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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

2011

Open to Public Inspection

A For the 2011 calendar year, or tax year beginning 04-01-2011 and ending 03-31-2012

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization
NATIONAL COUNCIL FOR AIR AND STREAM IMPROVEMENT

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
PO BOX 13318

City or town, state or country, and ZIP + 4
RESEARCH TRIANGLE PARK, NC 277093318

D Employer identification number
13-1085344

E Telephone number
(919) 941-6400

G Gross receipts $ 18,214,455

F Name and address of principal officer
RONALD YESKE
PO BOX 13318
RESEARCH TRIANGLE PARK, NC 277093318

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) **Are all affiliates included?** ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☐ 501(c)(3) ☑ 501(c) (6) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Website:** ▶ WWW NCASI ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶ | L Year of formation 1943 | M State of legal domicile DE

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
PROVIDER OF SCIENTIFIC RESEARCH TO THE FOREST PRODUCTS INDUSTRY TO ACHIEVE ENVIRONMENTAL GOALS

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	16
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	16
5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	113
6	Total number of volunteers (estimate if necessary)	6	0
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	1,602,271	1,765,663
	9	Program service revenue (Part VIII, line 2g)	12,040,639	13,157,857
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	28,024	16,733
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	49,003	49,050
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	13,719,937	14,989,303
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1,001,451	980,486
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	10,568,778	11,077,088
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶0		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	3,230,571	3,071,594
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	14,800,800	15,129,168
	19	Revenue less expenses Subtract line 18 from line 12	-1,080,863	-139,865
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	8,272,715	7,986,855
	21	Total liabilities (Part X, line 26)	6,478,205	8,835,216
	22	Net assets or fund balances Subtract line 21 from line 20	1,794,510	-848,361

Part II Signature Block

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

Sign Here

▶ Signature of officer | 2013-02-14 Date

▶ RONALD YESKE PRESIDENT
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶	Date	Check if self-employed ▶ ☐	Preparer's taxpayer identification number (see instructions)
Firm's name (or yours if self-employed), address, and ZIP + 4 ▶	JOHNSON LAMBERT LLP 700 SPRING FOREST ROAD STE 115 RALEIGH, NC 27609		EIN ▶ 52-1446779 Phone no ▶ (919) 719-6400

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . ☑

1 Briefly describe the organization's mission

TO PROVIDE TECHNICAL INFORMATION AND SCIENTIFIC RESEARCH TO THE FOREST PRODUCTS INDUSTRY NEEDED TO ACHIEVE ENVIRONMENTAL GOALS AND PRINCIPLES

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ **Yes** ☑ **No**

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these changes on Schedule O

4 Describe the 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 $ including grants of $) (Revenue $)

SOUTHERN REGIONAL PROGRAM - NCASI'S SOUTHERN REGIONAL CENTER (SRC) IS A CENTER FOR EXCELLENCE IN RESEARCH ON AIR QUALITY MANAGEMENT IN THE PULP & PAPER AND BUILDING PRODUCTS INDUSTRIES RESEARCH ACTIVITIES INCLUDE (A) DEVELOPMENT OF METHODS FOR MEASURING EMISSIONS FROM MANUFACTURING PROCESSES, AND (B) TECHNICAL EVALUATION OF OPTIONS FOR CONTROLLING EMISSIONS FROM MANUFACTURING PROCESSES THE SRC PROGRAM ALSO INCLUDES RESEARCH ON SUSTAINABLE FOREST MANAGEMENT AND TOXICOLOGY SRC OUTREACH ACTIVITIES INCLUDE ORGANIZATION AND EXECUTION OF NCASI'S ANNUAL SOUTHERN REGIONAL MEETING CLIENTS SERVED INCLUDE ENVIRONMENTAL PROFESSIONALS IN THE FOREST PRODUCTS INDUSTRY AND GOVERNMENT AGENCIES RECENT PRODUCTS OF THE SRC PROGRAM INCLUDE CHARACTERIZATION, MEASUREMENT, AND REPORTING OF VOCS EMITTED FROM SOUTHERN PINE WOOD PRODUCTS SOURCES (TB 991, SEPTEMBER 2011), REVIEW OF AIR EMISSION SOURCE TEST METHODS USED IN CANADA (TB 987, JULY 2011), CONTROL AND FATE OF SMALL SPILLS AND ACCIDENTAL RELEASES OF PETROLEUM PRODUCTS DURING FORESTRY OPERATIONS (TB 990, AUGUST 2011), HANDBOOK OF CHEMICAL-SPECIFIC INFORMATION FOR SARA SECTION 313 FORM R REPORTING

4b (Code) (Expenses $ including grants of $) (Revenue $)

WEST COAST REGIONAL PROGRAM - NCASI'S WEST COAST REGIONAL CENTER (WRC) FOCUSES ON ENVIRONMENTAL CHEMISTRY, CLIMATE CHANGE, AND FOREST WATERSHED MANAGEMENT RESEARCH ACTIVITIES IN THE WRC PROGRAM INCLUDE (A) DEVELOPMENT AND EVALUATION OF METHODS FOR MEASURING CHEMICALS IN EFFLUENTS FROM PULP AND PAPER MILLS, (B) DEVELOPMENT OF METHODS FOR ESTIMATING GREENHOUSE GAS EMISSIONS FROM MANUFACTURING FACILITIES IN THE FOREST PRODUCTS INDUSTRY, AND (C) FIELD STUDIES OF THE EFFECTS OF FORESTRY PRACTICES ON AQUATIC ECOSYSTEMS WRC OUTREACH ACTIVITIES INCLUDE ORGANIZATION AND EXECUTION OF NCASI'S ANNUAL WEST COAST REGIONAL MEETING CLIENTS SERVED INCLUDE ENVIRONMENTAL PROFESSIONALS IN THE FOREST PRODUCTS INDUSTRY AND GOVERNMENT AGENCIES RECENT PRODUCTS OF THE WRC PROGRAM INCLUDE THE POTENTIAL FOR BIOGENIC FORMATION OF ACETONE, METHYL ETHYL KETONE, AND TOLUENE IN PULP AND PAPER MILL RESIDUALS (TB 989, JULY 2011), COMPARATIVE STUDY OF TOTAL NITROGEN AND TOTAL PHOSPHORUS DIGESTION METHODS IN PULP AND PAPER MILL WASTEWATERS (TB 995, JANUARY 2012), ASSESSING THE EFFECTIVENESS OF CONTEMPORARY FORESTRY BEST MANAGEMENT PRACTICES (BMPS) FOCUS ON ROADS (SR 12-01, JANUARY 2012)

