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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)

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

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

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type  See Specific Instructions	<b>C Name of organization</b> ENVIRONMENTAL SUPPORT CENTER, INC. Doing Business As		<b>D Employer identification number</b> 13-3563949
		Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1500 MASSACHUSETTS AVENUE, NW 25		<b>E Telephone number</b> (202) 331-9700
		City or town, state or country, and ZIP + 4 WASHINGTON, DC 20005-1808		<b>G Gross receipts \$</b> 938,591.
		<b>F Name and address of principal officer:</b> JUDY HATCHER SAME AS C ABOVE		<b>H(a) Is this a group return for affiliates?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b) Are all affiliates included?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c) Group exemption number</b> ▶

**I Tax-exempt status:**  501(c) ( 3 ) ◀ (insert no)  4947(a)(1) or  527  
**J Website:** ▶ WWW.ENVSC.ORG  
**K Form of organization:**  Corporation  Trust  Association  Other ▶ **L Year of formation:** 1990 **M State of legal domicile:** DE

**Part I Summary**

<b>Activities &amp; Governance</b>	1	Briefly describe the organization's mission or most significant activities. <u>THE CENTER SUPPORTS A CLEAN ENVIRONMENT BY BUILDING CAPACITY OF ENVIRONMENTAL ORGANIZATIONS.</u>			
	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets			
	3	Number of voting members of the governing body (Part VI, line 1a)	3	13	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	13	
	5	Total number of employees (Part V, line 2a)	5	4	
	6	Total number of volunteers (estimate if necessary)	6	14	
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0.	
<b>Revenue</b>	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year	
	9	Program service revenue (Part VIII, line 2g)	763,641.	709,781.	
	10	Investment income (Part VIII, column (A), lines 3, 4, and 4d)	25,653.	<48,569.>	
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8e, 9c, 10c, and 11e)	43,952.	17,908.	
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	833,246.	679,120.	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	263,388.	101,278.	
	14	Benefits paid to or for members (Part IX, column (A), line 4)			
	<b>Expenses</b>	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	449,669.	259,468.
		16a	Professional fundraising fees (Part IX, column (A), line 11e)		
		b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 105,118.		
		17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-11g)	562,134.	511,132.
		18	Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	1,275,191.	871,878.
<b>Net Assets or Fund Balances</b>	19	Revenue less expenses Subtract line 18 from line 12	<441,945.>	<192,758.>	
	20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year	
	21	Total liabilities (Part X, line 26)	1,013,467.	861,922.	
	22	Net assets or fund balances Subtract line 21 from line 20	177,950.	73,307.	
			835,517.	788,615.	

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here: *Judy Hatcher* Signature of officer Date: 1/10/10  
 Type or print name and title: Judy Hatcher, Executive Director

Paid Preparer's Use Only: Preparer's signature: *RHA* Date: 9/21/10 Check if self-employed:  Preparer's identifying number (see instructions):  
 Firm's name (or yours if self-employed), address, and ZIP + 4: RAFRA, P.C., 1899 L STREET, NW, SUITE 900 WASHINGTON, DC 20036  
 Phone no.: (202) 822-5000

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

SCANNED OCT 29 2010

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Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

THE ENVIRONMENTAL SUPPORT CENTER PROMOTES THE QUALITY OF THE NATURAL ENVIRONMENT, HUMAN HEALTH, COMMUNITY SUSTAINABILITY, AND SOCIAL JUSTICE BY BUILDING THE CAPACITY OF ENVIRONMENTAL JUSTICE GROUPS AND THEIR ALLIES.

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 \$ 237,488. including grants of \$ 19,165. ) (Revenue \$ )

TECHNOLOGY RESOURCES (TR) PROGRAM HELPS ENVIRONMENTAL JUSTICE GROUPS INCREASE THE EFFICIENCY OF THEIR DAILY OPERATIONS AND THE EFFECTIVENESS OF THEIR COMMUNICATIONS WITH THEIR CONSTITUENTS AND THE GENERAL PUBLIC BY PROVIDING TECHNOLOGY TRAINING AND EQUIPMENT. THE PROGRAM SERVES ENVIRONMENTAL JUSTICE ORGANIZATIONS IN THE SOUTHERN AND SOUTHWESTERN STATES.

