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Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

A F	or th	e 2011 calendar year, or tax year beginning 07/01, 2011, and endi	ng	C	6/30, 2	0 12
_		C Name of organization	1	D Employer identi	fication nun	nber
Вс	heck if ap	pocable CENTER FOR INTERNATIONAL ENVIRONMENTAL LAW		52-16332	20	
Γ	Addre					
\vdash	⊣ '	change Number and street (or P O box if mail is not delivered to street address) Room/suite	1	E Telephone numb	per	
H	┥	return 1350 CONNECTICUT AVE. NW, SUITE 1100		(202) 785-	8700	
Г	Term	City or town, state or country, and ZIP + 4				
\vdash	Amer		lo	G Gross receipts \$	3	,663,79
	return Appli	F Name and address of principal officer CARROLL MUFFETT	 ,	(a) Is this a group re		Yes X
_	pendi	1350 CONNECTICUT AVENUE WASHINGTON, DC 20036	١,	affiliates? H(b) Are all affiliates in	ncluded?	Yes
_	Tay_ey	empt status X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 52		If "No," attach a		
		te: ► WWW.CIEL.ORG		H(c) Group exemption		- /
				n 1989 M Sta		omicile D
_	ırt I	Summary	<i>51</i> 1011114110	==== 0.0	to or legal at	ATTICINE
	'	Briefly describe the organization's mission or most significant activities SEE PART III, LINE 1 FOR ORGANIZATION'S MISSION.				
Se	ļ					
nar					- -	
Governance	,	Charletter bar bar bar bar bar bar bar bar bar ba				
တိ		Check this box If the organization discontinued its operations or disposed of more th			1	1
න් ගු		Number of voting members of the governing body (Part VI, line 1a)				1
ij		Number of independent voting members of the governing body (Part VI, line 1b)		· · · · · ·		2
Activities		Total number of individuals employed in calendar year 2011 (Part V, line 2a)		· · · · · · · ·		
ĕ	6	Total number of volunteers (estimate if necessary)		6	+	2
		Total unrelated business revenue from Part VIII, column (C), line 12			1	
	b	Net unrelated business taxable income from Form 990-T, line 34	,			
				Prior Year		rent Year
ā	8	Contributions and grants (Part VIII, line 1h)		1,841,609		<u>,000,58</u>
nua		Program service revenue (Part VIII, line 2g)		1,019,809	•	617,85
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d).		7,485		2,63
Ľ.		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		42,115		42,71
		Total-revenue - acd-lines-8-through 11 (must equal Part VIII, column (A), line 12)		2,911,018	. 3	,663,79
		Grants and simular amounts-paid (Patt IX, column (A), lines 1-3)		199,852	•	855,67
		Benefits paid to or for members (Rant IX, column (A), line 4)		(0	
(A)		Splaries, pthe compen attion, employee benefits (Part IX, column (A), lines 5-10)		1,722,852	. 1,	,517,40
Expenses		Professional fundraising fees (Pante (Column (A), line 11e)				
per	h	Total fundraising expenses (Part IX, column (D), line 25) ► 124, 674.	-		Sper.	42 J. 4
ŭ		Other expenses Hart IX, column (A), lines 11a-11d, 11f-24e)		1,164,160	 `	849,38
		Total-expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	—	3,086,864		,222,46
			 -	-175,846		441,32
or ses		Revenue less expenses Subtract line 18 from line 12	Posinn	ng of Current Year		
ຶຮ	i	T. (1. (2. (V.) 40)		1,374,117		1 of Year , 809, 40
SSe	1	Total assets (Part X, line 16)	<u> </u>			
A PE		Total liabilities (Part X, line 26)	<u> </u>	193,978		187,93
		Net assets or fund balances Subtract line 21 from line 20	1	1,180,139	• 1	,621,46
	rt II	Signature Block				
Un	der per rect ar	alties of perjury, I declare that I have examined this return, including accompanying schedules and statement id complete. Declaration of preparer (other than officer) is based on all information of which preparer has an	ts, and to t v knowled	he best of my knov se	vledge and b	elief, it is true
		2-1	,	17	1.1	1.0
Sig		Syfry IV. Nauly		101	7/	12
Siy Hei		Sign Rure of owcer		Date		
пе	re	JEFFREY W. WANHA CFO		·		
		Type or print name and title				
		Print/Type preparer's name Preparer's signature Date	,	Check If	PTIN	
Paid		DANIEL D. O'SHEA 12/3/	1	self-employed	P00	957510
	parer	Firm's name WATKINS MEEGAN LLC	F	rım's EIN ▶ 52	-12976	95
use	Only	Firm's address > 6720-B ROCKLEDGE DRIVE, SUITE 750 BETHESDA, MD 20817			1-654-	
Mav	the II	RS discuss this return with the preparer shown above? (see instructions)				es I
		work Reduction Act Notice, see the separate instructions.		<u> </u>		rm 990 (201
	, auti	WOLK INCUDENDITION FOR INCUDE, SEE THE SENGIALE MISHAUGHUITS.			- C)I	