4c (Code) (Expenses $ including grants of $) (Revenue $)

NORTHERN REGIONAL CENTER - NCASI'S NORTHERN REGIONAL CENTER (NRC) IS A CENTER FOR EXCELLENCE IN RESEARCH ON WATER QUALITY MANAGEMENT IN THE FOREST PRODUCTS INDUSTRY RESEARCH ACTIVITIES INCLUDE (A) TRACKING AND EVALUATION OF WATER QUALITY CRITERIA AND METHODS FOR THEIR DERIVATION, (B) TECHNICAL EVALUATION OF OPTIONS FOR CONTROLLING EMISSIONS FROM MANUFACTURING PROCESSES THE NRC PROGRAM ALSO INCLUDES RESEARCH ON SUSTAINABLE MANUFACTURING AND SUSTAINABLE FOREST MANAGEMENT NRC OUTREACH ACTIVITIES INCLUDE ORGANIZATION AND EXECUTION OF NCASI'S ANNUAL NORTHERN REGIONAL MEETING CLIENTS SERVED INCLUDE ENVIRONMENTAL PROFESSIONALS IN THE FOREST PRODUCTS INDUSTRY AND GOVERNMENT AGENCIES RECENT PRODUCTS OF THE NRC PROGRAM INCLUDE A REVIEW OF PROCEDURES FOR ESTIMATING METHANE EMISSIONS FROM AERATED STABILIZATION BASINS (TB 996, MARCH 2012), NCASI ENVIRONMENTAL NEWS FOR RECYCLERS (QUARTERLY NEWSLETTER), NUMERIC NUTRIENT CRITERIA IMPLEMENTATION WORKSHOP & WEBCAST (MAY 17, 2011)

(Code) (Expenses $ including grants of $) (Revenue $)

WESTERN WILDLIFE, EASTERN WILDLIFE, NORTHWEST AQUATIC BIOLOGY, SUSTAINABLE FORESTRY, SOUTHERN AQUATIC BIOLOGY, STATISTICS AND MODEL DEVELOPMENT GROUP, FOREST WATERSHED

4d Other program services (Describe in Schedule O)

(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses** ▶$

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1		No
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		
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	Yes	
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		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, 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		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII.*	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII.*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX.*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X.*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, 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, Part I*	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Part II and IV*	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U S ? *If "Yes," complete Schedule F, Part III and IV*	16		No
17	Did the organization report a total of more than $15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? **Note.** All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer questions 24b–24d and complete Schedule K. If "No," go to line 25*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		
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		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	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 owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		No
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		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	48			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
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	113			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)					
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		No
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 or securities account)?			4a	Yes	
b	If "Yes," enter the name of the foreign country ▶CA 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		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible?			6a	Yes	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b	Yes	
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		
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	7d				
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		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state			13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the aggregate amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 16			
b	Enter the number of voting members included in line 1a, above, who are independent	1b 16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		**2**		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		**3**		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		**4**		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		**5**		No
6	Did the organization have members or stockholders?		**6**	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		**7a**	Yes	
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**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body?		**8b**	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		**9**	Yes	

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	**10a**	Yes	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	**10b**	Yes	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	**11a**		No
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	**12a**	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	**12c**	Yes	
13	Did the organization have a written whistleblower policy?	**13**	Yes	
14	Did the organization have a written document retention and destruction policy?	**14**	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	**15a**	Yes	
b	Other officers or key employees of the organization	**15b**	Yes	
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	**16a**		No
b	If "Yes," 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?	**16b**		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply

☐ Own website ☐ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

TAMMERAH GARREN
3106 EAST NC HIGHWAY 54
RESEARCH TRIANGLE PARK, NC 27709
(919) 941-6400

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

Check if Schedule O contains a response to any question in this Part VII . . . . ☑

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees, if any See instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

☐ Check this box if neither the organization nor any related organizations compensated any current or former officer, director, or trustee

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JIM C BOWEN DIRECTOR	1 00	X						0	0	0
(2) ROGER BREAR DIRECTOR	1 00	X						0	0	0
(3) TOM COLGROVE DIRECTOR	1 00	X						0	0	0
(4) MICHAEL COVEY DIRECTOR	1 00	X						0	0	0
(5) LYLE FELLOWS DIRECTOR	1 00	X						0	0	0
(6) RICHARD W FROST DIRECTOR	1 00	X						0	0	0
(7) DANIEL S FULTON DIRECTOR	1 00	X						0	0	0
(8) JAMES HANNAN DIRECTOR	1 00	X						0	0	0
(9) THOMAS STIGERS DIRECTOR	1 00	X						0	0	0
(10) ROBERT STRENGE DIRECTOR	1 00	X						0	0	0
(11) SCOTT WOCHOS DIRECTOR	1 00	X						0	0	0
(12) GEORGE F MARTIN DIRECTOR AS OF 3/2011	1 00	X						0	0	0
(13) DANTE PARRINI DIRECTOR AS OF 3/2011	1 00	X						0	0	0
(14) THOMAS J HOWATT DIRECTOR THRU 12/2011	1 00	X						0	0	0
(15) JOHN B CROWE CHAIRMAN	1 00	X		X				0	0	0
(16) TOMMY JOSEPH VICE CHAIRMAN	1 00	X		X				0	0	0
(17) JOHN A LUKE JR TREASURER	1 00	X		X				0	0	0

