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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

Open to Public Inspection

	<u>~</u>	For the	2011 cale	ndar year, or tax year beginning , 2011, and ending					
	B	Check if	applicable	C Name of organization Environmental Health Strategy Center	Employ	er identification number			
		Address	change	Doing Business As		38-3791803			
		Name ch	-	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Telephone number				
	ñ	Initial ret	•	565 Congress Street Suite 204	•	207-699-5795			
	呂			City or town, state or country, and ZIP + 4		20. 000 0.00			
	片	Terminat		L 1		704 000			
	닏	Amende	d retum		Gross re				
	LJ	Applicat	ion pending		roup return	for affiliates? 🔲 Yes 🗹 No			
				565 Congress Street, Portland, ME 04101 H(b) Are all a	affiliates ir	ncluded? Yes No			
	1	Tax-exe	mpt status		" attach a	list (see instructions)			
	J	Website	: ► ww	w.preventharm.org H(c) Group e	exemption	number ►			
	ĸ	Form of	organization	✓ Corporation Trust Association Other ► L Year of formation 2008	M State	of legal domicile ME			
		art I	Summ						
		1		escribe the organization's mission or most significant activities; The Corporation is	rganize	d for the charitable and			
		ļ •	•	nal purposes of preventing harm to human health caused by exposure to toxic chemicals					
	ဗ	į.		lustry, and sustainable environmental solutions as a public health priority; and taking any		*************			
	Ē				other a	iction consistent			
2	ē	١ ـ		above purposes.					
2012	Governance	2		is box $ ightharpoonup$ if the organization discontinued its operations or disposed of more than 2	1 4	its net assets.			
re	ಚ	3	Number	of voting members of the governing body (Part VI, line 1a)	3	7			
-	S	4	Number	of independent voting members of the governing body (Part VI, line 1b)	4	7			
L-1	Ę	5	Total nui	mber of individuals employed in calendar year 2011 (Part V, line 2a)	5	7			
JÜN	Activities &	6	Total nui	mber of volunteers (estimate if necessary)	6	2,057			
=	⋖	7a		elated business revenue from Part VIII, column (C), line 12	7a	0			
7		b		lated business taxable income from Form 990-T, line 34	7b	0			
ΙŪ				Prior Yea		Current Year			
SCANNED		8	Contribu	tions and grants (Part VIII, line 1h)	100	684,570			
3	Revenue	9		(Det VIII Co. Co.)	-100	96,560			
~ ?	Ver	10							
Ĭ	æ	1		ent income (Part VIII, column (A), lines 3, 4, and 7d)		90			
		11		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)					
		12		enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	100	781,220			
		13		nd similar amounts paid (Part IX, column (A), lines 1-3)					
		14		paid to or for members (Part IX, column (A), line 4)					
	es	15		other compensation, employee benefits (Part IX, column (A), lines 5-10)		140,889			
	Su	16a	Profession	onal fundraising fees (Part IX, column (A), line 11e)		867			
	Expenses	b	Total fun	draising expenses (Part IX, column (D), line 25) ▶ 26,192		4 <u>3</u> 4 4 x			
	تنز	17	Other ex	penses (Part IX, column (A), lines 11a-11d, 11f-24e)	20	107,762			
		18	Total exp	penses. Add lines 13-17 (must-equal Part IX, column (A), line 25)	20	249,519			
		19	Revenue	less expenses. Subtract line 18 from line 12 V.E.D.	80	531,702			
	× 8			Beginning of Curr	ent Year	End of Year			
	at Assets or nd Balances	20	Total ass	sets (Part X, line 16)	80	561,608			
	Ass Ba	21		polities (Part X, line 26)	0	45,016			
	žĚ	22		ts or fund balances Subtract line 21_from-line 20	80	516,592			
	_	art II		ture Block OGDEN. UT		0.0,002			
				ry, I declare that I have examined this return, including accompanying schedules and statements, and to the	host of a	my knowledge, and helief it in			
	tru	e, correc	t, and comp	lete Declaration of preparer (other than officer) is based on all information of which preparer has any knowled	gest of t	ny kilowieuge and belief, it is			
			<u> </u>	- A frank Government	. حج	14012012			
	Sig	ın	Sign	ature of officer Date		10/2012			
	He		, 5.9.		•				
	HC		- Turn	Michael E. Belliveau, President					
			<u>, , , , , , , , , , , , , , , , , , , </u>	e or print name and title					
	Pa	id	Pilitry	pe preparer's name Preparer's signature Date	Check [<u> 4 </u>			
	Pr	epare	r		self-emp	oloyed			
		e Onl		name ▶Firm's	s EIN ▶				
			Firm's a	nddress ▶ Phon	e no				
	Ma	y the IF	RS discus	s this return with the preparer shown above? (see instructions)		🔲 Yes 🗌 No			
	For	Paperv	vork Redu	ction Act Notice, see the separate instructions. Cat No 11282Y		Form 990 (2011)			



Cat No 11282Y



	Page 2
Part	
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	The Corporation is organized for the charitable and educational purposes of preventing harm to human health
	caused by exposure to toxic chemicals; promoting safer alternatives, clean industry, and sustainable environmental solutions as a public health priority; and taking any other action consistent with the above purposes.
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 organization's program service accomplishments for each of its three largest program services, as measured 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 \$ 93,139 including grants of \$ 0) (Revenue \$ 389,418)
	Environmental Health Program: In 2011 we educated the public about the health hazards associated with bisphenol A (BPA) and supported and won a broad phase-out of BPA from all reusable food and beverage containers sold in Maine. We educated the public
	about the Kid Safe Products Act intent, accomplishments, statutory deadlines, and requirements. We gathered, analyzed, and made
	public new data collected by Maine's Department of Environmental Protection about the use of BPA and nonylphenol ethoxylates in
	over 650 products including toys, house paint, and food packaging. We identified several hundred new supporters of safer chemicals
	and hosted screenings of the film "Living Downstream" to educate the public about the connections between use of toxic chemicals
	and cancer. We organized a scientific conference on the connections among chemicals, obesity, and diabetes that attracted over 150
	doctors, nurses, public health professionals, and health-affected individuals, and featured leading scientists in the field of obesogen
	research. We analyzed the Toxic Substance Control Act to identify the needed improvements to protect public health and provided
	strategic policy advice for the development of the Safe Chemicals Act of 2011. We coordinated the Alliance for a Clean and Healthy
	Maine, a public health coalition promoting use of safer chemicals in consumer products.
4b	(Code:) (Expenses \$ 88,471 including grants of \$) (Revenue \$ 224,616)
	Sustainable Economy Program: In 2011 we made steady progress with the University of Maine on a project to demonstrate that
	bioplastic polylactic acid can be produced to industry standard from potato processing waste. We organized an annual meeting of
	the Sustainable Bioplastics Council of Maine that attracted representatives from 20 companies to discuss emerging opportunities in
	the bio-based plastics market. We generated business and editorial support for investment in research and development bonds for
	clean technology based on sustainable use of Maine's natural resources. We also pursued cooperative agreements with companies to bring fermentation technologies to Maine to produce lactic acid from wood-derived sugars.
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
70	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	•••••••••••••••••••••••••••••••••••••••
4d	Other program services (Describe in Schedule O.)
40	(Expenses \$ including grants of \$) (Revenue \$)