_		ge 2
P	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 ATTACHMENT 1	
2	Did the organization undertake any significant program services during the year which were not listed on the	
_	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O	No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	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 expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount grants and allocations to others, the total expenses, and revenue, if any, for each program service reported	
4a	(Code) (Expenses \$876,235. including grants of \$696,667) (Revenue \$0_)	
	ATTACHMENT 2	
4 b	(Code) (Expenses \$ 623,833. including grants of \$ 2,666.) (Revenue \$ 220,218.)	
	ATTACHMENT 3	
_		
4 c	(Code) (Expenses \$376,878. including grants of \$112,250.) (Revenue \$16,180.)	
	ATTACHMENT 4	
4 14	Other program services (Describe in Schedule O) ATTACHMENT 5	
→ u	(Expenses \$ 1,043,678. Including grants of \$ 44,092.) (Revenue \$ 381,784.)	
<u>4 e</u>	Total program service expenses ► 2,920,624.	
ISA	Total program service expenses > 273207021.	

Part	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	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	. 2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3_		X
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	x	
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		
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		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	 		
'	the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>	+		
0	complete Schedule D, Part III	8		Х
0	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part	"	-	
9	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part N	9		Х
4.0	Did the organization, directly or through a related organization, hold assets in temporarily restricted	-		
10	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
		10	JAME:	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	<u> Kri</u>		
	VII, VIII, IX, or X as applicable	======		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete		x	
	Schedule D, Part VI	11a		
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			v
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u>X</u>
С	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	1		37
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets	1	}	17
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1 :	,,,	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
	complete Schedule D, Parts XI, XII, and XIII	12a	Х	
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			X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
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, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H			Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?			

Par	Checklist of Required Schedules (continued)			
	·		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States		[١
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated		}	
	employees? If "Yes," complete Schedule J	23		X
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	İ		
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		L
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	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		Х
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		Х
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		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			•
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,		*	**** ,
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part N	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	l		
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part N	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
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		Х
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		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	

Statements Regarding Other IRS Filings and Tax Compliance

Form 990 (2011)

Part V

Page 5

PAGE 6

	• Check if Schedule O contains a response to any question in this Part V	<u> </u>		·
			Yes	I
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			ı
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		2 .7 2 .2 .2 .2	F
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			1
	reportable gaming (gambling) winnings to prize winners?	1c		L
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 22			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	ı
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		:-	Ī
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		I
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		Ī
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			Ī
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			I
	account)?	4a	Х	ŀ
b	If "Yes," enter the name of the foreign country ► SWITZERLAND			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			n outside
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	-R-JP-	ľ
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		İ
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		t
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			İ
	organization solicit any contributions that were not tax deductible?	6a		١
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			İ
-	gifts were not tax deductible?	6b		١
7	Organizations that may receive deductible contributions under section 170(c).		- 3	ŀ
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			ľ
	and services provided to the payor?	7a		ľ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		İ
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	1.2		İ
_	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	. 4	- 7	
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		٦
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		ľ
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		ľ
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		ſ
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		J¥	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	Ŧ.		Ē
	organization, have excess business holdings at any time during the year?	8		ľ
9	Sponsoring organizations maintaining donor advised funds.	77	~	-
	Did the organization make any taxable distributions under section 4966?	9a		ſ
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		ſ
0	Section 501(c)(7) organizations. Enter	- 1		Ē
	Initiation fees and capital contributions included on Part VIII, line 12		. ala	1
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		49	3,5411.20
1	Section 501(c)(12) organizations. Enter	775 S.	: = [į.
	Gross income from members or shareholders	4	[[=4	
	Gross income from other sources (Do not net amounts due or paid to other sources		l•A	1
	against amounts due or received from them)			-
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	er minorerenser	Ī
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			-
	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
-	Is the organization licensed to issue qualified health plans in more than one state?	13a	- <u>:-</u> F	Ē
а	Note. See the instructions for additional information the organization must report on Schedule O.	-F"	- 4	1,64
а	200 and mondonono for additional information the organization must report on ouncount O.	1 - 1	4 7 7	ا ا
	Enter the amount of reserves the organization is required to maintain by the states in which			147
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			14 C. refs 1, mil
b c	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	140		Ed. California
b c 4a	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year?	14a		Mary Sept. 1 17
b c 4a	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	990	# 13ff (11)