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

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(18) RONALD A YESKE PRESIDENT	40 00			X				455,259	0	72,984
(19) TAMMERAH D GARREN VICE PRESIDENT, BUSINESS AFFAIRS	40 00			X				117,626	0	28,928
(20) ALAN A LUCIER SENIOR VICE PRESIENT	40 00			X				303,717	0	71,621
(21) ASHOK K JAIN REGIONAL MANAGER-SOUTHERN REGIONAL CENTER	40 00				X			213,684	0	69,719
(22) REID A MINER VICE PRESIDENT, SUSTAINABLE MANUFACTURING	40 00				X			292,672	0	67,402
(23) JOHN E PINKERTON VICE PRESIDENT, AIR QUALITY	40 00				X			282,976	0	67,590
(24) KIRSTEN M VICE VICE PRESIDENT, CANADIAN OPERATIONS	40 00				X			229,412	0	0
(25) PAUL S WIEGAND VICE PRESIDENT, WATER QUALITY	40 00				X			192,655	0	74,033
(26) JAY P UNWIN NCASI FELLOW THRU 2/2012	40 00					X		184,662	0	56,691
(27) T BENTLEY WIGLEY PROGRAM MANAGER	40 00					X		154,433	0	65,309
(28) LARRY L IRWIN NCASI FELLOW	40 00					X		150,407	0	74,286
(29) LAWRENCE E LAFLEUR NCASI FELLOW	40 00					X		150,196	0	66,936
(30) PAUL C VAN DEUSEN PRINCIPAL RESEARCH SCIENTIST	40 00					X		138,907	0	63,930
1b Sub-Total . . . . ▶										
c Total from continuation sheets to Part VII, Section A . . . . ▶										
d Total (add lines 1b and 1c) . . . . ▶								2,866,606	0	779,429

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶26

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

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
THE HARTFORD PO BOX 660916 DALLAS, TX 75266	BUSINESS LIABILITY INSURANCE	225,308
THE BERNDT GROUP 3618 FALLS RD 3RD FLOOR BALTIMORE, MD 21211	WEBSITE DEVELOPMENT	173,478
RMSOURCE INC 1225 CRESCENT GREEN DR SUITE 120 CARY, NC 27518	IT OUTSOURCING	116,328
RSM MCGLADREY 5155 PAYSPHERE CIRCLE CHICAGO, IL 60674	ACCOUNTING OUTSOURCING	111,783

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶4

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . .	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c				
	d	Related organizations . . .	1d				
	e	Government grants (contributions)	1e 477,088				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 1,288,575				
	g	Noncash contributions included in lines 1a-1f $					
	h	**Total.** Add lines 1a-1f		1,765,663			
Program Service Revenue			Business Code				
	2a	MEMBERSHIP DUES	900099	13,059,681	13,059,681		
	b	CONFERENCES	900099	70,590	70,590		
	c	PUBLICATIONS	900099	27,586	27,586		
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f		13,157,857			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		16,733			16,733
	4	Income from investment of tax-exempt bond proceeds . .					
	5	Royalties					
			(i) Real / (ii) Personal				
	6a	Gross rents	34,948 /				
	b	Less rental expenses	11,078 /				
	c	Rental income or (loss)	23,870 /				
	d	Net rental income or (loss)		23,870			23,870
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	3,214,074 /				
	b	Less cost or other basis and sales expenses	3,214,074 /				
	c	Gain or (loss)	0 /				
	d	Net gain or (loss)		0			
	8a	Gross income from fundraising events (not including $ ______ of contributions reported on line 1c) See Part IV, line 18 . . .	a				
	b	Less direct expenses . . .	b				
	c	Net income or (loss) from fundraising events . .					
	9a	Gross income from gaming activities See Part IV, line 19 . . .	a				
	b	Less direct expenses . . .	b				
	c	Net income or (loss) from gaming activities . . .					
	10a	Gross sales of inventory, less returns and allowances .	a				
	b	Less cost of goods sold . .	b				
	c	Net income or (loss) from sales of inventory . .					
		Miscellaneous Revenue	Business Code				
	11a	RECOVERY OF PRIOR YEAR	900099	20,948			20,948
	b	REFUNDS	900099	2,435			2,435
	c	MISCELLANEOUS	900099	1,797			1,797
	d	All other revenue					
	e	**Total.** Add lines 11a–11d		25,180			
	12	**Total revenue.** See Instructions . . .		14,989,303	13,157,857	0	65,783

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)
Check if Schedule O contains a response to any question in this Part IX . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	926,466			
2	Grants and other assistance to individuals in the United States See Part IV, line 22	43,520			
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	10,500			
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,510,007			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	5,887,262			
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,176,238			
9	Other employee benefits	951,522			
10	Payroll taxes	552,059			
11	Fees for services (non-employees)				
a	Management				
b	Legal	21,120			
c	Accounting	112,671			
d	Lobbying				
e	Professional fundraising *See Part IV, line 17* . .				
f	Investment management fees				
g	Other	536,255			
12	Advertising and promotion				
13	Office expenses	315,511			
14	Information technology	83,034			
15	Royalties . .				
16	Occupancy	379,363			
17	Travel	593,232			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	212,143			
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	176,599			
23	Insurance	175,051			
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
a	TECHNICAL AND SAFETY EQ	417,093			
b	DUES AND SUBSCRIPTIONS	33,984			
c	TAXES	6,343			
d	RECRUITMENT	3,532			
e					
f	All other expenses	5,663			
25	**Total functional expenses.** Add lines 1 through 24f	15,129,168			
26	**Joint costs.** Check here ▶ ☐ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X **Balance Sheet**