Form 99				Page 3
Part	V Checklist of Required Schedules		V	
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	No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	<u></u>	
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		√
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	✓	
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		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which 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		1
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>	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
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		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	√	`
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.	¥.	A 3 . 1	,
а		11a		لـ سسميدا
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		1
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		1
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		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11e		√
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		1
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓ _
b	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		1
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
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		1
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		1
20 a b	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b		✓

Form 99	<u>, , , , , , , , , , , , , , , , , , , </u>			Page 4
Part	Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	No /
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		1
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	23		1
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	24a		1
С	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		√
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		1
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		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		1
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):	,:		1
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		1
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? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		√
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		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I </i>	33		1
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		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		1
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	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If</i> "Yes," <i>complete Schedule R</i> , <i>Part VI</i>			1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	37	1	
			റററ	12011

Part				_
	Check if Schedule O contains a response to any question in this Part V	<u>· · ·</u>	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 9	\sqcap	res	NO
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and) "
	reportable gaming (gambling) winnings to prize winners?	1c	/	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		_•	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 7			,
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	1	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	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		✓_
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?	5a		√
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
Vu.	organization solicit any contributions that were not tax deductible?	6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	0a		<u> </u>
	gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).	<u> </u>	*	
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	ĺ		
	and services provided to the payor?	7a		1
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		✓
d	If "Yes," indicate the number of Forms 8282 filed during the year	-		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		✓
9 h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		√
8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		✓
U	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.	<u> </u>		V
a	Did the organization make any taxable distributions under section 4966?	9a		J
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		7
10	Section 501(c)(7) organizations. Enter:		٠, ا	Ť.
a	Initiation fees and capital contributions included on Part VIII, line 12	8	,	` ` `
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b		**	
11	Section 501(c)(12) organizations. Enter:	1		, i
a	Gross income from members or shareholders			
Ь	Gross income from other sources (Do not net amounts due or paid to other sources			
40-	against amounts due or received from them.)			
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
13	If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers.			
ıs a	Is the organization licensed to issue qualified health plans in more than one state?	10-		
a	Note. See the instructions for additional information the organization must report on Schedule O	13a		1
b	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	.		
С	Enter the amount of reserves on hand	.		
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		1
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		•

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.	•							
	Check if Schedule O contains a response to any question in this Part VI			. 🔽					
Secti	on A. Governing Body and Management								
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	7 _ ^	Yes	No					
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			, 1					
ь 2	Enter the number of voting members included in line 1a, above, who are independent . 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?	7	_	1					
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? .	t 3		1					
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders?								
b	Are any governance decisions of the organization reserved to (or subject to approval by) members stockholders, or persons other than the governing body?	, 7b		1					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	* * * * * * * * * * * * * * * * * * * *							
a b 9	The governing body?	8a 8b	✓						
Secti	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	ode.)	✓					
			Yes	No					
10a b	Did the organization have local chapters, branches, or affiliates?	1		1					
11a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		-					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	11a	\ <u>'</u>	<u> </u>					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	182					
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		1						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done								
13	Did the organization have a written whistleblower policy?	13	1						
14 15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by	/ 14 ^	√						
_	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		م أيسا						
a b	The organization's CEO, Executive Director, or top management official	15a 15b	1	 -					
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)	130	_	5					
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?	t 16a	; , , , ; ;						
	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	3	*** *** *** *** *** **	, , , , , , , , , , , , , , , , , , ,					
	on C. Disclosure								
17 18	List the states with which a copy of this Form 990 is required to be filed ► Maine Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	on 501((c)(3)s	only)					
19 20	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict and financial statements available to the public during the tax year State the name, physical address, and telephone number of the person who possesses the books and record			oolicy,					
	organization: ► Michael E. Belliveau, 565 Congress Street, Suite 204, Portland, ME 04101, 207-699-5795	is or the	;						

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Page	1

Form	000	1201	41

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

•									
Check if Schedule O con	1-2	41 1 11 1 E 4 1 1 1 1 1 1 1 1 1 1 1 1 1							
Check it Schedule () con	tains a response to any div	action in thic Part VIII							
Officers in Confedence C Conf	tanio a reopense te any qui		 •		•	•	•	•	

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. 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 no	r any relate	d orga	anız	atio	n c	ompe	nsa	ted any currer	t officer, director	r, or trustee.
(A) Name and Title	(B) Average hours per week	box, office	unles	Pos neck ss pe d a d	rson	e than o is both or/trust	an tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Ken Geiser, Chair	3	 ✓		/				-0-	-0-	-0-
(2) Gail Carlson, Secretary/Treasurer	2	1		1				-0-	-0-	-0-
(3) Jessa Barnard, Director	2	1						-0-	-0-	-0-
(4) Priscilla Carothers, Director	2	1						-0-	-0-	-0-
(5) Jeannie Mattson, Director	2	1						-0-	-0-	-0-
(6) Hannah Pingree, Vice Chair	2	1		1				-0-	-0-	-0-
(7) Sharon Rosen, Director	2	1				-		-0-	-0-	-0-
(8) Michael Belliveau, President	50			1	1	1		19,938	-0-	1,918
(9)										· · · · · · · · · · · · · · · · · · ·
(10)							-			
(11)										
(12)					-	_	-			
(13)										
(14)										

Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	yee:			lighe	st C	ompensated E	mployees (continu	ued)
					•	C) ition						
	(A)	(B)			neck	more	e than o		(D)	(E)	.	(F)
	Name and title	Average hours per					is both or/trus		Reportable compensation	Reportab compensation		Estimated amount of
		week		I	_	$\overline{}$		<u> </u>	from	related	1	other
		(describe hours for	Individual trustee or director	State	Officer	Key employee	ng g	Form	the organization	organizatio (W-2/1099-N		compensation from the
		related	cto	Ì	=	를	st co	<u>ā</u>	(W-2/1099-MISC)			organization
		organizations in Schedule	T g	al tr	ļ	oyee) mp					and related organizations
		O)	l é	Institutional trustee]	Highest compensated employee					·
				L [®]			藍				i	
(15)									·			
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(24)		-										
(25)		_	 		├	├-	1	-	<u> </u>	-		
(23)		1				ŀ		ļ				
1b	Sub-total	L	l	l	Щ.		<u> </u>	┢	19,938		-0-	1,918
	Total from continuation sheets to Part							•				
d								•	19,938		-0-	1,918
2	Total number of individuals (including but							e) w	ho received m	ore than \$1	00,000	O of
	reportable compensation from the organ											
_												Yes No
3	Did the organization list any former of							emp	oloyee, or high	est compe	nsated	~ =
_	employee on line 1a? If "Yes," complete							•				3 🗸
4	For any individual listed on line 1a, is the											ا فا الله
	organization and related organizations individual	greater tri	an p	150,	,000) ()	ı re	S,	complete Sci	leaule J lo	r suci	4
5	Did any person listed on line 1a receive of	r accrue co	omne	nsa	tion	froi	m anv	. un	related organi	 ration or inc	Jividus	. I
•	for services rendered to the organization											1 5 V
Section	on B. Independent Contractors						-		·			
1	Complete this table for your five highest	compensat	ed inc	dep	end	ent	contr	act	ors that receive	ed more tha	ın \$10	0,000 of
	compensation from the organization. Rep											
	year.											
	(A)								(B)			(C)
	Name and business add	iress							Description of s	ervices		Compensation
none								<u> </u>				
								\vdash				
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								+-				
_ _	Total number of independent contractor	rs (includia	na bi	ıt n	not	limit	ed to	1 ++	nose listed ab	ove) who		
_	received more than \$100,000 of compens							- u	-0-	OFO, WITO	_	
	. 755								<u>`</u>			- 000

Part	<u>ФУШ</u>	Statement of Revenue		_			
3 3 1 3 1				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
its Its	1a	Federated campaigns 1a					
Contributions, Gifts, Grants and Other Similar Amounts	Ь	Membership dues 1b					
	ြင	Fundraising events 1c	15,097				
ifts ar A	ď	Related organizations 1d					
n, G	e	Government grants (contributions) 1e					
Sir	f	All other contributions, gifts, grants,					
utj.	•	and similar amounts not included above	669,473				
Q 로	g	Noncash contributions included in lines 1a-1f \$	003,473				
νς E	h	Total. Add lines 1a–1f		684,570			
9	 "	Total. Add lines 1a-11	Business Code	004,570			
eu l	2a	Contract revenues	541610	97 500	97 500		
Program Service Revenue	b	Conference revenues	611430	87,500 7,070	87,500 7,070		
9	-	Alliance fees	541200	1,740	1,740		
چَ	d	Honorium	611430	250	250		
Š	l		611430	230	250		
Iau	e f	All other program convex revenue					
rog		All other program service revenue.		96,560			<u> </u>
	3	Total. Add lines 2a–2f		96,360			
	"	and other similar amounts)	•		00		
			L	90	90		
	4 5	Income from investment of tax-exempt be					
	3	Royalties	(n) Personal				
	6a		(ii) i ciscilai				
	b	Less: rental expenses Rental income or (loss)					** 1
	d	Net rental income or (loss)	•				
	7a	Gross amount from sales of (i) Securities	(II) Other				
	, , ,	assets other than inventory	(1) 02101				·
	b	Less cost or other basis					*
	c	and sales expenses . Gain or (loss)					7
	d	Net gain or (loss)	•	- **		- /****	
e	8a	Gross income from fundraising	, , , ,				
Revenue	Oa	events (not including \$					
ě	1	of contributions reported on line 1c).					
er H	ļ	One David IV. Pres. 40					
Othe	_						
Ò	b	Less: direct expenses b Net income or (loss) from fundraising				wa	
		Gross income from garning activities	events				
	Ja	See Part IV, line 19 a					
	ь	Less: direct expenses b					
		Net income or (loss) from gaming acti	vities				
	1	Gross sales of inventory, less	villes P				-
		returns and allowances a					
	ь	Less: cost of goods sold b	 				
		Net income or (loss) from sales of inve					l
	- ٽ	Miscellaneous Revenue	Business Code				
	11a			~ ~~			
	''a		 				
	c		-				
	ď	All other revenue	,	·			
	e	Total. Add lines 11a-11d					
	12	Total revenue. See instructions.		781,220	96,560		
		- · · · · - · · · - · · · · · · · · · ·		,	00,000		I .

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)

- 7	Check if Schedule O contains a respons	se to any question i	in thic Part IV		
20.00	t include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	
	o, and 10b of Part VIII.	Total expenses	Program service	Management and	(D) Fundraising
			expenses	general expenses	expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21		:		, and the state of
2	Grants and other assistance to individuals in				
-	the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				the second second
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	21,857	18,578	1,093	2,186
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	69,779	45,745	12,687	11,347
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,202	788	219	195
9	Other employee benefits	39.390	25,823	7,162	6,405
10	Payroll taxes	8,660	6,052	1,321	1,287
11	Fees for services (non-employees):	0,000	0,032	1,021	1,201
а	Management				
b	Legal	2,636	2,636		
C	Accounting	11,047		11.047	
d	Lobbying			,	
е	Professional fundraising services. See Part IV, line 17	867	^ ₂ .	() A	867
f	Investment management fees				·
g	Other	57,326	56,826	500	
12	Advertising and promotion				
13	Office expenses	3,728	2,605	569	554
14	Information technology	5,751	4,019	877	855
15	Royalties [
16	Occupancy [8,285	5,789	1,264	1,232
17	Travel	7,069	6,596		473
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings .	4.003	3,609	394	
20	Interest		.,		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .	1,075		1,075	
23	Insurance	2,306		2,306	
24	Other expenses Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If	,		, ,	-
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)			* *	,
	· ·				*
a	Alliance program expenses	1,967	1,967		
b	Other supplies & services	1,072	162	120	790
C	Bank, payroll, filing & misc. fees	794		794	
d	Dues & memberships All other expenses missellaneous	280 425	445	280	
е 25	All other expenses miscellaneous Total functional expenses. Add lines 1 through 24e		415	10	06 400
25 26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here if following SOP 98-2 (ASC 958-720)	249,519	181,611	41,716	26,192