4b (Code ) (Expenses \$ 134,336. including grants of \$ 21,751. ) (Revenue \$ )

ENVIRONMENTAL LOAN FUND (FUNDS) HELPS ESTABLISHED ORGANIZATIONS DIVERSIFY AND EXPAND THEIR FUNDING BASE THROUGH GRANTS AND CONSULTING. ORGANIZATIONS THAT ANALYZE POTENTIAL INCOME GROWTH AND DEVELOP A MULTI-YEAR "COMPREHENSIVE FUNDRAISING PLAN" ARE MORE LIKELY TO BE FINANCIALLY SUSTAINABLE OVER TIME.

4c (Code ) (Expenses \$ 89,045. including grants of \$ 44,862. ) (Revenue \$ )

TRAINING AND ORGANIZATIONAL ASSISTANCE (TOA) PROGRAM HELPS ENVIRONMENTAL GRASS ROOTS ORGANIZATIONS THROUGH SMALL GRANTS FOR CAPACITY-BUILDING ACTIVITIES, SUCH AS TRAINING, CONSULTATION AND FACILITATION.

4d Other program services (Describe in Schedule O.)

(Expenses \$ 195,956. including grants of \$ 15,500. ) (Revenue \$ )

4e Total program service expenses \$ 656,825.

**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)? <i>If "Yes," complete Schedule A</i>	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? <i>If "Yes," complete Schedule C, Part I</i>		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i>		X
5 <b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i>	N/A	
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? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11 Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i>	X	
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>		
• 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? <i>If "Yes," complete Schedule D, Part VII</i>		
• 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? <i>If "Yes," complete Schedule D, Part VIII</i>		
• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>		
• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		
• 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? <i>If "Yes," complete Schedule D, Part X</i>		
12 Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i>	X	
12A Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i>	Yes	No
		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		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? <i>If "Yes," complete Schedule F, Part I</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? <i>If "Yes," complete Schedule F, Part II</i>		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? <i>If "Yes," complete Schedule F, Part III</i>		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? <i>If "Yes," complete Schedule G, Part I</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? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20 Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i>		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? If "Yes," complete Schedule I, Parts I and II	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? If "Yes," complete Schedule I, Parts I and III		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? If "Yes," complete Schedule J		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, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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		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? If "Yes," complete Schedule L, Part I		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? If "Yes," complete Schedule L, Part II		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? If "Yes," complete Schedule L, Part III		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? If "Yes," complete Schedule L, Part IV		X
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	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? If "Yes," complete Schedule L, Part IV		X
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		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? If "Yes," complete Schedule R, Part I		X
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		X
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		X
36 Section 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		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? If "Yes," complete Schedule R, Part VI		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

Note. All Form 990 filers are required to complete Schedule O



**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		
1b	Enter the number of voting members that are independent		
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:		
8a	a The governing body?	X	
8b	b Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? 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
10b	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		
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
12b	b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		X
12c	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?		
15a	a The organization's CEO, Executive Director, or top management official	X	
15b	b Other officers or 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
16b	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. Disclosure**

17	List the states with which a copy of this Form 990 is required to be filed	NONE
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. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> 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	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	THE ORGANIZATION - 202-331-9700 1500 MASSACHUSETTS AVE., NW, #25, WASHINGTON, DC 20005-1808

**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. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

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

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

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JANICE L. VIEW PRESIDENT - UNTIL 6/09	1.50	X		X				0.	0.	0.
KATHLEEN SANCHEZ CO-CHAIR	1.50	X		X				0.	0.	0.
PATRICK SWEENEY CO-CHAIR	1.50	X		X				0.	0.	0.
RON E. DAVIS VICE-CHAIR	1.50	X		X				0.	0.	0.
EILEEN JAMISON TYRER TREASURER	1.50	X		X				0.	0.	0.
WENDY JOHNSON CO-TREASURER-UNTIL 6/09	1.50	X		X				0.	0.	0.
YUKI KIDOKORO SECRETARY	1.50	X		X				0.	0.	0.
ROBERT L. BINGAMAN DIRECTOR - UNTIL 6/09	1.50	X						0.	0.	0.
SARAH CHRISTIANSEN DIRECTOR	1.50	X						0.	0.	0.
DAN CHU DIRECTOR	1.50	X						0.	0.	0.
BRITT DAVID DIRECTOR	1.50	X						0.	0.	0.
WILLIAM J. DAVIS DIRECTOR	1.50	X						0.	0.	0.
HAZEL JAMES DIRECTOR	1.50	X						0.	0.	0.
ANJALI KAUL DIRECTOR	1.50	X						0.	0.	0.
BILL KOPSKY DIRECTOR	1.50	X						0.	0.	0.
CATHERINE LERZA DIRECTOR - UNTIL 6/09	1.50	X						0.	0.	0.
RICHARD MOORE DIRECTOR	1.50	X						0.	0.	0.

