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DLN: 93493216011022

Department of the Treasury

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)

OMB No 1545-0047

Interna	l Revenue	Service	► The organization may have	ve to use a copy of this return to satisfy	state reporting	requirement	Inspection		
A F	or the :	2010 ca	lendar year, or tax year begin	ning 10-01-2010 and ending 09-30-20	11				
B Ch	neck if a	pplicable	C Name of organization NATIONAL ENVIRONMENTAL EDU	CATION AND		D Employe	r identification number		
Ad	dress ch	nange	TRAINING FOUNDATION INC Doing Business As			54-155	7043		
Na	me cha	nge	NATIONAL ENVIRONMENTAL EDU	CATION FOU		E Telephor	ne number		
In	ıtıal retu	rn		ıf maıl ıs not delivered to street address)	Room/suite	- (202)8	33-2933		
Te	rmınate	d	4301 CONNECTICUT AVE NW NO	160		(,-			
— An	nended	return	City or town, state or country, ar	nd ZIP + 4		G Gross reco	eipts \$ 3,721,765		
— _{Ар}	plication	n pending	WASHINGTON, DC 20008						
			F Name and address of p	orincipal officer	H(a) Is this a	group return for a	iffiliates? Yes V No		
			DIANE W WOOD	/F NW NO 160	11(4) 13 (11)	group recumor a	anniaces y res y rio		
			4301 CONNECTICUT AV WASHINGTON, DC 2000		` `	affılıates ınclud	•		
					_		ist (see instructions)		
I Ta	ax-exem	npt status	▽ 501(c)(3) ┌ 501(c)()	◀ (insert no)	H(c) Grou	p exemption	number F		
J W	/ebsite	e: ► WW	W NEEFUSA ORG						
K For	m of or	ganization	Corporation Trust Associa	otton Other be	l Year of for	mation 1990	M State of legal domicile VA		
	art I		mary	duoi i otilei F	L real of for	mation 1990	14 State of legal dofficile VA		
			-	sion or most significant activities					
				STED PROFESSIONALS WHO CAN SO	LVE EVERYDA	ENVIRON	MENTAL PROBLEMS		
<u>2</u>	.								
<u> </u>	-								
Governance	2	Check th	is box 🖛 if the organization	discontinued its operations or disposed	d of more than 2	5% of its ne	t assets		
Ğ			,	erning body (Part VI, line 1a)		з	1		
න් ග				rs of the governing body (Part VI, line 1		4	11		
Ē	5	Total nur	mber of individuals employed	ın calendar year 2010 (Part V, line 2a)		5	34		
Activities &	6	Total nur	mber of volunteers (estimate	fnecessary)		6	170,000		
đ	7a -	Total uni	related business revenue from	n Part VIII, column (C), line 12		78	a 0		
	ь	Net unre	lated business taxable incom	e from Form 990-T, line 34		71	0		
					Prio	r Year	Current Year		
۵.	8	Contri	2,948,901	3,718,202					
Revenue	9	Progra	m service revenue (Part VIII	C	0				
łą,	10			mn (A), lines 3, 4, and 7d)	·	4,311	1,685		
_	11			A), lines 5, 6d, 8c, 9c, 10c, and 11e)			1,878		
	12			11 (must equal Part VIII, column (A), lı	ne	2,953,212	3,721,765		
	13			art IX, column (A), lines 1-3)		300,732			
	14	Benefit	ts paid to or for members (Pai	tIX, column (A), line 4)		C	0		
	15			oyee benefits (Part IX, column (A), lines	;		1 000 504		
Expenses	l	5-10)				1,943,353	 		
<u>₹</u>	16a			X, column (A), line 11e)		24,000	0		
五	b		ndraising expenses (Part IX, column				1 1 1 1 1 1 2 2		
	17), lines 11a-11d, 11f-24f)		1,247,438			
	18 19			nust equal Part IX, column (A), line 25) ne 18 from line 12		3,515,523			
₩ <i>9</i> 7	+	Keven	ue less expelises Subtract III	le 10 Holli line 12	Beginning	of Current			
Net Assets or Fund Balances						ear	End of Year		
988 888	20	Total a	assets (Part X, line 16)			3,021,684	3,167,114		
\$ <u>₹</u>	21	Totall	iabilities (Part X, line 26) .			586,643	501,635		
	22			ct line 21 from line 20		2,435,041	2,665,479		
	rt II		ature Block						
know				nined this return, including accompanying te. Declaration of preparer (other than offi					
		****				12-08-02			
Sig		Signa	ture of officer		Da	te			
Her	е		E W WOOD PRESIDENT						
	Т	<u> </u>	or print name and title	I	Г	Charle & 15			
		Print/Type preparer's				Check if self- employed 🕨 🏲	_ PTIN		
Paid	1	Fırm's nar	ne 🕨 RAFFA PC				Firm's EIN		
	arer	Fırm's add	Iress 1899 L STREET NW SUITE 9	00			Phone no • (202) 822-		
	Only		WASHINGTON, DC 20036				5000		