2 Savings and temporary cash investments 3 3 400,090	P	art X	Balance Sheet			
2 3400,090				, <i>,</i>	,	
3 Pledges and grants receivable, net 4 Accounts receivable, from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 5		1	Cash-non-interest-bearing	80	1	148,564
4 Accounts receivable, net		2	Savings and temporary cash investments		2	400,090
4 Accounts receivable, net		3	Pledges and grants receivable, net		3	
employees, and highest compensated employees. Complete Part II of Schedule L 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(5), and contributing employers and sponsoring organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 1 Less: accumulated depreciation 1 Investments—publicly traded securities. See Part IV, line 11 1 Investments—other securities. See Part IV, line 11 1 Intangible assets 1 Intangible assets. See Part IV, line 11 1 Intangible assets. See Part IV, line 11 1 Counts payable and accrued expenses 1 To Accounts payable and accrued expenses 1 To Entar payable 2 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 2 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 2 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 2 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 2 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 2 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule D 2 Payables to curren		4			4	
Schedule L		5	Receivables from current and former officers, directors, trustees, key	,	ر به برش	, , , ,
6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(6), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employeses' beneficiary organizations (see instructions) 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 1 Less: accumulated depreciation 1 Investments—publicly traded securities 1 Investments—publicly traded securities 1 Investments—publicly traded securities 1 Investments—publicly traded securities 1 Investments—pother securities. See Part IV, line 11 1 Investments—pother securities. See Part IV, line 11 1 Interpretation in the securities of the securities of the securities of the securities. See Part IV, line 11 1 Interpretation in the securities of the securities. See Part IV, line 11 1 Investments—program-related See Part IV, line 11 1 Interpretation in the securities of the securitie			employees, and highest compensated employees. Complete Part II of	,		23 - 3
4958(h(1)), persons described in section 4958(c)(3)(8), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net 8 Inventrories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 10			Schedule L		5	
employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) 7 Notes and loans receivable, net		6		, ,	* **	****
## Propages beneficiary organizations (see instructions) 7 Notes and loans receivable, net 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 11 Investments—bublicly traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—organ=related See Part IV, line 11 14 Intangble assets 14 Intangble assets 15 Other assets. See Part IV, line 11 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 17 45,016 18 Grants payable 20 Tax-exempt bond liabilities 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 persons. Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liability. Add lines 17 through 25 26 Total liabilities. Add lines 17 through 25 27 Unrestricted net assets 28 30C, partial stock for trust principal, or current funds 30 Captal stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 33 Total erasers for fund balances. 80 33 516,592					*, '	* * *
7 Notes and loans receivable, net 3 8 8 8 8 9 Prepard expenses and deferred charges 9 Prepard expenses and deferred charges 9 9 9 9 9 9 9 9 9					**	
9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 10b	əts		<u>. </u>	<u> </u>		
9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part IV of Schedule D 10b	SS		The state of the s			
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b Less: accumulated depreciation 10b 2,469 10c 3,070 Investments—publicly traded securities 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 12 Investments—program-related See Part IV, line 11 13 Investments—program-related See Part IV, line 11 13 Intangible assets 14 Intangible assets 15 Other assets. See Part IV, line 11 15 9,884 16 Total assets. Add lines 1 through 15 (must equal line 34) 80 16 561,608 17 Accounts payable and accrued expenses 177 45,016 18 Grants payable and accrued expenses 177 45,016 18 Grants payable and accrued expenses 179 Deferred revenue 199 Deferred revenue		-			9	
b Less: accumulated depreciation 10b 2,469 10c 3,070	i	ıva				[
11			100		٠	
12		_	***************************************			3,070
13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 15 9,884 16 Total assets. Add lines 1 through 15 (must equal line 34) 80 16 561,608 17 Accounts payable and accrued expenses 17 45,016 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Escrow or custodial account demployees, and disqualified persons. Complete Part II of Schedule L 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 0 26 45,016 Organizations that follow SFAS 117, check here ▶						
14						
15 Other assets. See Part IV, line 11 15 9,884 16 Total assets. Add lines 1 through 15 (must equal line 34) 80 16 561,608 17 Accounts payable and accrued expenses 17 45,016 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 26 Total liabilities. Add lines 17 through 25 0 26 45,016 27 Unrestricted net assets 80 27 210,506 28 Temporarily restricted net assets 28 306,086 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34 30 Capital stock or trust principal, or current funds 30 31 Pald-in or capital surplus, or land, building, or equipment fund 31 31 32 33 Total net assets or fund balances 80 33 516,592 33 Total net assets or fund balances 80 33 516,592 33 Total net assets or fund balances 80 33 516,592 33 Total net assets or fund balances 80 33 516,592 33 35 35 35 35 35 35 3			· -			
16			-			0 884
17				80		ļ
18 Grants payable	_					<u> </u>
19 Deferred revenue			· · ·			10,010
Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25 0 26 45,016 Unrestricted net assets 80 27 210,506 27 210,506 28 Temporarily restricted net assets 80 27 210,506 29 Permanently restricted net assets 80 27 210,506 29 20 Permanently restricted net assets 9 29 Paid-in or capital surplus, or current funds 9 30 20 31 Paid-in or capital surplus, or land, building, or equipment fund 9 31 Retained earnings, endowment, accumulated income, or other funds 9 32 33 516,592 30 33 516,592						
Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		20			20	
Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		21	Escrow or custodial account liability. Complete Part IV of Schedule D .		21	
Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34. Universtricted net assets Temporarily restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. Capital stock or trust principal, or current funds Capital stock or trust principal, or current funds Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances 24 24 25 26 Check derivation parties 27 28 29 210,506 28 306,086 29 29 210,506 29 20 210,506 29 20 20 210,506 20 210,506 20 210,506 20 210,506 20 210,506 210,506 220 230 24 24 25 25 25 25 27 210,506 28 306,086 29 29 20 20 20 210,506 20 210,506 20 210,506 20 210,506 20 210,506 20 210,506 20 210,506 20 210,506 20 210,506 210	es.	22			,= 1	. / %
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Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34. Universtricted net assets Temporarily restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. Capital stock or trust principal, or current funds Capital stock or trust principal, or current funds Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances 24 24 25 26 Check derivation parties 27 28 29 210,506 28 306,086 29 29 210,506 29 20 210,506 29 20 20 210,506 20 210,506 20 210,506 20 210,506 20 210,506 210,506 220 230 24 24 25 25 25 25 27 210,506 28 306,086 29 29 20 20 20 210,506 20 210,506 20 210,506 20 210,506 20 210,506 20 210,506 20 210,506 20 210,506 20 210,506 210	ab		Complete Part II of Schedule L		22	
Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D	7				23	
parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D					24	
of Schedule D		25				
26 Total liabilities. Add lines 17 through 25						
Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets		00				45.040
lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets	_	20		U	20	45,016
27 Unrestricted net assets	es			,	,	,
28 Temporarily restricted net assets	nc	27	· · · · · · · · · · · · · · · · · · ·	80	27	210 506
29 Permanently restricted net assets	ale		_			
Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	d E					555,555
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	Ë			×		> \
30 Capital stock or trust principal, or current funds	or F			**** 3	,	
Paid-in or capital surplus, or land, building, or equipment fund	ts (30	Capital stock or trust principal, or current funds	m ha beesta bi a suu sa aa aa ba sii sii	30	
32Retained earnings, endowment, accumulated income, or other funds3233Total net assets or fund balances8033516,59234Total liabilities and net assets/fund balances8034561,608	sse	31			31	
33 Total net assets or fund balances	ţ	32	Retained earnings, endowment, accumulated income, or other funds .		32	
34 Total liabilities and net assets/fund balances 80 34 561,608	Z			80	33	516,592
		34	Total liabilities and net assets/fund balances	80	34	561,608