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		300	1	300
	2	Savings and temporary cash investments		5,102,562	2	4,088,642
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		895,252	4	1,474,007
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		179,949	9	232,050
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a 2,588,284			
	b	Less accumulated depreciation	10b 1,044,581	1,483,092	10c	1,543,703
	11	Investments—publicly traded securities		585,236	11	621,523
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11			13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		26,324	15	26,630
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		8,272,715	16	7,986,855
Liabilities	17	Accounts payable and accrued expenses		6,121,538	17	8,456,605
	18	Grants payable			18	
	19	Deferred revenue		356,667	19	369,682
	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		0	25	8,929
	26	**Total liabilities.** Add lines 17 through 25		6,478,205	26	8,835,216
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		569,397	27	-2,058,253
	28	Temporarily restricted net assets		1,225,113	28	1,209,892
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		1,794,510	33	-848,361
	34	Total liabilities and net assets/fund balances		8,272,715	34	7,986,855

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI . . . . ☑

1	Total revenue (must equal Part VIII, column (A), line 12) . . .	1	14,989,303
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,129,168
3	Revenue less expenses Subtract line 2 from line 1	3	-139,865
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) . .	4	1,794,510
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-2,503,006
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	-848,361

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ______________ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? . .	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
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		

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ Complete if the organization is described below.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

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

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then
- Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization	Employer identification number
NATIONAL COUNCIL FOR AIR AND STREAM IMPROVEMENT	13-1085344

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

1 Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV

2 Political expenditures ▶ $

3 Volunteer hours

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

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

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities ▶ $

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

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

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

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ☐ if the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing Organization's Totals	**(b)** Affiliated Group Totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legislative body (direct lobbying)		
c	Total lobbying expenditures (add lines 1a and 1b)		
d	Other exempt purpose expenditures		
e	Total exempt purpose expenditures (add lines 1c and 1d)		
f	Lobbying nontaxable amount Enter the amount from the following table in both columns		

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

		(a)	(b)
g	Grassroots nontaxable amount (enter 25% of line 1f)		
h	Subtract line 1g from line 1a If zero or less, enter -0-		
i	Subtract line 1f from line 1c If zero or less, enter -0-		

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

	Calendar year (or fiscal year beginning in)	**(a)** 2008	**(b)** 2009	**(c)** 2010	**(d)** 2011	**(e)** Total
2a	Lobbying non-taxable amount					
b	Lobbying ceiling amount (150% of line 2a, column(e))					
c	Total lobbying expenditures					
d	Grassroots non-taxable amount					
e	Grassroots ceiling amount (150% of line 2d, column (e))					
f	Grassroots lobbying expenditures					

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

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

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

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

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

1	Dues, assessments and similar amounts from members	1	13,059,681
2	Section 162(e) non-deductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	0
b	Carryover from last year	2b	0
c	Total	2c	0
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	0
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	0

Part IV **Supplemental Information**

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

Identifier	Return Reference	Explanation

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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047
2011
Open to Public Inspection

Name of the organization
NATIONAL COUNCIL FOR AIR AND STREAM IMPROVEMENT

Employer identification number
13-1085344

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)
☐ Preservation of land for public use (e g , recreation or pleasure)
☐ Preservation of an historically importantly land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

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

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

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶______

4 Number of states where property subject to conservation easement is located ▶______

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

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

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year
▶ $ ______

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

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

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

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

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

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ ______

(ii) Assets included in Form 990, Part X ▶ $ ______

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

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ______

b Assets included in Form 990, Part X ▶ $ ______

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

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

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

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

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

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

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

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

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

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

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

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

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

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

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Term endowment ▶

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

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		220,471		220,471
b Buildings		985,776	219,125	766,651
c Leasehold improvements		79,117	70,546	8,571
d Equipment		1,302,920	754,910	548,010
e Other				
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				1,543,703

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

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

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
DUE TO FOUNDATION	8,929
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	8,929

2. Fin 48 (ASC 740) Footnote In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC740)

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	14,989,303
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	15,129,168
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-139,865
4	Net unrealized gains (losses) on investments	4	-839
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-2,502,167
9	Total adjustments (net) Add lines 4 - 8	9	-2,503,006
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-2,642,871

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

1	Total revenue, gains, and other support per audited financial statements			1	14,993,508
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	-839		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	-6,034		
e	Add lines **2a** through **2d**			2e	-6,873
3	Subtract line **2e** from line **1**			3	15,000,381
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b	-11,078		
c	Add lines **4a** and **4b**			4c	-11,078
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	14,989,303

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

1	Total expenses and losses per audited financial statements			1	15,152,105
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIV)	2d	22,937		
e	Add lines **2a** through **2d**			2e	22,937
3	Subtract line **2e** from line **1**			3	15,129,168
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	15,129,168