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

FOIII	rage 2
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission
	NATIONAL ENVIRONMENTAL EDUCATION FOUNDATION (THE FOUNDATION) PROVIDES AMERICANS WITH INFORMATION SOLVE EVERYDAY ENVIRONMENTAL PROBLEMS AND BRING ABOUT LASTING POSITIVE CHANGE
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	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?
	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 \$ 809,802 including grants of \$ 92,581) (Revenue \$)
	K-12 EDUCATION - INCLUDES CLASSROOM EARTH AND PLANET CONNECT, EE WEEK, BE WATER WISE, AND THE BARTLETT AWARD A CLASSROOM EARTH AND PLANET CONNECT ARE ONLINE RESOURCES DESIGNED TO HELP HIGH SCHOOL TEACHERS INCLUDE ENVIRONMENTAL CONTENT IN THEIR DAILY LESSON PLANS B NATIONAL ENVIRONMENTAL EDUCATION WEEK (EE WEEK) IS THE LARGEST ORGANIZED ENVIRONMENTAL EDUCATION EVENT IN THE UNITED STATES EE WEEK INCREASES THE EDUCATIONAL IMPACT OF EARTH DAY BY CREATING A FULL WEEK OF EDUCATIONAL PREPARATION, LEARNING, AND ACTIVITIES IN K-12 CLASSROOMS, NATURE CENTERS, ZOOS, MUSEUMS, AND AQUARIUMS C BE WATER WISE ENGAGES PARTNERS FROM THE PUBLIC, PRIVATE AND NONPROFIT SECTORS TO RAISE AWARENESS OF LOCAL WATER ISSUES AND IMPROVE WATER CONSERVATION AND STORMWATER MANAGEMENT IN SCHOOL BUILDINGS AND GROUNDS STUDENT-LED BE WATER WISE PROJECTS CAN RESULT IN SIGNIFICANT REDUCTIONS IN COSTS AND IMPROVED WATER MANAGEMENT AT PARTICIPATING SCHOOLS, AS WELL AS INCREASED ENGAGEMENT OF THE LOCAL COMMUNITY IN DEVELOPING SOLUTIONS TO WATER ISSUES THE PROGRAM HAS BEEN SUCCESSFULLY IMPLEMENTED IN MIAMI AND ATLANTA, AND IN 2011 THE FOUNDATION LAUNCHED BE WATER WISE IN WASHINGTON, DC D THE RICHARD C BARTLETT ENVIRONMENTAL EDUCATION AWARD HONORS AN OUTSTANDING TEACHER WHO HAS SUCCESSFULLY INTEGRATED EE INTO THE TRADITIONAL CLASSROOM SETTING AND SERVED AS AN INSPIRATION AND MODEL TO OTHERS THE RECIPIENT RECEIVES A \$5,000 CASH AWARD AND A TRIP TO WASHINGTON, DC TO MEET WITH MEMBERS OF THE NATIONAL EE COMMUNITY
	(Code) (Expenses \$ 673,551 including grants of \$ 187,903) (Revenue \$)
4b	(Code) (Expenses \$ 673,551 including grants of \$ 187,903) (Revenue \$) NATIONAL PUBLIC LANDS DAY (NPLD) - THE NATION'S LARGEST, SINGLE-DAY VOLUNTEER EVENT FOR PUBLIC LANDS IN THE UNITED STATES NPLD WAS HELD ON SEPTEMBER 29, 2011 NPLD BEGAN IN 1994 WITH THREE SITES AND 700 VOLUNTEERS IN SEPTEMBER 2011, OVER 170,000 VOLUNTEERS PARTICIPATED AT NEARLY 2,100 PUBLIC LAND SITES SPREAD ACROSS THE 50 STATES, WASHINGTON, DC AND THE US TERRITORIES
_	(a
4 c	(Code) (Expenses \$ 517,882 including grants of \$ 3,000) (Revenue \$)
	HEALTH AND ENVIRONMENT - ADVANCES ENVIRONMENTAL KNOWLEDGE AMONG HEALTH PROFESSIONALS TO IMPROVE THE PUBLIC'S HEALTH WITH A SPECIAL EMPHASIS ON CHILDREN AND UNDERSERVED POPULATIONS THROUGH THE DEVELOPMENT OF NATIONAL AGENDAS, TRAININGS, CURRICULUM INTEGRATION, AND STRATEGIC PARTNERSHIPS, WE FACILITATE THE INTEGRATION OF ENVIRONMENTAL HEALTH INTO HEALTH CARE PROVIDER EDUCATION AND PRACTICE THE FOUNDATION HAS TRAINED 10,000 HEALTHCARE PROFESSIONALS ON ENVIRONMENTAL HEALTH INTERVENTIONS TO PREVENT AND MANAGE DISEASES SUCH AS ASTHMA AND CONDITIONS SUCH AS OBESITY
	Other was a server / December of Cabadala O / Carada Addition 12 of 12 o
4d	Other program services (Describe in Schedule O) See also Additional Data for Description (Expenses \$ 951,879 including grants of \$ 112,906) (Revenue \$)
	Total program service expenses►\$ 2,953,114

Part TV	Checklist of	Required	Schedules
	CHCCKHSCOL	IXC GGII CG	Scriculics

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
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.	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			No
8	the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	7		
3	complete Schedule D, Part III 📆	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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</i> "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV .	16		No
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</i> "Yes," complete Schedule G, Part I (see instructions)	17		N o
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	18		No
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	19		N o
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form	20b		

Par	t IV Checklist of Required Schedules (continued)			
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	21	Yes	
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	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
	IV	28a		Νo
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If</i> "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Part I	31		Νo
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Νo
a	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
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	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	20	Yes	

Form 990 (2010)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V $$.	•	. [
			Yes	No					
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 26								
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0								
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes						
2a	Statements filed for the calendar year ending with or within the year covered by this								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes						
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	165						
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No					
b	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No					
b	If "Yes," enter the name of the foreign country 🕨								
	See instructions for 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? \cdot .	5a		Νo					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No					
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		No					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b							
7									
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b							
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No					
d	If "Yes," indicate the number of Forms 8282 filed during the year	/(NO					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νo					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No					
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
8	Sponsoring organizations maintaining donor advised funds 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?	8							
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the organization make any taxable distributions under section 4966?	9a							
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter								
	Initiation fees and capital contributions included on Part VIII, line 12 10a								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities								
	Section 501(c)(12) organizations. Enter								
	Gross income from members or shareholders								
Ь	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)								
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year								
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а	a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O								
-									
Ь	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans								
c	Enter the amount of reserves on hand								
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No					
	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14b							

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

Check if Schedule O contains a	a response to any question in this Part VI		 			. 攵

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax vear			
L	year			
b	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?	2		No
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?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Does the organization have members or stockholders?	6		Νo
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the			
Ū	year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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	9		No
	ection B. Policies (This Section B requests information about policies not required by the Internal venue Code.)			
	venue couci,		Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
	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?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
	Thus the organization provided a copy of this form 550 to an intempers of its governing body before mining the forms	11a	Yes	
b	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	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	15b	Yes	
_	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?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website.			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of			