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
JUDY HATCHER EXECUTIVE DIRECTOR	45.00			X				79,202.	0.	12,954.
DONNA MUNOZ DIR. OF FIN. AND ADMIN.	44.00			X				77,993.	0.	4,622.
<b>1b Total</b>								157,195.	0.	17,576.

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 **0**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization **NONE**

(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	
<b>Contributions, gifts, grants and other similar amounts</b>	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	709,781.				
	g	Noncash contributions included in lines 1a-1f \$						
	h	<b>Total.</b> Add lines 1a-1f		709,781.				
<b>Program Service Revenue</b>				<b>Business Code</b>				
	2 a							
	b							
	c							
	d							
	e							
	f	All other program service revenue						
g	<b>Total.</b> Add lines 2a-2f							
<b>Other Revenue</b>	3	Investment income (including dividends, interest, and other similar amounts)		7,488.			7,488.	
	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	203,414.			
					259,471.			
					<56,057.>			
	b	Less: cost or other basis and sales expenses						
	c	Gain or (loss)						
	d	Net gain or (loss)			<56,057.>		<56,057.>	
	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					
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					
		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					
		c	Net income or (loss) from sales of inventory					
<b>Miscellaneous Revenue</b>			<b>Business Code</b>					
11 a	<b>SUBSIDY RECAPTURE</b>		900099	17,708.			17,708.	
b	<b>OTHER INCOME</b>		900099	200.			200.	
c								
d	All other revenue							
e	<b>Total.</b> Add lines 11a-11d			17,908.				
12	<b>Total revenue.</b> See instructions.			679,120.	0.	0.	<30,661.>	

**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).

Do 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	101,278.	101,278.		
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	174,771.	110,106.	38,449.	26,216.
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	54,758.	38,113.	5,726.	10,919.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,674.	1,186.	613.	875.
9 Other employee benefits	11,108.	9,182.	759.	1,167.
10 Payroll taxes	16,157.	11,048.	2,700.	2,409.
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	41,212.	31,398.	5,017.	4,797.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	4,564.	4,564.		
g Other	263,952.	216,126.	13,310.	34,516.
12 Advertising and promotion	301.	227.	38.	36.
13 Office expenses	31,488.	23,902.	4,337.	3,249.
14 Information technology				
15 Royalties				
16 Occupancy	108,889.	82,031.	13,730.	13,128.
17 Travel	39,754.	12,682.	22,147.	4,925.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	2,356.	1,635.	331.	390.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	2,173.	1,637.	274.	262.
23 Insurance	7,440.	5,605.	938.	897.
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 <b>LICENSES AND REPORTS</b>	9,003.	6,105.	1,566.	1,332.
b _____				
c _____				
d _____				
e _____				
f All other expenses _____				
25 Total functional expenses. Add lines 1 through 24f	871,878.	656,825.	109,935.	105,118.
26 Joint costs. Check here <input type="checkbox"/> 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
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing	98,944.	<b>1</b>	24,576.
	<b>2</b> Savings and temporary cash investments	110,958.	<b>2</b>	65,496.
	<b>3</b> Pledges and grants receivable, net	298,640.	<b>3</b>	360,777.
	<b>4</b> Accounts receivable, net		<b>4</b>	
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		<b>5</b>	
	<b>6</b> 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		<b>6</b>	
	<b>7</b> Notes and loans receivable, net		<b>7</b>	
	<b>8</b> Inventories for sale or use		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges	13,473.	<b>9</b>	1,411.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 135,331.		
	<b>b</b> Less accumulated depreciation	<b>10b</b> 129,370.		
		8,134.	<b>10c</b>	5,961.
	<b>11</b> Investments - publicly traded securities	471,704.	<b>11</b>	395,728.
	<b>12</b> Investments - other securities. See Part IV, line 11		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11		<b>13</b>	
	<b>14</b> Intangible assets		<b>14</b>	
<b>15</b> Other assets. See Part IV, line 11	11,614.	<b>15</b>	7,973.	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	1,013,467.	<b>16</b>	861,922.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses	33,231.	<b>17</b>	28,067.
	<b>18</b> Grants payable	127,877.	<b>18</b>	36,939.
	<b>19</b> Deferred revenue		<b>19</b>	
	<b>20</b> Tax-exempt bond liabilities		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D		<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties		<b>24</b>	
	<b>25</b> Other liabilities. Complete Part X of Schedule D	16,842.	<b>25</b>	8,301.
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25	177,950.	<b>26</b>	73,307.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets	101,327.	<b>27</b>	234,680.
	<b>28</b> Temporarily restricted net assets	734,190.	<b>28</b>	553,935.
	<b>29</b> Permanently restricted net assets		<b>29</b>	
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds		<b>32</b>	
<b>33</b> <b>Total net assets or fund balances</b>	835,517.	<b>33</b>	788,615.	
<b>34</b> <b>Total liabilities and net assets/fund balances</b>	1,013,467.	<b>34</b>	861,922.	