Form 9	90 (2011)	Page 12
Par	XI Reconciliation of Net Assets	
	Check if Schedule O contains a response to any question in this Part XI	<u></u> . 🗸
1	Total revenue (must equal Part VIII, column (A), line 12)	781,220
2	Total expenses (must equal Part IX, column (A), line 25)	249,519
3	Revenue less expenses Subtract line 2 from line 1	531,702
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4	80
5	Other changes in net assets or fund balances (explain in Schedule O)	29,826
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33,	
	column (B))	561,608
Part	XII Financial Statements and Reporting	
	Check if Schedule O contains a response to any question in this Part XII	<u> 🗆</u>
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.	Yes No
2a b c	Were the organization's financial statements compiled or reviewed by an independent accountant? Were the organization's financial statements audited by an independent accountant?	2a
d	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:	
3а	Separate basis Consolidated basis Both consolidated and separate basis 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 🗸
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	3b
		Form 990 (2011)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization **Environmental Health Strategy Center** 38-3791803 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 9 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a Type I **b** Type II c Type III-Functionally integrated e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . 11g(iu) Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (iv) is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9) in col (i) listed in your the organization in organization in colsupport governing document? col (i) of your (i) organized in the above or IRC section support? US? (see instructions)) Yes No Yes Yes No (A) (B) (C) (D) (E)

Total

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

<u>Secti</u>	on A. Public Support							
Calen	dar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")				100	684,570	684.670	
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						33 1,010	
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3				100	684,570	684,670	
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)	*	***	,				
6				*		· · · · · · · · · · · · · · · · · · ·	138,035	
6 Secti	Public support. Subtract line 5 from line 4. on B. Total Support						546,635	
	dar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(a) 2000	(4) 2010	(a) 2011	(A Tatal	
7	Amounts from line 4	(a) 2001	(0) 2006	(c) 2009	(d) 2010 100	(e) 2011 684,570	(f) Total 684,670	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar				100	004,370	084,070	
	sources					90	90	
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.)					96,560	96,560	
11	Total support. Add lines 7 through 10		,		,		781,400	
12	Gross receipts from related activities, etc	(see instruction	ons)			12		
13	First five years. If the Form 990 is for th	e organization	's first, second	d, third, fourth	, or fifth tax ye	ear as a section	n 501(c)(3)	
	organization, check this box and stop her	re <u>.</u>	<u>.</u> .				▶ ☑	
Secti	on C. Computation of Public Suppor	<u>_</u>						
14	Public support percentage for 2011 (line 6			1, column (f))		1'4	%	
15	Public support percentage from 2010 Sch					15	%	
16a	331/3% support test—2011. If the organiz	zation did not d	check the box	on line 13, and	d line 14 is 331/	3% or more, ch		
b	should the house of the The experience of the circle of the third of t							
17a	· · · · · · · · · · · · · · · · · · ·							
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizat Explain in Part IV how the organization me supported organization	ion meets the eets the "facts	"facts-and-cir- and-circumst	rcumstances" ances" test. Ti	test, check the organization	is box and sto n qualifies as a 	and line op here. publicly	
18	Private foundation. If the organization did instructions						see	

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.)

	1 the organization rails to quality	under the te	sala liateu Dell	Jw, piease co	implete Falt I	1.,	
	on A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees						
2	received. (Do not include any "unusual grants") Gross receipts from admissions, merchandise		ļ				
_	sold or services performed, or facilities						
	furnished in any activity that is related to the						
•	organization's tax-exempt purpose		 				
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
_	· ·						
5	The value of services or facilities furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5		 	-			
о 7а	Amounts included on lines 1, 2, and 3						
, u	received from disqualified persons .				}		
ь	Amounts included on lines 2 and 3		 			 -	
b	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b		<u> </u>				
8	Public support (Subtract line 7c from		1	/ ,	`, <u>,,</u> ;	· ·	.3\
	line 6.)	<u> </u>	47	7 /8 >	, °, **		<i>\$</i>
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 201°	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,			i			
_	royalties and income from similar sources .		 				
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses acquired after June 30, 1975			[
_	·		 				
C 11	Add lines 10a and 10b		 				
11	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or		 				
-	loss from the sale of capital assets						
	(Explain in Part IV.)			[
13	Total support. (Add lines 9, 10c, 11,		 	_			
	and 12.)			[
14	First five years. If the Form 990 is for the		n's first, secon	d, third, fourth	, or fifth tax ye	ar as a se	ection 501(c)(3)
	organization, check this box and stop he	re			-		
	on C. Computation of Public Suppor		<u> </u>				
15	Public support percentage for 2011 (line 8					15	%
16	Public support percentage from 2010 Sch			<u> </u>	<u></u>	16	%
	on D. Computation of Investment In					1 !	
17	Investment income percentage for 2011 (17	%
18	Investment income percentage from 2010					18	%
19a	331/3% support tests—2011. If the organi						
J.	17 is not more than 33½%, check this box						
b	331/2% support tests—2010. If the organiz line 18 is not more than 331/2%, check this l	auon did not (check a box on	iine 14 or line 1	ya, and line 16	is more th	an 331/3%, and
20	Private foundation. If the organization di						
40	i intere i deni decidir. Il tile digalitzation di	a not one on	DOX OIL III IE 14	, 13a, UI 13D, C	HECK HIS DOX	and see in	structions 🕨 🔲