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

	, O. See Instructions			
	Check if Schedule O contains a response to any question in this Part VI			X
Sect	ion 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. If there are			[
	material differences in voting rights among members of the governing body, or if the governing body			
	delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent			ļ ;
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		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			,,
	supervision of officers, directors, or trustees, or key employees to a management company or other person? \dots	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		<u>X</u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			v
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			v
	stockholders, or persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	3	•	
	the year by the following			لثنا
а	The governing body?	8a	<u>X</u>	
b	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			х
Socti	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9 Codo	1	
Secu	on B. Foncies This Section B requests information about policies not required by the internal Nevenue	Coue	<i>·)</i> Yes	No
40-	Duliber and the best book of the book of t	10a		X
	Did the organization have local chapters, branches, or affiliates?	IVa		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	10b		
44-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	11a	Х	-
_	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	1 1 a		
b 12a	Describe in Schedule O the process, if any, used by the organization to review this Form 990 Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	124		
D	rise to conflicts?	12b	Х	
_	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
·	describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by	ζ<# *	,	¥ , 1
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			<u> </u>
а	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	Х	
	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	.	_	<u>'</u>
	with a taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its]		1
	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		L
Sect	ion 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 Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 5	01(c)	(3)s o	nly)
	available for public inspection Indicate how you made these available Check all that apply			
	X Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of	finte	est p	olicy,
	and financial statements available to the public during the tax year			
20	State the name, physical address, and telephone number of the person who possesses the books and records of t	пе		
	Organization ▶Jeffrey w. wanha 1350 connecticut ave. nw, suite 1100 washington, dc 20036 202-785-8700			

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	Γ-	\neg

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- · List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A)	(B) (C) (D) (E)									(F)
Name and Title	Average		Position					Reportable	Reportable	Estimated
	hours per week	1 '				e than c		compensation from	compensation from related	amount of other
	(describe	l				is both or/trust		the	organizations	compensation
	hours for related	 	Т	_	1	ı	ŕ	organization	(W-2/1099-MISC)	from the
	organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organization and related organizations
(1) KENNETH BERLIN										
BOARD CHAIR	2.00	Х		Х				0	0	(
(2) DIANNE DILLON-RIDGLEY										
TRUSTEE	2.00	Х						0	0	(
(3) DELPHINE DJIRAIBE										
TRUSTEE	1.00	Х						0	0	(
(4) DONALD KANIARU										
TRUSTEE	1.00	Х						0	0	(
(5) DIANA PONCE-NAVA]									
BOARD VICE CHAIR/TRUSTEE	2.00	Х		Х				0	0	(
(6) KATIE REDFORD, ESQ.										
TRUSTEE	1.00	Х						.0	0	(
(7) KATHY ROBB				İ						
TRUSTEE	1.00	Х						0	0	
(8) SCOTT J. STONE				ŀ				_		
TRUSTEE	1.00	Х		_				0	0	
(9) BRENNAN VAN DYKE				}						
TRUSTEE	1.00	Х		<u> </u>				0	0	(
(10) TERRY F. YOUNG										
TRUSTEE	1.00	Х						0	0	(
(11) TATIANA R. ZAHARCHENKO										
TRUSTEE	1.00	X						0	0	
(12) JEFFREY W. WANHA				l						
DIR. OF FINANCE & ADMIN	40.00			Х	_			99,446.	0	9,681
(13) W. CARROLL MUFFETT								10	_	
PRESIDENT	40.00			Х			L	134,571.	0	6,075
(14) CAMERON S. AISHTON								, , , , , , , , , , , , , , , , , , ,		
SECRETARY	40.00			Х	<u></u>			53,633.	0	8,466