**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?

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.

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

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 any "unusual grants.")	944,851.	1327469.	1404942.	763,641.	709,781.	5150684.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	944,851.	1327469.	1404942.	763,641.	709,781.	5150684.
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)						1958195.
6 Public support. Subtract line 5 from line 4						3192489.

**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	944,851.	1327469.	1404942.	763,641.	709,781.	5150684.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	31,019.	32,890.	43,465.	31,148.	7,488.	146,010.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	46,223.	66,384.	66,578.	43,952.	17,908.	241,045.
11 Total support. Add lines 7 through 10						5537739.
12 Gross receipts from related activities, etc (see instructions)					12	

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	57.65 %
15 Public support percentage from 2008 Schedule A, Part II, line 14	15	51.29 %

16a 33 1/3% support test - 2009. If the organization did not check the box on line 13, and 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 year beginning in)▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>6 Total.</b> Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
<b>8 Public support</b> (Subtract line 7c from line 6)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
<b>13 Total support</b> (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**

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

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	<b>17</b>	%
<b>18</b> Investment income percentage from 2008 Schedule A, Part III, line 17	<b>18</b>	%

**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 line 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

**Schedule D**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ Complete if the organization answered "Yes," to Form 990,  
Part IV, line 6, 7, 8, 9, 10, 11, or 12.  
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization **ENVIRONMENTAL SUPPORT CENTER, INC.** Employer identification number **13-3563949**

**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?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or pleasure)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	
- 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 Tax Year
a Total number of conservation easements	
b Total acreage restricted by conservation easements	
c Number of conservation easements on a certified historic structure included in (a)	
d Number of conservation easements included in (c) acquired after 8/17/06	
- Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_
- Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_
- Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Yes  No
- Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_
- Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_
- Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  Yes  No
- 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

- 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
- 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	▶ \$ _____
- 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
- b  Scholarly research
- c  Preservation for future generations
- d  Loan or exchange programs
- e  Other \_\_\_\_\_

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 the 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

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

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

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		118,259.	112,298.	5,961.
e Other		17,072.	17,072.	0.
<b>Total.</b> Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				5,961.



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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	679,120.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	871,878.
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	<192,758.>
4	Net unrealized gains (losses) on investments	4	145,856.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 through 8	9	145,856.
10	Excess or (deficit) for the year per audited financial statements Combine lines 3 and 9	10	<46,902.>

**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	824,976.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	145,856.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	
e	Add lines 2a through 2d	2e	145,856.
3	Subtract line 2e from line 1	3	679,120.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment 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	0.
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	679,120.

