANCE OF CHEMICAL POLICY REFORM AND DEVELOPING STRATEGIES.

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

GLOBAL CHEMICAL SAFETY PROGRAM (GCSP) :

GCSP PROMOTES NON-GOVERNMENT ORGANIZATIONS (NGOS) EFFORTS TO ADVANCE CHEMICAL SAFETY IN DEVELOPING COUNTRIES AND COUNTRIES WITH ECONOMIES IN TRANSITION. IT ALSO PROMOTES CHEMICAL SAFETY OBJECTIVES IN INTERNATIONAL POLICY-SETTING ARENAS.

"CHEMICAL SAFETY" IS A BROAD CONCEPT THAT ENCOMPASSES ALL THE MEASURES THAT ARE REQUIRED TO PROTECT HUMAN HEALTH AND THE ENVIRONMENT FROM TOXIC AND DANGEROUS CHEMICALS. KEY COMPONENTS OF "CHEMICAL SAFETY" INCLUDE: FOOD SAFETY, CONSUMER SAFETY, COMMUNITY SAFETY, WORKER SAFETY, AND ECOSYSTEM PROTECTION. EHF PUTS SPECIAL EMPHASIS ON HUMAN HEALTH CONCERNS ASSOCIATED WITH TOXIC CHEMICAL POLLUTION, AND IT PROMOTES THE PHASE-OUT AND ELIMINATION OF ALL PERSISTENT ORGANIC POLLUTANTS (POPS) AND OTHER PERSISTENT TOXIC SUBSTANCES (PTS).

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

COMING CLEAN:

EHF'S PROGRAM DIRECTOR IS THE CO-COORDINATOR OF COMING CLEAN. OVER THE LAST 10 YEARS COMING CLEAN HAS BEEN A PRIMARY CONDUCTOR IN REDEFINING THE FOCUS, ACTIVITIES AND EFFECTIVENESS OF THE TOXICS, ENVIRONMENTAL HEALTH AND JUSTICE MOVEMENT. CURRENTLY, COMING CLEAN NETWORKS OVER 200 ORGANIZATIONS AND 350 ORGANIZERS TOGETHER IN A BROAD COLLABORATIVE THAT KEEPS SIGHT ON THE BIG PICTURE NEED FOR CHEMICAL INDUSTRY REFORM TO PROTECT PUBLIC HEALTH WHILE SIMULTANEOUSLY ENGAGING ORGANIZATIONS IN SPECIFIC JOINT CAMPAIGNS AND PROJECTS THAT TARGET INTER-RELATED ASPECTS OF THE OVERARCHING PROBLEM.

Name of the organization

ENVIRONMENTAL HEALTH FUND, INC.

Employer identification number

04-3429794

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION (CONTINUED)

COMING CLEAN'S STRATEGY IS TO USE ALL SEVEN INTER-RELATED WORKGROUPS TO ACHIEVE OUR GOALS: SPECIFICALLY TO WIN HIGH PROFILE PHASE OUTS OF BAD ACTOR CHEMICALS AT THE STATE, FEDERAL AND INTERNATIONAL LEVEL, AT THE SAME TIME AS WE ALERT EVERY PUBLIC AUDIENCE TO THE DANGERS OF PERSISTENT, BIOACCUMULATIVE TOXIC CHEMICALS AND ENGAGE CHEMICAL MAKERS AND DOWNSTREAM USERS OF CHEMICALS (E.G., CONSUMER PRODUCT MAKERS, PESTICIDE USERS, AND RETAIL STORES) TO REJECT CHEMICALS THAT NEGATIVELY AFFECT HUMAN HEALTH (AND CORPORATE REPUTATIONS).

EQUITABLE AND SUSTAINABLE ECONOMY (ESE):

EHF IS WORKING ON THE DEVELOPMENT OF WHOLE SYSTEMS SOLUTIONS FOR AN ESE. EHF UTILIZES EDUCATION, ADVOCACY, AND POLICY TO ADVANCE SUSTAINABLE MATERIALS, PRODUCTS, BUSINESSES, GREEN CHEMISTRY AND ENGINEERING AS WELL AS OTHER INNOVATIVE SOLUTIONS TO TACKLE THE MOST PRESSING ISSUES OF OUR TIME. IN ALL EFFORTS, THE FOCUS IS ON BUILDING STRATEGIC PARTNERSHIPS TO ENABLE A LONG-LASTING, SYSTEMIC, AND SUSTAINABLE CHANGE.

SUSTAINABLE ECONOMIC DEVELOPMENT AND MARKET TRANSFORMATION IS A SPECIAL FOCUS OF THE WORK, PARTICULARLY AS IT SUPPORTS A TRANSITION FROM THE FOSSIL FUEL AND PETRO-CHEMICAL ECONOMY TO A RENEWABLE, SAFE, HEALTHY AND JUST SOCIETY.

EHF SUPPORTS GREATER EFFECTIVENESS AND SUCCESS AMONG THE ORGANIZATIONS AND ALLIANCES WORKING IN THIS AREA. TO THAT END, EHF IS COLLABORATING WITH A NUMBER OF KEY NGOS, BUSINESSES, GOVERNMENT, AND FUNDING ALLIES TO IMPLEMENT DIFFERENT COMPONENTS OF A BROAD ARCHITECTURE INCLUDING:

Name of the organization

ENVIRONMENTAL HEALTH FUND, INC.