Form 990 (2011)

JSA

Page 8

Part VII Section A. Officers, Directors, Tru	ıstees, Ke	y En	plo	ye	es,	and I	lig	hest Compensat	ed Employ	ees (continued)
• (A) Name and title	(B) Average hours per week (describe	box,	unles er and	Pos heck ss pe	rson Irect	e than o is both or/trust	an ee)	(D) Reportable compensation from the	(E) Reporta compensati relate organiza	on from d	(F) Estimated amount of other compensation
	hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099		from the organization and related organizations
											i
									_		
			į								
1b Sub-total c Total from continuation sheets to Part VII, So d Total (add lines 1b and 1c)	ection A .						▼ ▼ ▼	287,650. 0 287,650.		0	24,222. 0 24,222.
Total number of individuals (including but not I reportable compensation from the organization)	imited to th		iste				re	ceived more than	\$100,000	of	
3 Did the organization list any former office employee on line 1a? If "Yes," complete Schedu											Yes No
4 For any individual listed on line 1a, is the sorganization and related organizations greated individual	ater than	\$15	0,0	00?	lf.	"Yes	," (complete Schedu	e J for s	such	4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Ye	accrue cor	mpen	satio	on f	rom	any	unr	related organization	n or indivi	dual	5 X
Section B. Independent Contractors											
1 Complete this table for your five highest components of the organization Report of year.											
(A) Name and business add	ress							(B) Description of se	rvices	c	(C) compensation
ATTACHMENT 6							L				
							E				
Total number of independent contractors (in more than \$100,000 in compensation from the					d to	_	e li	sted above) who	received		

art V	/	Statement of Reve	nue						Υ
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from ta under sections 512, 513, or 514
g l				1 a	3,796.				
5	a b	Federated campaigns Membership dues		1b	3,150.				
Ě		Fundraising events	1	1 c					
<u>a</u>	d	Related organizations		1d					
		Government grants (contribu		1 e					
<u> </u>		All other contributions, gifts, gran	- 1						
5		and similar amounts not included	above .	1f	2,996,785.				
and Other Sim	_	Noncash contributions included i							
	h	Total. Add lines 1a-1f	<u> </u>	· · · ·		3,000,581.			
					Business Code				
2	-	INTERNATIONAL GOVT. FEES			900099	76,480.	76,480.		
	b	OTHER CONTRACTS AND FEES			900099	541,379.	541,379.		
	С							_	
	d								
	е		-						<u> </u>
2	f g	All other program service rev Total. Add lines 2a-2f	enue	!	•	617,859.			
3		Investment income (including				017,033.	- 4.1 E 5.30		<u> </u>
"		other similar amounts)				2,636.			2,636
4		Income from investment of t				0			
5		Royalties			_	0			
			(ı) Re	al	(II) Personal				
6	а	Gross rents	2	8,226.					
	b	Less rental expenses							
	С	Rental income or (loss)	2	8,226.				<u> </u>	
'	d	Net rental income or (loss).			<u></u>	28,226.			28,226
7.	а	Gross amount from sales of	(ı) Secui	rities	(II) Other				
		assets other than inventory							
		Less cost or other basis							
		and sales expenses	······································			er er i			
- 1		Gain or (loss)							<u> </u>
		Gross income from fundra		· · · · [
8		events (not including \$	•						
		of contributions reported on I							
:		See Part IV, line 18		a					
8		Less direct expenses		- 1					
	С	Net income or (loss) from fur	ndraising ev	vents .	▶	0			
9 :	а	Gross income from gaming a	ictivities						
		See Part IV, line 19		а					
1		Less direct expenses							
		Net income or (loss) from ga	-	. ties	<u> ▶</u>	0			
108		Gross sales of invento							
		returns and allowances							
		Less cost of goods sold Net income or (loss) from sal					этом принципальной учени принципальной и на		
	<u> </u>	Miscellaneous Reven		<u>,</u>	Business Code				ikida en i
118	2	ACCIDENT INSURANCE PAYMEN			900099	7,063.			7,063
	-	FLEXSPENDING FORFEITURE		— <u> </u>	900099	7,104.			7,104
	-	SWISS TAX ADMIN FEES			900099	323.	323.		, = -
	•	All other revenue							
		Total Add lines 11a-11d				14,490.			
						3,663,792	618,182.		45,029