Part XIV Supplemental Information

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

Identifier	Return Reference	Explanation
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X	THE COUNCIL CONSIDERS UNCERTAIN TAX POSITIONS AND MANAGEMENT DOES NOT BELIEVE THERE ARE ANY SIGNIFICANT INCOME TAX UNCERTAINTIES
PART XI, LINE 8 - OTHER ADJUSTMENTS		UNREALIZED GAIN ON CURRENCY EXCHANGE -17,893 UNRECOGNIZED NET PERIODIC PENSION BENEFIT/COST -2,484,274 TOTAL TO SCHEDULE D, PART XI, LINE 8 -2,502,167
PART XII, LINE 2D - OTHER ADJUSTMENTS		UNREALIZED LOSS ON CURRENCY EXCHANGE -6,034
PART XII, LINE 4B - OTHER ADJUSTMENTS		RENTAL PROPERTY EXPENSES -11,078
PART XIII, LINE 2D - OTHER ADJUSTMENTS		RENTAL PROPERTY EXPENSES 11,078 UNREALIZED LOSS ON CURRENCY EXCHANGE 11,859

SCHEDULE F (Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
NATIONAL COUNCIL FOR AIR AND STREAM IMPROVEMENT

Employer identification number
13-1085344

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ **Yes** ☐ **No**

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of grant funds outside the United States

3 Activites per Region (Use Part V if additional space is needed)

	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	EUROPE	0	0	PROGRAM SERVICES	AFPA WORLD WATER WEEK, SFPI WORKING GROUP MEETING	1,312
	NORTH AMERICA	1	4	PROGRAM SERVICES	CARIBOU NUTRITION STUDY, ICFPA MEETING, NCASI CANADA ANNUAL MEMBER MEETING, GRANTS	865,667
	SOUTH AMERICA	0	0	PROGRAM SERVICES	IWA & FATE & EFFECT CONFERENCES	182
3a	Sub-total	1	4			867,161
b	Total from continuation sheets to Part I	0	0			0
c	**Totals** (add lines 3a and 3b)	1	4			867,161

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Check this box if no one recipient received more than $5,000 . . . . ▶ ☑
Use Part V if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	WW-ELK-5106 EFFECTS OF HERBICIDES & UNGULATE HERBIVORY ON VEGETATION DEVELOPMENT IN YOUNG PLANTATIONS ON MT ST HELENS	10,500				

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . ▶ 1

3 Enter total number of other organizations or entities . . . . ▶ 0

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)*	☐ Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? *If " Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)*	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)*	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)*	☐ Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)*	☐ Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).*	☐ Yes	☑ No

Part V **Supplemental Information**

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 WE REQUIRE THAT GRANT RECIPIENTS PREPARED TECHNICAL PROPOSALS AND SIGN AGREEMENTS DESCRIBING PROJECT SCOPE, SCHEDULE, BUDGET AND DELIVERABLES FOR LONGER-TERM PROJECTS, WE ALSO REQUIRE PERIODIC PROGRESS REPORTS TO DEMONSTRATE THAT PROJECT IS PROCEEDLING TOWARD DELIVERABLES CONTINUATION OF FUNDING IS CONTINGENT ON DEMONSTRATION OF PROGRESS

Identifier	Return Reference	Explanation
		SCHEDULE F, PART I, LINE 3 NCASI-CANADA, A REGIONAL OFFICE IN CANADA, REQUIRES SEPARATE ACCOUNTING OF REVENUES AND EXPENDITURES BECAUSE OF CURRENCY IMPLICATIONS AND DIFFERENT REGULATIONS AND STATUTES IN THE COUNTRY THE FINANCES FOR THIS OPERATION ARE INCORPORATED INTO THE TOTAL AUDITED FINANCIAL STATEMENTS FOR THE ORGANIZATION AT THE END OF THE FISCAL YEAR

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
NATIONAL COUNCIL FOR AIR AND STREAM IMPROVEMENT

Employer identification number
13-1085344

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . ☑ Yes ☐ No

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

Part II Grants and Other Assistance to Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . ▶ ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶ 11

3 Enter total number of other organizations listed in the line 1 table . . . . ▶ 6

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

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance
(1) TUITION ASSISTANCE AT UNIVERSITY OF FLORIDA	1	1,820			
(2) WORK STUDY PROGRAM AT WESTERN MICHIGAN UNIVERSITY	1	41,700			

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

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 WE REQUIRE THAT GRANT RECIPIENTS PREPARED TECHNICAL PROPOSALS AND SIGN AGREEMENTS DESCRIBING PROJECT SCOPE, SCHEDULE, BUDGET AND DELIVERABLES FOR LONGER-TERM PROJECTS, WE ALSO REQUIRE PERIODIC PROGRESS REPORTS TO DEMONSTRATE THAT PROJECT IS PROCEEDLING TOWARD DELIVERABLES CONTINUATION OF FUNDING IS CONTINGENT ON DEMONSTRATION OF PROGRESS

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 13-1085344
Name: NATIONAL COUNCIL FOR AIR AND STREAM IMPROVEMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OREGON STATE UNIVERSITYPO BOX 1086 CORVALIS,OR 97339	48-1278540	501(C)(3)	139,891				FW-HRW-1005 ALSEA WATERSHED STUDY - HYDROLOGY, FW-HRW-1005 ALSEA WATERSHED STUDY - BIOLOGY, WW-WWG-5005 BIODIVERSITY PROJECT, FW-HRW-1002 HEADWATER RESEARCH, AND WW-WWG-5002 VEG COMPOSITION, SUCCESSION & UNDERSTORY DIVERSITY IN MANAGED ECOSYSTEMS
NCASI FOUNDATIONPO BOX 13318 RESEARCH TRIANGLE PARK, NC 27709	31-1745612	501(C)(3)	9,112				CARIBOU PROJECT