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

1	Total expenses and losses per audited financial statements	1	871,878.
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)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	871,878.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	871,878.

**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 X: THE CENTER REVIEWS AND ASSESSES ALL ACTIVITIES**

ANNUALLY TO IDENTIFY ANY CHANGES IN THE SCOPE OF THE ACTIVITIES AND REVENUE SOURCES AND THE TAX TREATMENT THEREOF TO IDENTIFY ANY UNCERTAIN TAX POSITIONS. FOR THE YEAR ENDED DECEMBER 31, 2009, NO PROVISION FOR INCOME TAXES WAS MADE AS THE CENTER HAD NO NET UNRELATED BUSINESS INCOME AND DID NOT IDENTIFY ANY UNCERTAIN TAX POSITIONS REQUIRING RECOGNITION OR DISCLOSURE IN THESE FINANCIAL STATEMENTS.

**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" on Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.

OMB No 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**ENVIRONMENTAL SUPPORT CENTER, INC.**

Employer identification number  
**13-3563949**

**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

**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
APALACHICOLA BAY AND RIVER KEEPER, INC. - 23 D AVENUE - APALACHICOLA, FL 32320	59-3550426	501 (C)(3)	5,000.	0.			FUNDRAISING CAPACITY BUILDING
CLEAN WATER NETWORK 218 D STREET, SE WASHINGTON, DC 20003	38-3771124	501 (C)(3)	5,000.	0.			SUPPORT FOR SUSTAINABLE WATER CAUCUS
ENVIRONMENTAL JUSTICE COA. FOR WATER - 654 13TH STREET - OAKLAND, CA 94612	20-2539559	501 (C)(3)	9,000.	0.			STRATEGIC PLANNING AND SUPPORT FOR EJ WATER GROUPS CONVENING
GALVESTON BAYKEEPER PO BOX 71 SEABROOK, TX 77586	26-0187498	501 (C)(3)	3,809.	2,824	BOOK	TECHNOLOGY CONSULTING	TECHNOLOGY HARDWARE & SOFTWARE
GALVESTON-HOUSTON ASSOCIATION FOR SMOG PREVENTION - 2311 CANAL STREET, SUITE 326 - HOUSTON, TX 77003	76-0461030	501 (C)(3)	5,000.	0.			ORGANIZATIONAL BRANDING
GEORGIA RIVER NETWORK, INC. 126 S. MILLEDGE AVENUE, SUITE E3 ATHENS, GA 30605	58-2404112	501 (C)(3)	10,000.	0.			FUNDRAISING CAPACITY BUILDING & COMMUNICATION UPGRADE MATERIALS AND WEB PRESENCE

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

**3** Enter total number of other organizations

▶ 10.  
▶ 1.

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

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

SCHEDULE I, PART I, LINE 2: THE CENTER AWARDS GRANTS, EQUIPMENT AND DIRECT ASSISTANCE TO ELIGIBLE ORGANIZATIONS FOR CAPACITY BUILDING WORK. GRANTEE ORGANIZATIONS ARE REQUIRED TO REPORT BACK TO THE CENTER THE EFFECTIVENESS OF THE CAPACITY BUILDING THROUGH A VARIETY OF MEANS: TRAINING ASSESSMENTS (VIA E-MAIL, TELEPHONE OR PAPER), EVALUATIONS, REIMBURSEMENT REQUESTS, RECEIPTS AND GRANT REPORTS.