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization NANCY SMITH

4301 CONNECTICUT AVE NW 160 WASHINGTON, DC 20008

(202)833-2933

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

- ◆ List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See 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 neither the organization nor any related organization compensated any current officer, director, or trustee

(A) Name and Title	(B) Average hours	Posi		C) (che	ck a			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) ARTHUR GIBSON CHAIR	1 00	х		х				0	0	0
(2) JL ARMSTRONG VICE CHAIR	1 00	Х		Х				0	0	0
(3) KENNETH STRASSNER TREASURER	1 00	х		Х				0	0	0
(4) DECKER ANSTROM TRUSTEE	1 00	Х						0	0	0
(5) RAYMOND BAN TRUSTEE	1 00	Х						0	0	0
(6) HOLLY CANNON TRUSTEE	1 00	Х						0	0	0
(7) PHILIPPE COUSTEAU TRUSTEE	1 00	х						0	0	0
(8) MANNY DIAZ TRUSTEE	1 00	х						0	0	0
(9) KEN OLDEN TRUSTEE	1 00	Х						0	0	0
(10) TRISH SILBER TRUSTEE	1 00	х						0	0	0
(11) BRAD SMITH TRUSTEE	1 00	х						0	0	0
(12) DIANE W WOOD PRESIDENT	40 00			Х				167,781	0	24,083
(13) NANCY SMITH SNR DIR OF FINANCE/ADMINISTRATION	40 00			Х				101,920	0	19,260
(14) DEBORAH SLITER SNR VICE PRESIDENT FOR PROGRAMS	40 00					х		138,203	0	9,808

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

(A) Name and Title	(B) Average hours per	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related		(F) Estimated amount of ot compensat	
	week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	0	from t rganızat relat organıza	the ion and ed
										+		
										+		
										+		
										+		
1b Sub-Total						· ·	_			+		
d Total (add lines 1b and 1c) .						•	F	407,904	0)		53,151
Total number of individuals (ii \$100,000 in reportable comp	-				ted	above) who	received more tha	n	•		
3 Did the organization list any f on line 1a? If "Yes," complete:					ey e	mploy	ee, o	r highest compens	ated employee	3	Yes	No No
For any individual listed on lin organization and related organization.										4	Yes	140
5 Did any person listed on line : services rendered to the orga									r individual for	5	103	No
Section B. Independent Co	ontractors											
Complete this table for your fi \$100,000 of compensation fr			ındep	end	ent c	ontra	tors	that received more	e than			
1	(A) Name and business ad	dress						Descr	(B) iption of services		(C Comper	
										\perp		
										+		
2 Total number of independent co \$100,000 in compensation fro			ot lir	nıte	d to t	those	ıste	d above) who receiv	ed more than	+		

	7.1	Statement of Revenue	Г	/ # N	(B)	(6)	(B)
v? 1a	a	Federated campaigns 1a		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
Ξ		Membership dues 1b					
		Fundraising events 1c	-				
₹ `							
≅ '		Related organizations 1d	1,801,983				
E '	_	Government grants (contributions) 1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1,916,219				
5 9	g	Noncash contributions included in lines 1a-1f \$	9,737				
룓 .	_		L	2 710 202			
. ·	h	Total. Add lines 1a-1f	P	3,718,202			
			Business Code				
2							
	b						
'	С						
۱ ۹	d						
24	e						
. 1	f	All other program service revenue					
	g	Total. Add lines 2a-2f	. ▶				
3	_	Investment income (including dividends, intere					
		and other similar amounts)	▶	1,685			1,685
4		Income from investment of tax-exempt bond proceeds $\ \ .$. ▶				
5		Royalties	. ▶				
		(ı) Real	(II) Personal				
6	a	Gross Rents					
	b	Less rental expenses					
- ,	C	Rental income					
	d	or (loss) Net rental income or (loss)	. ▶				
		(i) Securities	(II) Other				
78	а	Gross amount					
		from sales of assets other					
	b	than inventory Less cost or					
	_	other basis and sales expenses					
,	c	Gain or (loss)					
	d	Net gain or (loss)	•				
88		Gross income from fundraising events (not including					
		\$					
		of contributions reported on line 1c) See Part IV, line 18					
		a					
	Ь	Less direct expenses b					
		Net income or (loss) from fundraising events .	. ►				
98		Gross income from gaming activities See					
		Part IV, line 19 . a					
	D	Less direct expenses					
		ь_					
		Net income or (loss) from gaming activities .	►				
10	υa	Gross sales of inventory, less returns and allowances .					
		a					
		Less cost of goods sold b					
<u> </u>	С	Net income or (loss) from sales of inventory .	, b				
-	1-		Business Code 900099	1,878			1,878
1:		MISCELLANEOUS REVENUE	900099	1,878			1,8/8
	b						
	С						
	-	All other revenue					İ
		Total. Add lines 11a-11d					

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

Δ	Section $501(c)(3)$ and $501(c)(4)$ organizations mus II other organizations must complete column (A) but are not required to c			(D)	
Do no	ot include amounts reported on lines 6b, b, 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		·	,	<u>'</u>
	in the U.S. See Part IV, line 21	181,188	181,188		
2	Grants and other assistance to individuals in the	,	,		
	U S See Part IV, line 22	215,202	215,202		
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	307,665	119,450	148,398	39,817
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	1,324,789	993,705	177,325	153,759
8	Pension plan contributions (include section $401(k)$ and section $403(b)$ employer contributions)	64,995	46,390	11,672	6,933
9	Other employee benefits	119,977	79,558	28,101	12,318
10	Payroll taxes	116,078	74,883	28,357	12,838
а	Fees for services (non-employees) Management				
b	Legal	1,743		1,743	
c	Accounting	54,141		54,141	
d	Lobbying	50,000			50,000
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other	16,811	9,541	7,270	
12	Advertising and promotion				
13	Office expenses	130,283	76,295	48,832	5,156
14	Information technology				
15	Royalties				
16	Occupancy	171,693		171,693	
17	Travel	36,925	7,378	26,360	3,187
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	48,489	48,489		
20	Interest	348		348	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	48,945		48,945	
23	Insurance	13,303		13,303	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	SUBCONTRACTS	544,622	450,374	75,483	18,765
b	LICENSES AND FEES	27,720	11,101	12,681	3,938
c	MISCELLANEOUS	11,268	8,900	2,133	235
d	DISPOSAL OF FIXED ASSET	3,334		3,334	
e	PUBLICATIONS	1,808	1,489	306	13
f	All other expenses		629,171	-690,562	61,391
25	Total functional expenses. Add lines 1 through 24f	3,491,327	2,953,114	169,863	368,350
26	Joint costs. Check here ► ☐ If following				·
	SOP 98-2 (ASC 958-720) Complete this line only if the				
	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	The state of the s		1	<u> </u>	