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
NORTH CAROLINA STATE UNIVERSITYBOX 7214 RALEIGH,NC 27695	56-6000756	115(A)	77,860				WW-WWG-5006 FISHER RESEARCH IN N CALIFORNIA AND EW-EWG-2124 BIRD RESPONSE TO BIODIVERSITY HARVESTING TREATMENT
MISSISSIPPI STATE UNIVERSITYBOX 9690 MISSISSIPPI STATE,MS 39762	64-6000819	501(C)(3)	77,185				SF-SFG-0000 HEADWATER STREAMS IN MISSISSIPPI AND EW-EWG-2121 INVESTIGATING BIODIVERSITY RESPONSE TO GREEN TREE RETENTION IN MANAGED PINE FORESTS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
UGA RESEARCH FOUNDATION INC 475 NORTH LUMPKIN ST ATHENS, GA 30602	58-1353149	501(C)(3)	62,358				SF-SFG-2622 UGA BIOMASS HARVESTING SOIL STUDY AND SF-SFG-2609 ROUNDWOOD WET STORAGE TASK
UNIVERSITY OF WISCONSIN1848 UNIVERSITY AVE MADISON, WI 53726	39-0743975	501(C)(3)	56,204				EW-EWG-2114 WILDLIFE RESPONSES TO RESIDUAL TREE RETENTION IN RED PINE FORESTS ACROSS THE LAKE STATES REGION

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
UNIVERSITY OF NORTH CAROLINA AT GREENSBOROPO BOX 26170 GREENSBORO,NC 27402	56-6001468	N/A	53,368				SF-SFG-2614 SUSTABILITY OF BIOMASS IN SOUTHERN US FORESTS
MICHIGAN STATE UNIVERSITY301 ADMINISTRATION BLDG EAST LANSING,MI 48824	38-6005984	501(C)(3)	48,000				WW-WWG-5001 BIODIVERSITY PROJECT - RETAINED STRUCTURES

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
UNIVERSITY OF WASHINGTON4311 11TH AVE NE SEATTLE, WA 98105	91-6001537	115(A)	40,000				SF-SFG-2620 LONG-TERM SOIL PRODUCTIVITY (DOUGLAS FIR, FALL RIVER SITE PRODUCTIVITY)
AECOM1178 PAYSPHERE CIRCLE CHICAGO,IL 60674	95-2661922	N/A	39,250				GC-GCC-0000 FICAT SUPPORT AND HO-FBC-0000 WISCONSIN FOREST SECTOR ASSESSMENT FOR SUSTAINABILITY

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
LOUISIANA STATE UNIVERSITY OFFICE OF ACCOUNTING SERVICES BATON ROUGE,LA 70803	72-6000848	501(C)(3)	36,000				SF-SFG-2616 SWITCHGRASS PRODUCTION FOR BIOFUEL IN LOBLOLLY PINE AGROFORESTS
AUBURN UNIVERSITY317 S COLLEGE ST AUBURN,AL 36849	63-6022422	501(C)(3)	27,000				SF-SFG-2624 FACTORS AFFECTING FUEL CONSUMPTION AND HARVESTING COST

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CLEMSON UNIVERSITYBOX 345307 CLEMSON,SC 29634	57-6000254	501(C)(3)	25,404				SF-SFG-2617 REMOTE IDENTIFICATION & VERIFICATION OF EPHEMERAL ISOLATED WETLANDS OF THE ATLANTIC & GULF COASTAL PLAINS
UNIVERSITY OF FLORIDAG018 MCCARTY HALL D PO BOX 110110 GAINESVILLE,FL 32611	59-6002052	501(C)(3)	25,000				SF-SFG-2623 NUTRIENT CONCENTRATIONS IN STREAMS SYSTEMS DRAINING PLANTATION FOREST LANDSCAPES SYNTHESIS AND FOUNDATIONS

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
USDA FOREST SERVICEPO BOX 301550 LOS ANGELES,CA 90030	72-0564834	N/A	22,313				FW-FWG-1002 HEADWATER RESEARCH AND FW-FWG-1006 COHO SALMON ACROSS A RANGE OF MGMT
OHIO STATE UNIVERSITY RESEARCH FOUNDATION1960 KENNY RD COLUMBUS,OH 43210	31-6401599	501(C)(3)	21,279				EW-CER-2118 CERULEAN WARBLER AND EW-CER-2101 CERULEAN WARBLER

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SOCIETY OF ENVIRONMENTAL TOXICOLOGY & CHEMISTRY1010 NORTH 12TH AVE PENSACOLA,FL 32501	52-1184315	501(C)(6)	5,000				SUPPORT FOR THE SETAC PELLSTON WORKSHOP

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990, Part IV, question 23.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
NATIONAL COUNCIL FOR AIR AND STREAM IMPROVEMENT

Employer identification number
13-1085344

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☑ Tax idemnification and gross-up payments ☐ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	**1b**	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	**2**	Yes	
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply ☑ Compensation committee ☐ Written employment contract ☐ Independent compensation consultant ☑ Compensation survey or study ☑ Form 990 of other organizations ☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**	Yes	
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		
b	Any related organization? If "Yes," to line 5a or 5b, describe in Part III	**5b**		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		
b	Any related organization? If "Yes," to line 6a or 6b, describe in Part III	**6b**		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	**7**		
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	**8**		
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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