Employer identification number

04-3429794

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION (CONTINUED)

* ACCELERATING THE TRANSITION FROM USE OF HAZARDOUS CHEMICALS AND MATERIALS.

* DEFINING AND DISSEMINATING SUSTAINABILITY FRAMEWORKS AND CRITERIA FOR CHEMICALS, MATERIALS, AND PRODUCTS.

* ADVANCING THE SUPPORT FOR RESEARCH AND DEVELOPMENT-BASED GREEN CHEMISTRY AND RELATED PRINCIPLES.

* ACCELERATING MARKET DEMAND FOR SAFER AND HEALTHIER PRODUCTS.

* PROMOTING NEW BUSINESS AND BUSINESS MODELS TO ADVANCE THE MARKET TRANSFORMATION AND CREATE PROSPERITY FOR ALL STAKEHOLDERS.

* ADVANCING GOVERNMENT POLICIES FOR THE SUSTAINABLE ECONOMY.

WITH THE BACKDROP OF TOXIC CHEMICALS AND PETROLEUM-BASED PLASTICS AND OTHER MATERIALS THREATENING THE ENVIRONMENT AND HUMAN HEALTH, THE DEVELOPMENT OF GREEN CHEMISTRY, ENGINEERING AND SUSTAINABLE MATERIALS AND PRODUCTS PARTICULARLY SUSTAINABLE BIOMATERIALS HOLDS GREAT PROMISE. WHEN DONE CORRECTLY, IT CAN ADDRESS MANY OF THE ENVIRONMENTAL, HEALTH, ECONOMIC PROBLEMS, AND NATIONAL SECURITY CONCERNS GENERATED BY THE MANUFACTURE OF PLASTICS AND OTHER HAZARDOUS CHEMICAL PRODUCTS FROM PETROLEUM AND OTHER FOSSIL FUELS.

EHF FOCUSES ON NETWORKING, BUILDING COLLABORATIONS, AND CATALYZING INTEREST AND NEW PARTNERSHIPS IN GREEN CHEMISTRY AND SUSTAINABLE MATERIALS. EHF HELPS PROVIDE RESOURCE MATERIALS, EDUCATIONAL OPPORTUNITIES, AND SUPPORT FOR NGOS, BUSINESSES, AND GOVERNMENTS TO EMBRACE A GREEN CHEMISTRY AND SUSTAINABLE MATERIALS AGENDA.

FORM 990, PART VI, LINE 9 - OFFICER, DIRECTOR, TRUSTEE, KEY EMPLOYEE MAILING ADDRESS

KEN GEISER

1 UNIVERSITY AVENUE

Name of the organization

ENVIRONMENTAL HEALTH FUND, INC.

Employer identification number

04-3429794

FORM 990, PART VI, LINE 9 - OFFICER, DIRECTOR, TRUSTEE, KEY EMPLOYEE MAILING ADDRESS (CONTINUED)

LOWELL, MA 01854

CAROLYN FINE FRIEDMAN

98 KIRKSTALL ROAD

NEWTONVILLE, MA 02460

PAULETTE SPEIGHT

18B WINTER STREET

WILMINGTON, MA 01887

THOMAS WEBSTER

715 ALBANY STREET

BOSTON, MA 02118

JEFFREY HOLLENDER

60 LAKE STREET

BURLINGTON, VT 05401

FORM 990, PART VI, LINE 11 - FORM 990 REVIEW PROCESS

A DRAFT FORM 990 WAS PROVIDED VIA EMAIL TO ALL BOARD MEMBERS FOR THEIR REVIEW.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS FOR CEO, EXEC. DIR., OR TOP MGT

COMPARABILITY DATA WHICH MUST BE APPROVED BY THE BOARD.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

AVAILABLE UPON REQUEST.

Name of the organization

Employer identification number

ENVIRONMENTAL HEALTH FUND, INC.

04-3429794

Area with horizontal dashed lines for supplemental information.

2009

SCHEDULE D, PART XIV - SUPPLEMENTAL INFORMATIONPAGE 6

CLIENT 2281

ENVIRONMENTAL HEALTH FUND, INC.

04-3429794

10/26/10

02 29PM

**SCHEDULE D, PART XII, LINE 2D
OTHER REVENUE INCLUDED IN F/S BUT NOT INCLUDED ON FORM 990**

LOSS ON DISPOSAL OF FIXED ASSETS

TOTAL \$ 837.
\$ 837.

**SCHEDULE D, PART XIII, LINE 2D
OTHER EXPENSES AND LOSSES PER AUDITED F/S**

LOSS ON DISPOSAL OF FIXED ASSETS

TOTAL \$ 837.
\$ 837.

2009

SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5

CLIENT 2281

ENVIRONMENTAL HEALTH FUND, INC.

04-3429794

10/26/10

02 29PM

PART II, LINE 10 - OTHER INCOME

NATURE AND SOURCE	2009	2008	2007	2006	2005
ADMINISTRATIVE FEES	16,730.	8,106.	30,678.	5,634.	2,910.
TOTAL	<u>\$ 16,730.</u>	<u>\$ 8,106.</u>	<u>\$ 30,678.</u>	<u>\$ 5,634.</u>	<u>\$ 2,910.</u>