Name of the organization

**ENVIRONMENTAL SUPPORT CENTER, INC.**

Employer identification number  
**13-3563949**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(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
LONGHOUSE MEDIA AND NATIVE LENS 117 E LOUISA STREET, SUITE 131 SEATTLE, WA 98102	20-4641276	N/A	5,000.	0.			SUPPORT INDIGENOUS PEOPLES' SUMMIT ON CLIMATE CHANGE
MOTHERS AND DAUGHTERS PROTECTING CHILDREN'S HEALTH - 1420 WOODSTOCK AVENUE - ANNISTON, AL 36201	63-1281863	501 (C)(3)	3,088.	2,824.	BOOK	TECHNOLOGY CONSULTING	TECHNOLOGY HARDWARE & SOFTWARE
NORTHWEST COALITION FOR ALTERNATIVES TO PESTICIDES - PO BOX 1393 - EUGENE, OR 97440	93-0715778	501 (C)(3)	10,000.	0.			FUNDRAISING CAPACITY BUILDING
NORTHWEST TOXIC COMMUNITIES COALITION - 1207 SOUTH TRENTON STREET - SEATTLE, WA 98108	61-1555139	501 (C)(3)	10,000.	0.			SUPPORT SPRING INDIGENOUS PEOPLES' SUMMIT ON CLIMATE CHANGE
TEXAS ENVIRONMENTAL JUSTICE ADVOCACY SERVICES - 6733 HARRISBURG BOULEVARD. - HOUSTON, TX 77011	02-0749601	501 (C)(3)	3,764.	2,824.	BOOK	TECHNOLOGY CONSULTING	TECHNOLOGY HARDWARE & SOFTWARE



**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 SUPPORT CENTER, INC.

Employer identification number

13-3563949

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

LEADERSHIP AND ENHANCED ASSISTANCE PROGRAM

EXPENSES \$ 77140. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

SPECIAL PROJECTS

EXPENSES \$ 71580. INCLUDING GRANTS OF \$ 15500. REVENUE \$ 0.

PROGRAM DEVELOPMENT

EXPENSES \$ 47236. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11: IN ACCORDANCE WITH THE IRS

INSTRUCTIONS FOR THIS LINE ITEM, WE HAVE ANSWERED THIS QUESTION AS 'NO'

SINCE A COPY OF THE 990 WAS NOT PROVIDED TO THE ENTIRE BOARD PRIOR TO

FILING WITH THE IRS. HOWEVER, A COPY OF THE 990 IS REVIEWED BY OUR AUDIT

CONSULTANT, OUR DIRECTOR OF ADMINISTRATION AND FINANCE, OUR EXECUTIVE

DIRECTOR, AND CHAIR OF AUDIT COMMITTEE OF THE BOARD PRIOR TO FILING WITH

THE IRS. WE BELIEVE THESE PROCEDURES ARE ADEQUATE GIVEN THE LEVEL OF OUR

ACTIVITY AND THE SIZE OF OUR BOARD.

FORM 990, PART VI, SECTION B, LINE 12: PROGRAM STAFF REVIEWS ALL

APPLICATIONS FOR ASSISTANCE TO DETERMINE IF THE ORGANIZATIONS MEET THE

ELIGIBILITY CRITERIA IN PLACE. SOME BOARD MEMBERS MAY BE PART OF, OR

LEADERS OF, ORGANIZATIONS THAT ARE ELIGIBLE FOR THE CENTER ASSISTANCE, AS

SUCH THEY ARE GIVEN CAREFUL CONSIDERATION WITHIN THE POOL OF APPLICANTS.

THE CENTER PROGRAM STAFF ARE REQUIRED TO SUBMIT THEIR AWARD DECISIONS TO

THE EXECUTIVE DIRECTOR AND THE FINANCE DEPARTMENT, BOTH OF WHICH HAVE A

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

Schedule O (Form 990) 2009

932211  
02-03-10

**SCHEDULE O**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

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OMB No 1545-0047

**2009**  
Open to Public  
Inspection

Name of the organization

ENVIRONMENTAL SUPPORT CENTER, INC.

Employer identification number  
13-3563949

CLEAR UNDERSTANDING OF THE ELIGIBILITY REQUIREMENTS AND LOOK FOR ANY  
DISPROPORTIONATE AWARDS TO BOARD MEMBERS.