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

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) RONALD A YESKE	(i)	429,043	26,216	0	32,500	40,484	528,243	0
	(ii)	0	0	0	0	0	0	0
(2) ALAN A LUCIER	(i)	273,503	30,214	0	32,500	39,121	375,338	0
	(ii)	0	0	0	0	0	0	0
(3) ASHOK K JAIN	(i)	200,919	12,765	0	32,500	37,219	283,403	0
	(ii)	0	0	0	0	0	0	0
(4) REID A MINER	(i)	265,600	27,072	0	32,500	34,902	360,074	0
	(ii)	0	0	0	0	0	0	0
(5) JOHN E PINKERTON	(i)	259,080	23,896	0	32,500	35,090	350,566	0
	(ii)	0	0	0	0	0	0	0
(6) KIRSTEN M VICE	(i)	210,129	0	19,283	0	0	229,412	0
	(ii)	0	0	0	0	0	0	0
(7) PAUL S WIEGAND	(i)	188,321	4,334	0	32,500	41,533	266,688	0
	(ii)	0	0	0	0	0	0	0
(8) JAY P UNWIN	(i)	174,715	6,977	2,970	31,255	25,436	241,353	0
	(ii)	0	0	0	0	0	0	0
(9) T BENTLEY WIGLEY	(i)	151,463	0	2,970	32,500	32,809	219,742	0
	(ii)	0	0	0	0	0	0	0
(10) LARRY L IRWIN	(i)	150,407	0	0	33,759	40,527	224,693	0
	(ii)	0	0	0	0	0	0	0
(11) LAWRENCE E LAFLEUR	(i)	150,196	0	0	32,500	34,436	217,132	0
	(ii)	0	0	0	0	0	0	0
(12) PAUL C VAN DEUSEN	(i)	138,907	0	0	26,321	37,609	202,837	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Identifier	Return Reference	Explanation
	PART I, LINE 1A	TAX GROSS-UP PAYMENTS WERE RECEIVED BY INDIVIDUALS IN CONNECTION WITH THEIR 401(K) LUMP SUM CONTRIBUTIONS IF THE CONTRIBUTION PAID WAS IN-EXCESS TO THE ANNUAL CONTRIBUTION LIMIT
	PART I, LINE 4B	PART I, LINE 4B RONALD YESKE PARTICIPATED IN A SERP RETIREMENT FUND WITH THE FOLLOWING BALANCES INVESTMENTS $35,780 LIFE INSURANCE $ 4,611

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493045022513

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
NATIONAL COUNCIL FOR AIR AND STREAM IMPROVEMENT

Employer identification number
13-1085344

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 6	NCASI HAS TWO CLASSES OF MEMBERSHIP WITH VOTING PRIVILEDGES REGULAR MEMBERSHIP APPLIES TO MEMBER COMPANIES WITH CERTAIN MANUFACTURING OPERATIONS OR INDUSTRIAL TIMBERLANDS IN THE UNITED STATES CANADIAN MEMBERSHIP APPLIES TO MEMBER COMPANIES WITH MANUFACTURING OPERATIONS OR TIMBERLANDS IN CANADA
	FORM 990, PART VI, SECTION A, LINE 7A	ACCORDING TO THE ORGANIZATION BY-LAWS, REGULAR AND CANADIAN MEMBERSHIP PROVIDES FOR THE RIGHT TO ELECT MEMBERS OF THE GOVERNING BODY
	FORM 990, PART VI, SECTION B, LINE 11	THE BOARD HAS ELECTED TO DELEGATE REVIEW OF THE TAX FILINGS TO THE AUDIT SUBCOMMITTEE.
	FORM 990, PART VI, SECTION B, LINE 12C	THE PRESIDENT IS REQUIRED UNDER THE CONFLICT OF INTEREST POLICY TO MONITOR COMPLIANCE WITH THAT POLICY AND IDENTIFY POTENTIAL VIOLATIONS TO THE GOVERNING BOARD ON A TIMELY BASIS
	FORM 990, PART VI, SECTION B, LINE 15	ANNUALLY, AT THE DIRECTION OF THE EXECUTIVE COMMITTEE OF THE BOARD, THE PRESIDENT COMPILES A COMPENSATION REPORT THAT DOCUMENTS (I) THE RESULTS OF PUBLISHED SURVEYS OF COMPENSATION OF INDIVIDUALS IN SELECTED POSITIONS OF RESPONSIBILITY IN COMPARABLE NON-PROFIT ORGANIZATIONS, AND (II) THE EXECUTIVE AND KEY EMPLOYEE COMPENSATION REPORTED IN THE FORM 990 REPORTS OF OTHER, SIMILAR OR RELEATED, NON-PROFIT ORGANIZATIONS THIS COMPENSATION REPORT IS PROVIDED TO THE EXECUTIVE COMMITTEE, TOGETHER WITH ANY REQUESTED REFERENCES CITED IN THE REPORT, PRIOR TO THE ANNUAL COMPENSATION SETTING PROCESS CONDUCTED BY THE EXECUTIVE COMMITTEE OF THE BOARD IN ADDITION, A SALARY SURVEY IS CONDUCTED OF A SELECT NUMBER OF OUR MEMBER COMPANIES TO DETERMINE THE ANNUAL AVERAGE SALARY INCREASE BUDGETED OR PROJECTED FOR THE COMING YEAR THIS DATA IS USED TO DETERMINE THE OVERALL SALARY INCREASE AMOUNT TO BE PRESENTED TO AND APPROVED BY THE BOARD, IF ANY INDIVIDUAL SALARY INCREASES ARE DETERMINED BASED ON PRE-ESTABLISHED GOALS AND PERFORMANCE EXPECTATIONS OUTLINED IN INDIVIDUAL JOB DESCRIPTIONS THE PRESIDENT'S COMPENSATION WAS LAST REVIEWED IN DECEMBER 2012
	FORM 990, PART VI, SECTION C, LINE 19	THE CONFLICT OF INTEREST POLICY, WHISTLEBLOWER POLICY, AND RECORDS RETENTION POLICY OF THE GOVERNING BOARD ARE PUBLISHED ON THE PUBLIC SECTOR OF NCASI WEBSITE. THESE POLICIES AND OTHER GOVERNING DOCUMENTS ARE PROVIDED TO THE PUBLIC UPON REQUEST NCASI'S AUDITED FINANCIAL STATEMENTS ARE PROVIDED TO THE MEMBERSHIP UPON REQUEST, BUT ARE NOT AVAILABLE TO THE GENERAL PUBLIC
CONTACT ADDRESSES FOR OFFICERS, DIRECTORS, ETC	FORM 990, PART VII	RONALD A YESKE - 402 SW 140TH TERRACE, NEWBERRY, FL 32669
		FORM 990, PART VII HOURS PER WEEK DEVOTED TO RELATED ORGANIZATIONS RONALD YESKE - 1 00 HR/WEEK NCASI FOUNDATION
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED LOSSES ON INVESTMENTS -839 UNREALIZED GAIN ON CURRENCY EXCHANGE -17,893 UNRECOGNIZED NET PERIODIC PENSION BENEFIT/COST -2,484,274 TOTAL TO FORM 990, PART XI, LINE 5 -2,503,006