_	
Page	

Part IV	Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).
Part II, Sec	ction B, line 10 - Other income in 2011:
President/	Chief Executive Officer's contracts to provide consulting support to other organizations: \$87,500
Revenues	from scientific conference on connections among chemicals, obesity, and diabetes: \$7,070
Fiscal spo	nsor fees from Alliance for a Clean and Healthy Maine: \$ 1,740
	Chief Executive Officer's conference honorarium: \$ 250
	ner income: \$96,560
	•

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

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

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

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

	1 504()(0) 1	# NOT SI LE 5700 / L		44.5 6 1 1 5 1 1 5 5	
	· · · · · -	that have NOT filed Form 5768 (elec		· · · ·	
	•	" to Form 990, Part IV, line 5 (Prox	y Tax) or Form 990-1	EZ, Part V, line 35c (Proxy Ta	ax), tnen
	ection 501(c)(4), (5), or (6) orga of organization	anizations Complete Part III	·	Employer ider	ntification number
	onmental Health Strategy Co	antor		Employer ide	38-3791803
			dor costion FO1	(a) aria a sastian 507	
		e organization is exempt ur		``	organization.
1	-	the organization's direct and ind		•	•
2					}
3	Volunteer hours				
Part	Complete if the	e organization is exempt ur	der section 501	(c)(3).	
1		excise tax incurred by the organ		on 4955	<u> </u>
2		excise tax incurred by organizati		r section 4955	<u> </u>
3		ed a section 4955 tax, did it file f			Yes No
4a					. Yes No
b	If "Yes," describe in Part				
Part		e organization is exempt ur	der section 501	(c), except section 501	(c)(3).
1	Enter the amount direct	ly expended by the filing organ	nization for section	527 exempt function	<u> </u>
	activities				
2	Enter the amount of the	filing organization's funds cont	ributed to other or	ganizations for section	
	527 exempt function acti	ivities		▶ \$	i
3	Total exempt function e	expenditures. Add lines 1 and	2. Enter here and	d on Form 1120-POL,	
	line 17b			▶ \$;
4	Did the filing organization	n file Form 1120-POL for this ye	ar?		Yes No
5	Enter the names, address	ses and employer identification r	number (EIN) of all s	section 527 political organi	izations to which the filing
		ents For each organization listed			
		ontributions received that were p			
	as a separate segregated	fund or a political action comm	ttee (PAC). If addition	onal space is needed, prov	ride information in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
			``	filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly delivered to a separate
					political organization If
			_		none, enter -0-
(1)					
				<u> </u>	
(2)		ļ			
				<u> </u>	ļ————
(3)					
			 		
(4)		ļ			1
		 		 	
(5)		 			
			+	 	
(6)		}	{	1	1

d Grassroots nontaxable amount

Grassroots ceiling amount (150% of line 2d, column (e))

Grassroots lobbying expenditures

Sched	lule C (Form 990 or 990-EZ) 2011					Page 2
Par	t II-A Complete if the organization	n is exempt u	nder section 50	1(c)(3) and filed	Form 5768 (ele	ection under
	section 501(h)).					
A (Check ► ☐ if the filing organization be					oup member's
	name, address, EIN, expe	nses, and shar	e of excess lobb	ying expenditure	es).	
в (Check 🕨 🗌 if the filing organization ch	necked box A a	nd "limited contr	rol" provisions a	pply.	
		bying Expenditu			(a) Filing	(b) Affiliated
_	(The term "expenditures" m	neans amounts	paid or incurred.)		organization's totals	group totals
1a	Total lobbying expenditures to influence	e public opınıon ((grass roots lobbyi	ng)	578	
b	Total lobbying expenditures to influence	e a legislative bo	dy (direct lobbying)	346	
C	Total lobbying expenditures (add lines 1	la and 1b) .			924	
d	Other exempt purpose expenditures .				248,595	
e	Total exempt purpose expenditures (ad	d lines 1c and 1c	d)		249,519	
f	Lobbying nontaxable amount. Enter columns.	the amount fro	om the following	table in both	49,904	
	If the amount on line 1e, column (a) or (b) is	: The lobbying	nontaxable amount	is:		
	Not over \$500,000	20% of the am	ount on line 1e			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess of	ver \$500,000.	_	•
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess of	ver \$1,000,000	% \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	,
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess ov	er \$1,500,000	^	
	Over \$17,000,000	\$1,000,000.			jê Ç	* * * * * * * * * * * * * * * * * * * *
g	Grassroots nontaxable amount (enter 2	5% of line 1f)			12,476	
h					-0-	
i	Subtract line 1f from line 1c. If zero or le				-0-	
j	If there is an amount other than zero	_		-		☐ Yes ☐ No
	reporting section 4911 tax for this year	?		· · · · · ·		☐ fes ☐ No
	(Some organizations that m columns below.	ade a section 50 See the instruc	tions for lines 2a	not have to comp through 2f on pa		•
	Lobbyin	g Expenditures	During 4-Year Av	eraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
2 a	Lobbying nontaxable amount	-0-	-0-	-0-	49,904	49,904
t	Lobbying ceiling amount (150% of line 2a, column (e))		285 °		à À	74,856
c	Total lobbying expenditures	-0-	-0-	-0-	924	924