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)

Ω~	Check if Schedule O contains a response include amounts reported on lines 6h		(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21.	226,911.	226,911.		
	Grants and other assistance to individuals in the United States See Part IV, line 22	0		,,	
3	Grants and other assistance to governments,			ph.	*
	organizations, and individuals outside the				4,3
	United States See Part IV, lines 15 and 16,	628,764.	628,764.		234
4	Benefits paid to or for members	0		- 10 15 80.	e vý, ko
	Compensation of current officers, directors, trustees, and key employees	289,855.	10,429.	264,447.	14,979
	Compensation not included above, to disqualified	·		•	
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
	Other salaries and wages	1,002,606.	695,297.	274,907.	32,402
					02,.02
	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	o			
	Other employee benefits	107,372.	223,183.	-131,436.	15,625
	Payroll taxes	117,570.	60,316.	53,264.	3,990
	Fees for services (non-employees)	117,0701	00,010.	037201.	3,330
	, , , ,	0			
	Management	- 0	· -		
	Legal	16,530.	1,500.	15,030.	
	Accounting	10,330.	1,300.	13,030.	
	Lobbying	0		* * * *	
	Professional fundraising services See Part IV, line 17				
	Investment management fees	334,348.	296,767.	33,185.	4,396
_	Other	320.	70.	250.	4,350
	Advertising and promotion	51,578.	28,370.	17,592.	5,616
	Office expenses	11,108.	4,353.	6,422.	333
	Information technology	0	4,555.	0,422.	
	Royalties	282,765.	20,220.	262,545.	····
	Occupancy	96,252.	86,835.	8,861.	556
	Travel	30,232.	00,033.	0,001.	
	Payments of travel or entertainment expenses	o			
	for any federal, state, or local public officials	16,910.	9,989.	6,795.	126
	Conferences, conventions, and meetings	10,910.	9,909.	0,793.	120
	Interest	0			
	Payments to affiliates	15,964.		15,964.	
	Depreciation, depletion, and amortization	13,544.	1,845.	11,699.	
	Insurance	13,344.	1,045.	11,099.	*** 47
	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If	<u>, </u>	•		
	line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	*			
	OVERHEAD/INDIRECT COST ALLOC		617,718.	-664,369.	46,651
	STAFF TRAINING & DEVELOPMENT	10,000.	8,057.		40,031
		66.	6,037.	1,943. 66.	
C.	OTHER EXPENSES	00.		00.	
d				-	
	All other expenses	2 222 462	2 020 624	177 165	104 674
	Total functional expenses Add lines 1 through 24e Joint costs Complete this line only if the	3,222,463.	2,920,624.	177,165.	124,674
	Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if				
	iunuraisinu solicitation Check here 🗕 🗀 🖖 🖖				

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Form **990** (2011)

	n 990 (Balance Sheet			Page 11
Fé	irt A	Dalance Sheet	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	250.	1	250.
	2	Savings and temporary cash investments	669,738.	2	1,006,704.
	3	Pledges and grants receivable, net	505,893.	3	640,350.
	4	Accounts receivable, net	91,308.	4	63,164.
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees Complete Part II of			
	6	Schedule L Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary	0		0
ts	_	employees' beneficiary organizations (see instructions)		6	0
Assets	7	Notes and loans receivable, net		7	
Ř	8	Inventories for sale or use	20 070	8	30 004
	9	Prepaid expenses and deferred charges	39,978.		38,904.
	10a	Land, buildings, and equipment cost or		5 33	· t
		other basis Complete Part VI of Schedule D 10a 147,981.	FE 102		47.500
	b	Less accumulated depreciation	55,193.		47,690.
	11	Investments - publicly traded securities	11,757.		12,341.
	12	Investments - other securities See Part IV, line 11	0	12	0
	13	Investments - program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	1,374,117.	15	1 000 403
_	16	Total assets. Add lines 1 through 15 (must equal line 34)	75,732.		1,809,403.
	17	Accounts payable and accrued expenses	13,132.	-	53,624.
	18	Grants payable	117,246.	18	132,536.
	19	Deferred revenue	117,240.	-	132,330.
	20	Tax-exempt bond liabilities		20	0
Liabilities	21 22	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Ρij	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons			general control of the control of th
Ë	İ		ایم <u>دید د</u>	22	
	23	Complete Part II of Schedule L		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third		24	
	23	parties, and other liabilities not included on lines 17-24) Complete Part X			
		of Schedule D	1,000.	25	1,775.
	26	Total liabilities. Add lines 17 through 25	193,978.		187,935.
Se	20	Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29, and lines 33 and 34.			
Š	27	Unrestricted net assets	249,261.	27	145,652.
sala	28	Temporarily restricted net assets	930,878.	28	1,475,816.
Ā	29	Permanently restricted net assets	d	29	0
or Fund Balances		Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34.			u T
S	30	Capital stock or trust principal, or current funds		30	**
Se	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
Net Assets	33	Total net assets or fund balances	1,180,139.		1,621,468.
_	34	Total liabilities and net assets/fund balances	1,374,117.		1,809,403.
	34	Total liabilities and het assets/fund dalances	1,3/4,11/.	34	1,609,40