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization
NATIONAL COUNCIL FOR AIR AND STREAM IMPROVEMENT

Employer identification number
13-1085344

Part I **Identification of Disregarded Entities** (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II **Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled organization Yes	No
(1) NCASI FOUNDATION PO BOX 13318 RESEARCH TRIANGLE PARK, NC 27709 31-1745612	TO CARRY OUT THE CHARITABLE PURPOSE OF NCASI	DE	501(C)(3)	LINE 11B, II	NCASI		No

Part III **Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	**(b)** Primary activity	**(c)** Legal domicile (state or foreign country)	**(d)** Direct controlling entity	**(e)** Predominant income (related, unrelated, excluded from tax under sections 512-514)	**(f)** Share of total income	**(g)** Share of end-of-year assets	**(h)** Disproprtionate allocations?		**(i)** Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	**(j)** General or managing partner?		**(k)** Percentage ownership
							Yes	**No**		**Yes**	**No**	

Part IV **Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	**(b)** Primary activity	**(c)** Legal domicile (state or foreign country)	**(d)** Direct controlling entity	**(e)** Type of entity (C corp, S corp, or trust)	**(f)** Share of total income	**(g)** Share of end-of-year assets	**(h)** Percentage ownership

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)

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

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

	(a) Name of other organization	**(b)** Transaction type(a-r)	**(c)** Amount involved	**(d)** Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part VI **Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier	Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 13-1085344
Name: NATIONAL COUNCIL FOR AIR AND STREAM IMPROVEMENT

Form 990, Special Condition Description:

Special Condition Description

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

4d. Other program services

(Code) (Expenses $ including grants of $) (Revenue $)

WESTERN WILDLIFE, EASTERN WILDLIFE, NORTHWEST AQUATIC BIOLOGY, SUSTAINABLE FORESTRY, SOUTHERN AQUATIC BIOLOGY, STATISTICS AND MODEL DEVELOPMENT GROUP, FOREST WATERSHED

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
JIM C BOWEN DIRECTOR	1 00	X						0	0	0
ROGER BREAR DIRECTOR	1 00	X						0	0	0
TOM COLGROVE DIRECTOR	1 00	X						0	0	0
MICHAEL COVEY DIRECTOR	1 00	X						0	0	0
LYLE FELLOWS DIRECTOR	1 00	X						0	0	0
RICHARD W FROST DIRECTOR	1 00	X						0	0	0
DANIEL S FULTON DIRECTOR	1 00	X						0	0	0
JAMES HANNAN DIRECTOR	1 00	X						0	0	0
THOMAS STIGERS DIRECTOR	1 00	X						0	0	0
ROBERT STRENGE DIRECTOR	1 00	X						0	0	0
SCOTT WOCHOS DIRECTOR	1 00	X						0	0	0
GEORGE F MARTIN DIRECTOR AS OF 3/2011	1 00	X						0	0	0
DANTE PARRINI DIRECTOR AS OF 3/2011	1 00	X						0	0	0
THOMAS J HOWATT DIRECTOR THRU 12/2011	1 00	X						0	0	0
JOHN B CROWE CHAIRMAN	1 00	X		X				0	0	0
TOMMY JOSEPH VICE CHAIRMAN	1 00	X		X				0	0	0
JOHN A LUKE JR TREASURER	1 00	X		X				0	0	0
RONALD A YESKE PRESIDENT	40 00			X				455,259	0	72,984
TAMMERAH D GARREN VICE PRESIDENT, BUSINESS AFFAIRS	40 00			X				117,626	0	28,928
ALAN A LUCIER SENIOR VICE PRESIENT	40 00			X				303,717	0	71,621
ASHOK K JAIN REGIONAL MANAGER-SOUTHERN REGIONAL CENTER	40 00				X			213,684	0	69,719
REID A MINER VICE PRESIDENT, SUSTAINABLE MANUFACTURING	40 00				X			292,672	0	67,402
JOHN E PINKERTON VICE PRESIDENT, AIR QUALITY	40 00				X			282,976	0	67,590
KIRSTEN M VICE VICE PRESIDENT, CANADIAN OPERATIONS	40 00				X			229,412	0	0
PAUL S WIEGAND VICE PRESIDENT, WATER QUALITY	40 00				X			192,655	0	74,033

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JAY P UNWIN NCASI FELLOW THRU 2/2012	40 00					X		184,662	0	56,691
T BENTLEY WIGLEY PROGRAM MANAGER	40 00					X		154,433	0	65,309
LARRY L IRWIN NCASI FELLOW	40 00					X		150,407	0	74,286
LAWRENCE E LAFLEUR NCASI FELLOW	40 00					X		150,196	0	66,936
PAUL C VAN DEUSEN PRINCIPAL RESEARCH SCIENTIST	40 00					X		138,907	0	63,930