-0-

-0-

-0-

-0-

-0-

-0-

Schedule C (Form 990 or 990-EZ) 2011

12,476

18,714

578

12,476

578

		(election under section 501(h)).	1	a)	1	(b)	
For e	ach "Yo lobby	es" response to lines 1a through 1i below, provide in Part IV a detailed description ing activity.	Yes	No		moun	 it
1	legisla	the year, did the filing organization attempt to influence foreign, national, state or local tion, including any attempt to influence public opinion on a legislative matter or indum, through the use of:	ς.	, , , , , , , , , , , , , , , , , , ,	*	** *	; vý 2 s **
а	Volunt		- *	-	,		
b		eers? taff or management (include compensation in expenses reported on lines 1c through 1i)?	-		1		*
C		advertisements?			-		
d		gs to members, legislators, or the public?					
е		ations, or published or broadcast statements?		 	 		
f		s to other organizations for lobbying purposes?					
g		contact with legislators, their staffs, government officials, or a legislative body?					
ĥ		, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			ļ · · · · ·		_
i		activities?					
j	Total.	Add lines 1c through 1i					
2a		e activities in line 1 cause the organization to be not described in section 501(c)(3)?					·
b		," enter the amount of any tax incurred under section 4912					
C	If "Yes	," enter the amount of any tax incurred by organization managers under section 4912					
d		iling organization incurred a section 4912 tax, did it file Form 4720 for this year?			<u> </u>	`	
Part	Ш-А	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).)(5), d	or se	ction		
		30 1(c)(o).				Yes	No
1	Were	substantially all (90% or more) dues received nondeductible by members?			1	163	110
2		e organization make only in-house lobbying expenditures of \$2,000 or less?		•	2	+	†
3		e organization agree to carry over lobbying and political expenditures from the prior year?			3	+	<u> </u>
Part	III-B	Complete if the organization is exempt under section 501(c)(4), section 501(c)				Щ.	.l
		501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Of answered "Yes."	R (b)	Part	III-A,	line :	3, is
1	Dues,	assessments and similar amounts from members		1		-	-
2		n 162(e) nondeductible lobbying and political expenditures (do not include amounts al expenses for which the section 527(f) tax was paid).	of	× ***			
а	Currer	ıt year		2a			
b	Carryo	ver from last year		2b			
С	Total			2c			
3	Aggre	gate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notic	ces were sent and the amount on line 2c exceeds the amount on line 3, what portion of	the				
	excess	s does the organization agree to carryover to the reasonable estimate of nondeductible lobby	/ıng	5 mm			
_		olitical expenditure next year?	•	4			
5	_	e amount of lobbying and political expenditures (see instructions)	<u></u>	5			
Pari		Supplemental Information					
Comp	ete tris	part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; lete this part for any additional information.	Part II	-A; aı	nd Parl	: II-B,	line
i Alse	o, comp	iete tiis part for any additional information.					
	·						-
	·- 						
- 							
	·						
							-

Schedule C (Fo	orm 990 or 990-EZ) 2011	Page 4
Part IV	Supplemental Information (continued)	
.,		
.,		
	•••••••••••••••••••••••••••••••••••••••	
	······································	
	•••••••••••••••••••••••••••••••••••••••	

		······································

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Name of the organization Employer identification number **Environmental Health Strategy Center** 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) . . Aggregate value at end of year 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? 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 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). Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area ☐ Protection of natural habitat Preservation of a certified historic structure 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 Total number of conservation easements 2a Total acreage restricted by conservation easements Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a 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? 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)? 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 (ASC 958), 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 (ASC 958), 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 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 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1 **\$**_____ **b** Assets included in Form 990, Part X

ı	Pa	a	_	2

Part	II Organizations Maintaining	Collections of	Art, His	torical 1	reasures	, or O	her Similar As	sets (co	ntinued)
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and ot	her reco	rds, chec	k any of th	e follov	ving that are a s	ignificant	use of its
а	☐ Public exhibition		d	□ Loan	or exchang	ge prog	rams		
b	☐ Scholarly research		е	☐ Othe	r				
С	☐ Preservation for future generations								
4	Provide a description of the organizat	ion's collections a	and expl	ain how t	hey further	the org	ganization's exer	npt purpo	se in Part
_	XIV.								
5	During the year, did the organization								
Dod	assets to be sold to raise funds rather								s No
Part					anization	answe	rea "Yes" to Fo	orm 990,	Part IV,
1a	line 9, or reported an amoun ls the organization an agent, trustee,				or contribut		other seeds n		
Id	included on Form 990, Part X?								s 🗆 No
b	If "Yes," explain the arrangement in Pa					• •		16	S 🗀 NO
U	ii res, explain the arangement in re	art Arv and compr	ere me n	mownig t	abie.		A	mount	
С	Beginning balance					10			
ď	Additions during the year					10		•	
e	Distributions during the year					16			
f						11			
2a	Did the organization include an amour							□ Ye	s 🗌 No
b	If "Yes," explain the arrangement in Pa	•	,						
Par			ation ar	swered	"Yes" to F	orm 9	90, Part IV, line	10.	
		(a) Current year	(b) Pr	or year	(c) Two year	rs back	(d) Three years back		years back
1a	Beginning of year balance	-0-							4.4.4
b	Contributions	356,086						- 12	देवीर्दे ।
C	Net investment earnings, gains, and							7.5	Y - 32 (%)
	losses							Service .	in the state of th
đ	Grants or scholarships [-						- 346/45	: # <u>\$</u>
е	Other expenditures for facilities and								
	programs							2.30	
f	Administrative expenses								V. Field
g	End of year balance	356,086							4
2	Provide the estimated percentage of the	he current year en	id baland	e (line 1g	ı, column (a	i)) held	as:		
а	Board designated or quasi-endowmer	nt 🕨14	4_%						
Ь	Permanent endowment >	0 %							
С	Temporarily restricted endowment	86 %							
0-	The percentages in lines 2a, 2b, and 2								
3a	Are there endowment funds not in the organization by:	e possession of th	e organi	zation the	at are held	and ad	ministered for tr		
									Yes No
	(i) unrelated organizations (ii) related organizations					•		3a(i)	· /
h	If "Yes" to 3a(II), are the related organi	zatione lietad ac ri	· · ·	 on Sahad	 ulo D2	•		3a(ii) 3b	
4	Describe in Part XIV the intended uses					• •		36	L
Part									
	Description of property	(a) Cost or ot		1	or other basis	(c)	Accumulated	(d) Book	v value
	Second of property	(investm		1 ' '	ther)		epreciation	(u) 5007	Value
1a	Land			 		*	,		
b	Buildings								
c	Leasehold improvements							-	
d	Equipment		5,539				2,469		3,070
е	Other								
Total.	Add lines 1a through 1e (Column (d) m	nust equal Form 9	90, Part .	X, columr	n (B), line 10)(c))	•		3,070