Part X Balance Sheet (A) (B) Beginning of year End of year 331,440 Cash—non-interest-bearing 949.349 1 1 1.230.550 2 591.068 2 1,180,903 1,398,329 3 4 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L . . . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) **A**ssets 6 7 8 8 Prepaid expenses and deferred charges 39,203 9 38,022 10a Land, buildings, and equipment cost or other basis Complete 665,224 Part VI of Schedule D 10a 10b 488.602 b Less accumulated depreciation 226,711 **10c** 176,622 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 12,877 15 13,724 15 16 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 3,021,684 16 3,167,114 **17** 278.447 17 191,721 Accounts payable and accrued expenses . 18 18 125.735 145.347 19 19 20 20 Liabilities 21 21 Escrow or custodial account liability $Complete\ Part\ IV\ of\ Schedule\ D$. . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities Complete Part X of Schedule D 182,461 25 164.567 26 586.643 26 501.635 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 Unrestricted net assets 726,004 27 939,451 Temporarily restricted net assets 1,709,037 28 1,726,028 28 Fund F 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. ŏ 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ž 2,435,041 2,665,479 33 33 Total net assets or fund balances 34 Total liabilities and net assets/fund balances 3.021.684 3.167.114 34

Ра	Check if Schedule O contains a response to any question in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		3,7	21,76
2	Total expenses (must equal Part IX, column (A), line 25)	2			
3	Revenue less expenses Subtract line 2 from line 1	3		2	230,43
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		2,4	135,04
5	Other changes in net assets or fund balances (explain in Schedule O)	5			,
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		2,6	65,47
Par	TXII Financial Statements and Reporting Check If Schedule O contains a response to any question in this Part XII			୮	
	Check if Schedule & Contains a response to any question in this rate A11	• •	•	Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 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		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separated basis	sued			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	:	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the reaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b	Yes	

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

DLN: 93493216011022

OMB No 1545-0047

Inspection

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

TRAINING FOUNDATION INC

NATIONAL ENVIRONMENTAL EDUCATION AND

Department of the Treasury Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Public Charity Status and Public Support

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

Employer identification number

54-1557043

2	Г	A scho	ol described	in section 170(b)(1)(A)(ii). (At	tach Sche	dule E)						
3	\sqcap	A hosp	ıtal or a coo	perative hospital sei	vice organiz	ation desc	rıbed ın secti o	on 170(b)(1)(A)(iii).				
4	Γ			n organization operat ty, and state	ed in conjun	ction with	a hospital des	cribed in se	ection 170(b)	(1)(A)(iii)). Enter	the	
5	Γ			erated for the benefit		or univers	sity owned or o	perated by	a governmen	ital unit de	escribe	d ın	
	_			A)(iv). (Complete Pa									
6	<u> </u>			local government or	_								
7	⊽	describ	ed in	at normally receives A)(vi) (Complete Pa		il part of it	s support from	n a governm	ental unit or f	from the g	eneral	public	1
8	\vdash			described in section		Δ) (vi) (C d	mnlete Part I	Ι)					
9	Ė.		-	at normally receives			•	•	hutions mer	nhershin f	ees an	d aro	55
	,	_		ities related to its ex								_	
		•		oss investment incoi	•	-			• •				
		-	_	janization after June						 ,			
10	Г			ganized and operated									
11	Γ	An orga one or the box	anızatıon orç more publicl	ganized and operated y supported organized bes the type of supp b Type II	l exclusively ations descr orting organ	for the be ibed in sec ization and	nefit of, to per tion 509(a)(1	form the fur) or section es 11e throi	nctions of, or 509(a)(2) S ugh 11h	ee sectio)(3).	Check
e f g	ı	other the section of the ocheck to Since A	nan foundatı 1509(a)(2) rganızatıon this box	ox, I certify that the on managers and oth received a written de	etermination	or more pu	iblicly support	ted organiza	etions describ	ed in sec	tion 50	9(a)(:	1) or
				rectly or indirectly c	ontrols, eithe	er alone or	together with	persons de	scribed in (ii))	Γ	Yes	No
		and (111) below, the	governing body of th	e the suppor	ted organı	zatıon?			1	.1g(i)		
		(ii) a fa	mily membe	er of a person describ	oed in (i) abo	ve?				1	1g(ii)		
		(iii) a 3	35% control	led entity of a persoi	n described i	n (ı) or (ıı)	above?			1	1g(iii)		
h		Provide	the following	ng information about	the supporte	ed organiza	ation(s)			_	•		
	(i) Name suppo rganız	e of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizati col (i) list your gove docume	e Ion In ted In rning	(v) Did you no organiza col (i) o suppo	otify the tion in f your	(vi Is th organiza col (i) or in the l	he tion in ganized		A mo	rii) unt of port
				instructions))	Yes	No	Yes	No	Yes	No			
									+				
						 			+				
											-+		
						1			1				
ota	ı							1					
				•		•	•		-	•			