Form **990** (2011)

Form 990 (2011),						
Pa	Reconciliation 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)	3,1	663,	792.		
2	Total expenses (must equal Part IX, column (A), line 25)	3,2	222,	463.		
3	Revenue less expenses Subtract line 2 from line 1	441,329				
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	1,	180,	139.		
5	Other changes in net assets or fund balances (explain in Schedule O)			С		
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,					
•	column (B))	1,(621,	468.		
Pa	art XII Financial Statements and Reporting					
	Check if Schedule O contains a response to any question in this Part XII					
1	Accounting method used to prepare the Form 990	in	Yes	No		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X		
b		2b	X			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig	ht		<u> </u>		
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	x	İ		
	If the organization changed either its oversight process or selection process during the tax year, explain	in —				
	Schedule O					
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year well	re				
	issued on a separate basis, consolidated basis, or both	,				
	X Separate basis Consolidated basis Both consolidated and separate basis					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth	ın				
	the Single Audit Act and OMB Circular A-133?	3a				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the	ie				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3 b				

Form **990** (2011)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No 1545-0047

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust Department of the Treasury Internal Revenue Service ▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions

Open to Public Inspection

Name of the organization

Employer identification number

CENTER FOR INTERNATIONAL ENVIRONMENTAL LAW 52-1633220								-1633220		
Part I	Reason for Pub	lic Charity Statu	s (All organizations mu	st con	nplete	this pa	art.) Se	e instr	uctions	
The orga	inization is not a priv	ate foundation be	cause it is: (For lines 1 th	rough	11, che	ck only	one bo	x.)		
1	A church, convention	on of churches, or	association of churches	describ	ed in s	ection	170(b)(1)(A)(i)		
2	A school described	I in section 170(b)	(1)(A)(ii). (Attach Schedul	еE)						
3	A hospital or a coo	perative hospital s	service organization descri	ibed in	sectio	n 170(b)(1)(A)	(iii).		
4	A medical researc	h organization op	erated in conjunction wi	th a h	ospita	l descr	ıbed ın	sectio	n 170(b	o)(1)(A)(iii). Enter the
	hospital's name, cit	y, and state								
5	An organization op	erated for the be	nefit of a college or univ	ersity	owned	or ope	erated b	oy a go	vernme	ntal unit described in
	section 170(b)(1)(/	A)(iv). (Complete F	Part II.)							
6	A federal, state, or	local government	or governmental unit des	cribed	ın sect	ion 170	(b)(1)(A)(v).		
7 X	An organization that	at normally receive	es a substantial part of it	s supp	ort fro	m a go	vernme	ental un	ut or fro	om the general public
	described in section	n 170(b)(1)(A)(vi).	. (Complete Part II)							
8	A community trust	described in secti	on 170(b)(1)(A)(vi). (Com	iplete F	Part II.)					
9	An organization the	at normally receive	es: (1) more than 331/3%	of its	suppo	rt from	contrib	outions,	membe	ership fees, and gross
	· ·		exempt functions - subj			-				
			ome and unrelated busi						n 511	tax) from businesses
		•	ne 30, 1975. See section	•				•		
10	•	•	ted exclusively to test for		-				•	
11	_	-	rated exclusively for the			-				
			apported organizations de					•		
			es the type of supporting					lines 1		7
	a Type I	b Type	٠٠ لسسا			ally inte	-		_ d	☐ Type III - Other
e			the organization is not			-		-	-	
	•		gers and other than one	or mo	re puc	oliciy su	рропес	organ	izations	described in section
	509(a)(1) or section		n datarmination from th	~ IDC	that it	10 0 T	ma I T	īvoo II	or Tun	o III ounnortina
f	organization, check		n determination from th	e ins	tiiat it	15 0 1	ype i, i	ype 11,	от тур	e iii supporting
	•			or co	 ntributi	on from	 anv of	the		
g	following persons?	ooo, nas the orga	inzation accepted any gin	01 001	illibuti	011 11 011	i arry or	tile		
	• .	directly or indire	ectly controls, either alor	ne or t	onethe	er with	nerson	s desc	rihed in	Yes No
			dy of the supported organ			,	po.00			11g(i)
	• •		scribed in (i) above?							11g(ii)
	• •	·	son described in (i) or (ii) a	bove?						11g(iii)
h	• •		out the supported organiza							
(ı) N	ame of supported	(II) EIN	(iii) Type of organization	T	ls the	(v) Did y	ou notify	(vi)	s the	(vii) Amount of
	organization		(described on lines 1-9 above or IRC section		zation in listed in	the orga	anization (i) of		zation in rganized	support
			(see instructions))		overning ment?	your st	ipport?		US?	
				Yes	No	Yes	No	Yes	No	
(A)										
(^)										
(B)								l		
(D)										
(C)										
										