FORM 990, PART VI, SECTION B, LINE 15: THE CENTER HAS PURCHASED BOTH A  
FORMAL REVIEW OF STAFF SALARIES AND STRUCTURES AND ANNUAL COMPENSATION  
DOCUMENTS. THESE, ALONG WITH SALARIES PUBLISHED IN NON-PROFIT PUBLICATIONS  
ARE USED TO DETERMINE COMPENSATION. THE CENTER'S BOARD SETS AND RAISES THE  
SALARY OF THE EXECUTIVE DIRECTOR; THE EXECUTIVE DIRECTOR SETS AND RAISES  
THE SALARIES OF ALL OTHER STAFF. ALL CURRENT AND BUDGETED SALARIES AND  
INCREASES ARE DOCUMENTED AND VOTED ON IN ADVANCE OF THE CALENDAR YEAR BY  
THE ENTIRE BOARD OF DIRECTORS WITHIN THE BUDGETING PROCESS. THE EXECUTIVE  
COMMITTEE OF THE BOARD IS PROVIDED WITH A DETAILED SUMMARY OF ALL STAFF  
SALARIES AND PROGRAM AND DEPARTMENT DISTRIBUTIONS OF SAID SALARIES. UPON  
APPROVAL BY THE BOARD OF THE ANNUAL BUDGET, ALL RAISES IN SALARY INCLUDED  
IN THE BUDGET ARE ANNOUNCED TO THE PARTICULAR STAFF PERSON IN WRITTEN  
CORRESPONDENCE, AND A COPY IS PLACED IN THE PERSONNEL FILES.

FORM 990, PART VI, SECTION C, LINE 19: THE CENTER HAS AND WILL PROVIDE THE  
PUBLIC DISCLOSURE COPY OF THE 990 AND GOVERNING DOCUMENTS TO ANY AND ALL  
THAT ASK FOR IT AS PER THE FREEDOM OF INFORMATION ACT. WE ADDITIONALLY PUT  
A SUMMARIZED VERSION OF THE PRIOR YEAR INCOME AND EXPENSE STATEMENT ON OUR  
WEBSITE. OUR GOVERNING DOCUMENTS ARE ON FILE WITH THE STATE OF DELAWARE.

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: PATRICIA MUNOZ

(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.  
932211  
02-03-10

Schedule O (Form 990) 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  
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▶ Attach to Form 990.

OMB No 1545-0047

**2009**  
Open to Public  
Inspection

Name of the organization

ENVIRONMENTAL SUPPORT CENTER, INC.

Employer identification number  
13-3563949

SISTER OF DONNA MUNOZ, DIRECTOR OF FINANCE AND ADMINISTRATION

(C) AMOUNT OF TRANSACTION \$ 36109.

(D) DESCRIPTION OF TRANSACTION: PATRICIA MUNOZ WAS COMPENSATED \$36,109  
FOR ACCOUNTING SERVICES RENDERED TO THE CENTER DURING 2009.

(E) SHARING OF ORGANIZATION REVENUES? = NO

If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only Part II and check this box  **X**

**Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

If you are filing for an **Automatic 3-Month Extension**, complete only Part I (on page 1).

<b>Part II</b>		<b>Additional (Not Automatic) 3-Month Extension of Time.</b> Only file the original (no copies needed).	
Type or print File by the extended due date for filing the return See instructions	Name of Exempt Organization		Employer identification number
	ENVIRONMENTAL SUPPORT CENTER, INC.		13-3563949
	Number, street, and room or suite no. If a P.O. box, see instructions.		For IRS use only
	1500 MASSACHUSETTS AVENUE, NW, NO. 25		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.		
	WASHINGTON, DC 20005-1808		

Check type of return to be filed (File a separate application for each return):

- Form 990   
  Form 990-EZ   
  Form 990-T (sec. 401(a) or 408(a) trust)   
  Form 1041-A   
  Form 5227   
  Form 8870  
 Form 990-BL   
  Form 990-PF   
  Form 990-T (trust other than above)   
  Form 4720   
  Form 6069

**STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.**

THE ORGANIZATION - 1500 MASSACHUSETTS AVE., NW, #25 -

- The books are in the care of **WASHINGTON, DC 20005-1808**  
 Telephone No. **202-331-9700**      FAX No.
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box . If it is for part of the group, check this box  and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until **NOVEMBER 15, 2010.**
- 5 For calendar year **2009**, or other tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_.
- 6 If this tax year is for less than 12 months, check reason.  Initial return     Final return     Change in accounting period
- 7 State in detail why you need the extension  
**ADDITIONAL TIME IS NEEDED TO GATHER INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN.**

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c	<b>Balance Due.</b> Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$ N/A

**Signature and Verification**

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature **RHA**      Title **CPA**      Date **8/9/10**