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	under Fait III. II the	s organization i	ans to quanty u	iluei tile tests i	isted below, pie	ease co	Tiplete F	ait III.)
	ection A. Public Support	_	T					
Cal	endar year (or fiscal year beginning in) ▶	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2	010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual	4,735,443	2,868,389	2,858,601	2,948,901	3	3,718,202	17,129,536
2	grants ") 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 5	Total. Add lines 1 through 3 The portion of total contributions	4,735,443	2,868,389	2,858,601	2,948,901	3	3,718,202	17,129,536
	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							5,492,821
6	(f) Public Support. Subtract line 5 from line 4							11,636,715
S	ection B. Total Support	1	1					
	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 20	10	(f) Total
7	A mounts from line 4	4,735,443	2,868,389	2,858,601	2,948,901	3	,718,202	17,129,536
8	Gross income from interest, dividends, payments received on							
	securities loans, rents, royalties and income from similar sources	25,033	34,718	13,049	4,311		1,685	78,796
9	Net income from unrelated business activities, whether or not the business is regularly							
10	carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part		15,711	74			1,878	17,663
11	IV) Total support (Add lines 7							17,225,995
12	through 10) Gross receipts from related activiti	es, etc (See inst	ructions)			12		
13	First Five Years If the Form 990 is check this box and stop here	for the organization	on's first, second	, thırd, fourth, or fı	fth tax year as a	501(c)(3		ation, ▶
S	ection C. Computation of Pul							
14 15	Public Support Percentage for 201			11 column (f))		14		67 550 %
	Public Support Percentage for 200 33 1/3% support test—2010. If the			on line 13, and l	ine 14 is 33 1/3%	15 or more	, check th	67 340 % nis box
b	and stop here. The organization qua 33 1/3% support test—2009. If the box and stop here. The organization	alifies as a publicl e organization did n qualifies as a pu	y supported orga not check the bo iblicly supported	nization k on line 13 or 16 organization	a, and line 15 is	33 1/3%	or more, c	▶ ▽
17a	10%-facts-and-circumstances test is 10% or more, and if the organiza in Part IV how the organization med	tion meets the "fa	acts and circums	ances" test, chec	k this box and st	op here.	Explain	
b	10%-facts-and-circumstances test 15 is 10% or more, and if the organ	nızatıon meets the	e "facts and circu	mstances" test, c	heck this box an	d stop h e	ere.	▶┌
18	Explain in Part IV how the organiza supported organization Private Foundation If the organizat							▶ ┌
	instructions							▶ □

organization

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified 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 c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total in) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part IV) Total support (Add lines 9, 10c, 11 and 12) 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 Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f)) 15 16 Public support percentage from 2009 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage Investment income percentage for **2010** (line 10c column (f) divided by line 13 column (f)) 17 **17** Investment income percentage from 2009 Schedule A, Part III, line 17 18 18 19a 33 1/3% support tests—2010. 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

33 1/3% support tests-2009. 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 **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. 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. Also complete this part for any additional information. (See instructions).

Schedule A (Form 990 or 990-EZ) 2010

Additional Data

Software ID:

Software Version:

EIN: 54-1557043

Name: NATIONAL ENVIRONMENTAL EDUCATION AND

TRAINING FOUNDATION INC

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses \$	334,360	including grants of \$	8,750) (Revenue \$,
AMERICAN METEOROI VIDEOS AND ONLINE PROGRAM, THE FOUNI ENVIRONMENTAL INFO ON-LINE COURSES TH COOPERATIVE PROGR	LOGICAL SOCIETY (AM COURSES THAT MAKE T DATION AND AMS ARE ORMATION TO THEIR V AT ADDRESS THE LINK RAM FOR OPERATIONAL O HELP METEOROLOGIS	S) AND PROVINE LINKS BE PROVIDING IEWERS THE SETWEEN VERE OF SETERAL TO BE TO	IDES SCIENCE-BASED QETWEEN CLIMATE, WEATH EDUCATION AND TRAINIEFOUNDATION IS PROVINGENTED TO THE COMMENTAL INFORENTAL INF	EDUCATION FOUNDATION AND UICK FACTS, IN-DEPTH FACT SHIER AND ENVIRONMENT THROUTING TO HELP METEOROLOGISTS WITH A SHIENT IN PARTNERSHIP WITH THE CAINING (COMET) THE LOCAL A DAY OF THE L	IEETS, GH THE RELAY A SUITE OF TION IS HE EARTH
GRAPHICS AND VISUA HAS GROWN TO 215 W	ALS, FACT SHEETS AND ÆATHERCASTERS IN 20	OTHER RESC	DURCES SINCE EARTH GA	N TIED TO THE LOCAL 3-DAY FO UGE LAUNCHED IN 2005, THE PI AND 46 OF THE TOP 50 MEDIA	ROGRAM
GRAPHICS AND VISUA HAS GROWN TO 215 W COVERING 230 MILLIO (Code	ALS, FACT SHEETS AND ÆATHERCASTERS IN 20	OTHER RESC	DURCES SINCE EARTH GA	UGE LAUNCHED IN 2005, THE P	ROGRAM
GRAPHICS AND VISUA HAS GROWN TO 215 W COVERING 230 MILLIO (Code GRANT MANAGEMENT (Code	ALS, FACT SHEETS AND VEATHERCASTERS IN 20 DN VIEWERS	OTHER RESO	DURCES SINCE EARTH GA PRESENCE IN 117 CITIES	UGE LAUNCHED IN 2005, THE P AND 46 OF THE TOP 50 MEDIA	ROGRAM
GRAPHICS AND VISUA HAS GROWN TO 215 W COVERING 230 MILLIO (Code GRANT MANAGEMENT	ALS, FACT SHEETS AND VEATHERCASTERS IN 20 DN VIEWERS) (Expenses \$	OTHER RESC 011, WITH A 233,281	OURCES SINCE EARTH GAPRESENCE IN 117 CITIES	UGE LAUNCHED IN 2005, THE P AND 46 OF THE TOP 50 MEDIA 104,156) (Revenue \$	ROGRAMÍ

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DLN: 93493216011022

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

1

1

3

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

Political Campaign and Lobbying Activities

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

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities),

- ◆ 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

Provide a description of the organization's direct and indirect political campaign activities in Part IV

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) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

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

Name of the organization NATIONAL ENVIRONMENTAL EDUCATION AND TRAINING FOUNDATION INC

Employer identification number

54-1557043

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

- 2 Political expenditures

Enter the amount of any excise tax incurred by the organization under section 4955

- Part I-B Complete if the organization is exempt under section 501(c)(3).
 - Enter the amount of any excise tax incurred by organization managers under section 4955
- Yes

- If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
- Was a correction made? Yes
- If "Yes," describe in Part IV

Volunteer hours

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

- Enter the amount directly expended by the filing organization for section 527 exempt function activities 1
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities
- Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- Did the filing organization file Form 1120-POL for this year? Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. 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

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

section 4911 tax for this year?