(a) Description of Invalidation Americal Century or category (c) Book value (a) Membro of valuation (Cast or end of year marker value	Part VII	Investments—Other Securities	See Form 990, Part X,	line 12.	
(2) Closely-held equity interests (3) Clther (A) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	(8	Description of security or category		(c) Method of valu	
(3) Other (4) (6) (7) (7) (7) (7) (8) (8) (8) (8) (8) (8) (8) (8) (8) (8	(1) Fınancia	derivatives			
(A) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C		held equity interests			
(6) (7) (8) (9) (9) (9) (9) (10) (10) (10) (10) (10) (10) (10) (10					
(C)					
(f) (f) (f) (g) (h) (h) (g) (h) (h) (h) (h) (h) (h) (h) (h) (h) (h					
(5) (7) (8) (9) (9) Total_Column (b) must equal form 980, Part X, col (B) line 12.) ▶ Part XIII Investments—Program Related, See Form 990, Part X, line 13.					
(f)					
(5) (6) (7) (8) (9) (9) (10) (10) (11) (12) (13) (14) (15) (15) (16) (17) (18) (19) (19) (10) (10) (10) (10) (10) (10) (10) (10					
(b) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶ Part VIII Investments — Program Related. See Form 990, Part X, Inne 13. (e) Method of valuation Cost or end-of-year market value	*				
Total, Column (b) must equal Form 990, Part X, col. (B) line 12.)					
Investments - Program Related. See Form 990, Part X, Inne 13.					
Investments - Program Related. See Form 990, Part X, Inne 13.	Total. (Column	(b) must equal Form 990, Part X, col (B) line 12.)		* ,	* J
(a) Description of investment type (b) Book value (c) Method of valuation Coat or end-of-year market value (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g		Investments - Program Related	. See Form 990, Part X	line 13.	
(1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (10) Total. (Column (b) must equal Form 390, Part X, col. (B) line 13.) ► Part IX Other Assets. See Form 990, Part X, line 15. (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ► Part X Other Liabilities. See Form 990, Part X, line 25. 1. (a) Description (abultay (b) Book value (1) Federal income taxes (2) (3) (4) (6) (6) (6) (7) (6) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ► (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ► (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ► (8) (9) (10) (11) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ► (8) (9) (10) (11) (11) (12) (13) (14) (15) (15) (16) (17) (18) (18) (19) (19) (19) (10) (10) (11) (10) (11) (11) (11) (12) (13) (14) (15) (15) (16) (17) (17) (18) (18) (18) (19) (19) (19) (19) (19) (19) (19) (19				(c) Method of valu	
C	/1\				
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Part X		mn (h) must equal Form 990. Part Y or	ol (R) line 15)		
1. (a) Description of liability (b) Book value (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶ 2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the		Other Liabilities See Form 990	Part X line 25	· · · · · · · · · · · · · · · · · · ·	
(1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶ 2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the				* * * * * * * * * * * * * * * * * * * *	Y 22 Y 34
(2) (3) (4) (5) (6) (7) (8) (9) (10) (11) Total. (Column (b) must equal Form 990, Part X, col (B) line 25) > 2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the	(1) Federal			, sa	
(4) (5) (6) (7) (8) (9) (10) (11) Total. (Column (b) must equal Form 990, Part X, col (B) line 25) > 2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the	(2)				
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(7) (8) (9) (10) (11) Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the					
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(9) (10) (11) Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the					*
(10) (11) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) 2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the				1	,*
(11) Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶ 2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the				4	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶ 2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the		 		-	*
2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the	<u></u>	h) must equal Form 900 Part Y and (P) line 25)		-	** *
organization's liability for uncertain tax positions under FIN 48 (ASC 740).	2. FIN 48 (A	SC 740) Footnote In Part XIV provide	the text of the footpots to	the organization's financial statem	ante that reports the
	organization	n's liability for uncertain tax positions un	nder FIN 48 (ASC 740).	and organization s imancial statem	ente mai reports me

	10 5 (1 5 m) 5 5 5 7 T		rage ·
Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial State	ments	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	-
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	
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 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue per	er Return	
1	Total revenue, gains, and other support per audited financial statements	1	
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		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIV)	T _S i	
е	Add lines 2a through 2d	. _2e	
3	Subtract line 2e from line 1	. 3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	Light.	
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV.)		
C	Add lines 4a and 4b	. 4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	. ,	
1	Total expenses and losses per audited financial statements	. 1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses	- [] []	
d	Other (Describe in Part XIV.)	- - -	
e	Add lines 2a through 2d	. <u>2e</u>	
3	Subtract line 2e from line 1	. 3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	4,	
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV.)		
С 5	Add lines 4a and 4b		
	XIV Supplemental Information	. 3	
	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4	· Port IV lines 1h	and 2h
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 co	mplete this part t	o provide
any ac	dditional information.		
		, 	
Part V	, Endowment Funds, line 4:		
		_	
The B	oard Designated funds are set aside as a contingency fund subject to certain restrictions in the Board's	Operating Reserve	Fund
Policy	. The Temporarily Restricted funds are intended for future expenses in programming and general suppo	rt. These funds w	rill be
releas	ed as their donor restrictions are met.		
			· -

Schedule D (Form 990) 2011 Page 5				
Part XIV	Supplemental Information (continued)			

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		•••••••		
		-		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

2011

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Open to Public Inspection

Employer identification number

Environmental Health Strategy Center	38-3791803
Part VI, Section B, line 11b - Process for organization's review of Form 990:	
This Form 990 was prepared by the bookkeeper and the Managing Director, and then reviewed by the	President/Chief Executive Officer and
Executive Management Team. Following Management approval, the Form 990 was circulated to all Di	rectors for their review before filing,
Part VI, Section B, line 12c - Enforcement of conflict of interest policy:	
Following annual disclosure of any conflicts, Directors, Officers, and key employees are expected to	make on-going disclosures of any
relevant conflicts that are germane to issues under consideration by the Board. The organization was	s not aware of any failures to comply
with this policy in 2011.	
Form VI, Section B, line 15 a+b - Establishment of compensation for Chief Executive Officer and other	key employees:
The Board of Directors reviews and and approves the compensation for the President/Chief Executive	Officer according to the Executive
Compensation Policy adopted by the Directors. The President/Chief Executive Officer reviews and ap	proves the compensation for all other
employees according to a Salary Policy adopted by the Directors. Both of these policies use available	market comparability data and are
reviewed and updated periodically. All compensation justification and decisions are documented in ir	n writing either in minutes from
Directors meetings (for the President/Chief Executive Officer) or official personnel records (for other	employees).
Part VI, Section C, line 19 - Organization's process for making governing documents, policies, and fin	ancials publicly available:
The organization's key documents are made available for review by members of the public upon requ	est, subject to approval by the
Board.	
Part XI, line 5 - Other changes in net assets:	
Increase in accrued expenses (vacation and sick leave accruals) - \$ 22,340	
Increase in prepaid expenses (2012 expenses paid in December 2011) - \$7,334	
Miscellaneous adjustment - § 152	
Total change in net assets: \$ 29,826	

Schedule O (Form 990 or 990-EZ) (2011)	Page 2
Name of the organization	Employer identification number
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