┌ Yes ┌ No

P	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3)	and filed Form 5768 ((election
Д В	Check If the filing organization belongs to a Check If the filing organization checked bo	an affiliated group x A and "limited control" provisions apply		
	Limits on Lobbying I (The term "expenditures" means a		(a) Filing Organization's Totals	(b) Affiliated Group Totals
1 a	Total lobbying expenditures to influence public of	opinion (grass roots lobbying)	0	
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	50,000	
c	Total lobbying expenditures (add lines 1a and 1	b)	50,000	
d	O ther exempt purpose expenditures		3,447,317	
е	Total exempt purpose expenditures (add lines 1	c and 1d)	3,497,317	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	324,866	
	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 li	ne 1f)	81,217	
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -	0	
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -	o	

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 on page 4.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

Lobbying Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total			
2a	Lobbying non-taxable amount	287,812	316,703	325,776	324,866	1,255,157			
_b	Lobbying ceiling amount (150% of line 2a, column(e))					1,882,736			
c	Total lobbying expenditures	36,300	48,300	48,300	50,000	182,900			
_d	Grassroots non-taxable amount	71,953	79,176	81,444	81,217	313,790			
_e	Grassroots ceiling amount (150% of line 2d, column (e))					470,685			
f	Grassroots lobbying expenditures				lula C (Farma 200)				

che	edule C (Form 990 or 990-EZ) 2010				Pί	age 3		
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N (election under section 501(h)).	IOT fi	led F	orm	5768	3		
		(;	(a)		(a)		(b)	
		Yes	No	, F	Amoun	it		
L	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							
а	Volunteers?							
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?			-				
	Mailings to members, legislators, or the public?		\vdash	+-				
			\vdash	+-				
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?		<u> </u>	₩				
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? If "Yes," describe in Part IV		 	\vdash				
j	Total lines 1c through 1i			+-				
, 2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		I					
	If "Yes," enter the amount of any tax incurred under section 4912			┨				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912							
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		I					
	t III-A Complete if the organization is exempt under section 501(c)(4), section 5	01/6	1(5)					
	501(c)(6).	J)10-	<u>,,,,</u>					
			_	_	Yes	No		
1	Were substantially all (90% or more) dues received nondeductible by members?		- L	1				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2				
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3				
² aı	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part II answered "Yes".				ectio	n		
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).							
а	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						

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 11

Identifier | Return Reference | Explanation

Part IV Supplemental Information

Also, complete this part for any additional information

5 Taxable amount of lobbying and political expenditures (see instructions)

5

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DLN: 93493216011022

Employer identification number

OMB No 1545-0047

Open to Public Inspection

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.

Name of the organization NATIONAL ENVIRONMENTAL EDUCATION AND TRAINING FOUNDATION INC

b Assets included in Form 990, Part X

For Privacy Act and Paperwork Reduction Act Notice, see the Intructions for Form 990

54-1557043 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the

	organization answered "Yes" to Form 99	0, 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 advi funds are the organization's property, subject to the		or advised Yes No
6	Did the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit		
Pai	t III Conservation Easements. Complete	ıf the organızatıon answered "Yes" t	o Form 990, Part IV, line 7.
1 2	Purpose(s) of conservation easements held by the or Preservation of land for public use (e.g., recreating Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a quality	on or pleasure) Preservation of an Preservation of a c	certified historic structure
_	easement on the last day of the tax year		
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements	I	2b
С	Number of conservation easements on a certified his	` '	2c
d	Number of conservation easements included in (c) ac	equired after 8/17/06	2d
3	Number of conservation easements modified, transfethe taxable year -	rred, released, extinguished, or terminate	d by the organization during
4	Number of states where property subject to conserva	ation easement is located ►	
5	Does the organization have a written policy regarding enforcement of the conservation easements it holds?		dling of violations, and Yes No
6	Staff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation easem	ents during the year 🛌
7	Amount of expenses incurred in monitoring, inspecting	ng, and enforcing conservation easements	s during the year ► \$
8	Does each conservation easement reported on line 2 $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	(d) above satisfy the requirements of sec	tion Yes No
9	In Part XIV, describe how the organization reports cobalance sheet, and include, if applicable, the text of the organization's accounting for conservation easen	he footnote to the organization's financial	
Par	Complete if the organization answered "		or Other Similar Assets.
1a	If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or research	ch in furtherance of public service,
b	If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these items	public exhibition, education, or research ii	
	(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, histofollowing amounts required to be reported under SFA		or financial gain, provide the
a	Revenues included in Form 990, Part VIII, line 1		▶ \$

Cat No 52283D

Schedule D (Form 990) 2010

Part :	🚻 Organizations Maintaining Co	<u>llections of Art</u>	<u>, His</u>	<u>tori</u>	<u>cal Tr</u>	<u>easur</u>	res, or O	the	<u>r Similar Asse</u>	ts (co	ntınued)
	Using the organization's accession and other tems (check all that apply)	records, check and	y of th	ıe foll	owing t	hat are	a significa	int u	se of its collection	1	
аГ	Public exhibition		d	Γ	Loan	or exch	ange progr	ams			
ь「	Scholarly research		e	Γ	Other						
c 「	Preservation for future generations										
	Provide a description of the organization's co Part XIV	ollections and expla	ın hov	w they	/ furthe	r the o	rganızatıon	's ex	empt purpose in		
	During the year, did the organization solicit of assets to be sold to raise funds rather than t									Yes	┌ No
Part	IV Escrow and Custodial Arrang Part IV, line 9, or reported an an						answere	d "Y	es" to Form 990),	
	Is the organization an agent, trustee, custod ncluded on Form 990, Part X?	ian or other interme	≟dıary	for c	ontribu	tions o	r other ass	ets r		Yes	┌ No
b 1	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	ıng ta	able		_				
_	_						-	_	Amou	int	
_	Beginning balance						-	1c			
	Additions during the year						<u> </u>	1d			
_	Distributions during the year						-	1e			
	Ending balance							1f			
	Did the organization include an amount on Fo		e 21?						Г	Yes	│ No
	If "Yes," explain the arrangement in Part XIV				- 1 10 1	_ 11	000		1.77.1		
Part	Endowment Funds. Complete	f the organization (a)Current Year		were Prior \			orm 990 <u>,</u> O Years Back			\ Four V	ears Back
1 a	Beginning of year balance	(a)Curient real	(0)	FIIOI	Cai	(C)TWC) Teals back	(u)	illee reals back (e	ji our re	cars back
	Contributions										
	Investment earnings or losses										
	Grants or scholarships										
e	Other expenditures for facilities										
f ,	Administrative expenses										
g	End of year balance										
2 F	Provide the estimated percentage of the yea	r end balance held :	as						•		
	Board designated or quasi-endowment										
	Permanent endowment 🕨										
	Term endowment 🕨										
	Are there endowment funds not in the posses	ssion of the organiz	atıon 1	that a	are held	l and a	dmınıstered	for	the		
(organization by									Yes	No
((i) unrelated organizations			•				•	3a(i)		
	(ii) related organizations								3a(ii)	<u> </u> 	<u> </u>
	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of th	•						•	3b		<u> </u>
Part						00 Da	rt V line	10			
rait	investments—Land, Buildings	s, and Equipme	<u> 111. 3</u>			•	İ '		(-) A		
	Description of investment				ı) Cost or sıs (ınves		(b)Cost or o basis (other		(c) Accumulated depreciation	(d) Bo	ook value
	and		•	<u> </u>							
	uildings		•	<u> </u>							
	easehold improvements		•	<u> </u>				,721	115,378		130,343
	quipment		•	\vdash				,459	23,459		0
	ther						396	,044	349,765		46,279
		000			401.				•		176,622

Part VII Investments—Other Securities. See	Form 990, Part X, line 1.	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	. ,	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) should equal Form 990, Part X. col (B) line 12)		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12) Part VIII Investments—Program Related. See		12
		(c) Method of valuation
(a) Description of investment type	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, III (a) Descrip		(b) Book value
(2)		(-)
		<u> </u>
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1		<u> </u>
Part X Other Liabilities. See Form 990, Part > 1 (a) Description of Liability		
	(b) A mount	
Federal Income Taxes		
DEFERRED RENT AND LEASE INCENTIVES	164,567	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	164,567	
3 Fin 49 (ASC 740) Eastnata In Bart VIV provide the tax		nization's financial statements that reports the

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	3,721,765
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,491,327
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	230,438
4	Net unrealized gains (losses) on investments	4	
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 - 8	9	0
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	230,438
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue	er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	3,771,686
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	49,921
3	Subtract line 2e from line 1	3	3,721,765
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b .		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	3,721,765
Part 1	Reconciliation of Expenses per Audited Financial Statements With Expenses Total expenses and losses per audited financial	рег н	3,541,248
-	statements		3,371,270
	statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	1	
2 a		1	
	A mounts included on line 1 but not on Form 990, Part IX, line 25	1	
a	Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	1	
a	A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	1	
a b c	A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	1 2e	
a b c d	A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities		49,921
a b c d	A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	2e	49,921
a b c d e	A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	2e	49,921
a b c d e 3	A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	2e	49,921
a b c d e 3 4	A mounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities	2e	49,921 3,491,327 0 3,491,327

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, 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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48		THE FOUNDATION PERFORMED AN EVALUATION OF UNCERTAIN TAX POSITIONS FOR THE YEAR ENDED SEPTEMBER 30, 2011, AND DETERMINED THAT THERE WERE NO MATTERS THAT WOULD REQUIRE RECOGNITION IN THE FINANCIAL STATEMENTS OR THAT MAY HAVE ANY EFFECT ON ITS TAX-EXEMPT STATUS

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Grants and Other Assistance to Organizations, Governments and Individuals in the United States OMB No 1545-0047

DLN: 93493216011022

Department of the Treasury Internal Revenue Service Name of the organization

TRAINING FOUNDATION INC

1 (a) Name and address of

Schedule I

(Form 990)

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

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

(c) IRC Code section

Employer identification number

54-1557043

(q) Description of

Part I	General Information on Grants and Assistance	

(b) EIN

NATIONAL ENVIRONMENTAL EDUCATION AND

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to

(h) Purpose of grant

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. Part II can be

(d) A mount of cash

(e) A mount of non-

(f) Method of

organization or government	(B) EIN	if applicable	grant	cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
(1) CASCADE COUNTY CONSERVATION DISTRICT 12 THIRD STREET NW GREAT FALLS,MT 59404	81-0459725		7,013				NLPD GRANT
(2) LOSOYA INDUSTRIES LLCPO BOX 171283 SAN ANTONIO,TX 78217	20-3437535		6,350				NLPD GRANT
(3) NATIONAL AQUARIUM IN BALTIMORE501 EAST PRATT STREET BALTIMORE,MD 21202	52-1121163		8,285				NLPD GRANT
(4) NEW VISTA HIGH SCHOOL700 20TH STREET BOULDER,CO 80302	98-0238300	501(C)(3)	10,000				NLPD GRANT
(5) PENNSYLVANIA- MILITARY NATIONAL GUARD MUSEUMWILDLIFE SECTION BUILDING 11-19 UTILITY ROAD ANNVILLE,PA 50002	20-0318432		6,500				NLPD GRANT
(6) SELECT ENGINEERING SERVICES1544 WOODLAND PARK DRIVE SUITE 310 LAYTON,UT 84041	84-1378876		6,004				NLPD GRANT
(7) UNIVERSITY OF WISCONSIN-STEVENS POINT110 TNR UWSP STEVENS POINT, WI 54481	39-6006492		7,602				EDUCATION
(8) US TREASURY428 CHAPIN STREET SHAWAFB,SC 291525123			7,794				NLPD GRANT
(9) USAG REDSTONE DEPARTMENT OF THE TREASURY4488 MARTIN ROAD REDSTONE ARSENAL, AL 35898			5,321				NLPD GRANT
(10) WATKINS NURSERY 101 DRY BRIDGE ROAD MIDLOTHIAN,VA 23114			5,320				NLPD GRANT
(11) WILDLIFE CONSERVATION SOCIETY 2300 SOUTHERN BOULEVARD BRONX,NY 10460	13-1740011		6,000				EDUCATION
2 Enter total number of sect	ion 501(c)(3) and gov	vernment organizations .					4

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 Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) GRANTS	478	215,202			

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 EACH GRANT GOES THROUGH A CENTRALIZED PROCESS WITH EACH APPLICATION BEING CREATED WITH THE SAME TEMPLATE PARTICULAR ATTENTION IS PAID TO ELIGIBILITY REQUIREMENTS AND THE CRITERIA FOR GRANT SELECTION THE FACTORS THE FOUNDATION USES TO SCORE APPLICANTS INCLUDES THE PURPOSE AND RESTRICTIONS OF THE GRANTS, THE EXPECTED OUTCOMES AND TIMELINE, SUBMISSION INFORMATION, APPLICATION, AND ANY REQUIRED DOCUMENTS, SUCH AS AN AUDIT OR AN IRS DETERMINATION LETTER APPLICATIONS ARE CHECKED-IN AGAINST THE ELIGIBILITY REQUIREMENTS AND
		REQUESTED DOCUMENTS COMPLETE APPLICATIONS ARE USUALLY SCORED BY EXTERNAL JUDGES SCORES PROVIDE THE FOUNDATION WITH A LIST OF FINALISTS TO CONSIDER GRANTS ARE AWARDED BASED ON SCORES AND THE GOALS OF THE GRANT GRANTEES ARE SENT AN AWARD LETTER WITH A GRANT AGREEMENT TO BE SIGNED ALL GRANTEES ARE REQUIRED TO SUBMIT A FINAL REPORT (INCLUDING FINANCIALS) DEPENDING ON THE GRANT, THEY MAY ALSO BE REQUIRED TO SUBMIT AN INTERIM REPORT AND/OR EVALUATION ONCE A GRANT IS COMPLETE AND ALL REQUIRED REPORTS ARE SUBMITTED, A CLOSING LETTER IS SENT

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DLN: 93493216011022

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

ın Part III

section 53 4958-6(c)?

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

NATIONAL ENVIRONMENTAL EDUCATION AND TRAINING FOUNDATION INC 54-1557043 Questions Regarding Compensation Yes Νo Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e g, maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No." complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee Written employment contract Compensation survey or study Independent compensation consultant Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment from the organization or a related organization? 4a Nο 4h Participate in, or receive payment from, a supplemental nonqualified retirement plan? Νo **4**c Participate in, or receive payment from, an equity-based compensation arrangement? Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? **5**a Νo 5b Any related organization? Νo If "Yes," to line 5a or 5b, describe in Part III For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? Νo 6b Any related organization? Νo If "Yes," to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo

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

If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

8

Νo

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(ii) Bonus & (iii) Other reportable		benefits	(B)(i)-(D)	reported in prior Form 990 or Form 990-EZ
(1) DIANE W WOOD	(I) (II)	167,781 0	0	0	10,500 0	13,583 0	191,864 0	0
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Schedule J (Form 990) 2010 Page **3**

Part III Supplemental Information

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

	Identifier	Return Reference	Explanation
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Schedule J (Form 990) 2010

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OMB No 1545-0047 2010

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SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

Name of the organization NATIONAL ENVIRONMENTAL EDUCATION AND TRAINING FOUNDATION INC

Employer identification number

54-1557043

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		THE 990 IS REVIEWED BY THE SENIOR DIRECTOR OF FINANCE AND ADMINISTRATION AND THE PRESIDENT OF THE FOUNDATION AND IS THEN SENT TO THE TREASURER OF THE BOARD OF TRUSTEES FOR REVIEW THEY ARE BOTH IN CONTACT WITH THE FOUNDATION STAFF AND/OR THE AUDITORS DIRECTLY IF NEEDED THE 990 IS THEN PRESENTED TO THE FULL BOARD OF TRUSTEES FOR APPROVAL PRIOR TO FILING WITH THE INTERNAL REVENUE SERVICE

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	THE BOARD OF TRUSTEES AND STAFF HAVE A CONFLICT OF INTEREST FORM TO FILL OUT ON AN ANNUAL BASIS IF A CONFLICT OF INTEREST ARISES, ANY BOARD MEMBER FAILING TO MAKE A DISCLOSURE MAY BE SUBJECT TO DISCIPLINARY ACTION, INCLUDING DISMISSAL IF THE PRESIDENT OR A MEMBER OF THE BOARD OF TRUSTEES FAILS TO FILE A REQUIRED DISCLOSURE, THE CHAIRMAN OF THE BOARD OF TRUSTEES WILL DECIDE ON APPROPRIATE ACTION IF THE CHAIRMAN FAILS TO MAKE A REQUIRED DISCLOSURE, THE VICE CHAIRMEN WILL DECIDE AN APPROPRIATE ACTION

Identifier	Return Reference	Explanation
	' '	THE EXECUTIVE COMMITTEE REVIEWS A SALARY SURVEY AND ALSO WHAT INDIVIDUALS IN COMPARABLE POSITIONS IN OTHER, SIMILARLY SIZED NONPROFITS ARE CURRENTLY BEING PAID THIS IS DONE THROUGH REVIEW OF THE 990S OF OTHER NON-PROFITS AND ALSO PROFESSIONAL CONTACTS

Identifier	Return Reference	Explanation
		FINANCIAL INFORMATION IS PROVIDED IN THE FOUNDATION'S ANNUAL REPORT ON THE WEBSITE WWW NEEFUSA ORG THE FORM 990 IS POSTED ON WWW GUIDESTAR ORG FOR VIEWING FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST ON-LINE AND IN PRINT THE ORGANIZATIONAL DOCUMENTS ESTABLISHING THE FOUNDATION ARE AVAILABLE ONLINE