(D)										
(E)										
		-			-					
T-4-1										
Total		I	<u> </u>	1		<u> </u>	l			<u> </u>

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

Schedule A (Form 990 or 990-EZ) 2011

Page 2

Part II	Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and	170(b)(1)(A)(vi)
•	(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization	failed to qualify under
	Part III If the organization fails to qualify under the tests listed below, please complete	Part III.)

Sec	tion A. Public Support				<u></u>	· ·	
Cale	ndar year (or fiscal year beginning ın)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	1,630,737.	1,501,516	1,476,921.	1,841,609	3,000,581.	9,451,364.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total Add lines 1 through 3	1,630,737.	1,501,516.	1,476,921.	1,841,609.	3,000,581.	9,451,364.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
6	shown on line 11, column (f)						4,139,546.
Sec	Public support Subtract line 5 from line 4 tion B. Total Support						5,311,818.
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	1,630,737.	1,501,516.	1,476,921.	1,841,609.	3,000,581.	9,451,364.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	99,733.	96,885.	35,662.	48,212.	30,862.	311,354.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) . ATCH. 1		857.	516.	1,388.	14,490.	17,251.
11	Total support Add lines 7 through 10						9,779,969.
12	Gross receipts from related activities, etc. (s	see instructions) .				12	3,155,307.
13	First five years. If the Form 990 is f organization, check this box and stop here	<u></u>	<u></u>				
Sec	tion C. Computation of Public Sup	•	•			Г	<u> </u>
14	Public support percentage for 2011 (li					14	54.31%
15	Public support percentage from 2010					15	58.71%
	331/3% support test - 2011. If the of this box and stop here. The organization	on qualifies as a	publicly suppoi	rted organizatio	n		▶ X
b	331/3% support test - 2010. If the control of the c	_					
17a	10%-facts-and-circumstances test - 2						
	10% or more, and if the organization Part IV how the organization meets to	meets the "fa	cts-and-circums	tances" test, ch	eck this box ai	nd stop here . E	xplaın ın
b	organization	2010. If the organization meets on meets the "	ganization did n s the "facts-and facts-and-circum	ot check a box d-circumstances nstances" test.	on line 13, 16 " test, check t The organizatio	a, 16b, or 17a, his box and sto in qualifies as a	and line op here.
18	Private foundation. If the organization instructions	did not check a	a box on line 13	, 16a, 16b, 17a	, or 17b, check	this box and see	

Page 3

Schedule A (Form 990 or 990-EZ) 2011

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II)

Sec	tion A. Public Support			, , <u></u>	<u> </u>	<u>,</u>	
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and membership fees						···
	received (Do not include any "unusual grants ")						
2	Gross receipts from admissions, merchandise			· -	-		
_	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an			İ		•	
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf		_ <u>-</u>				
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
7 a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
C.	Add lines 7a and 7b						
8	Public support (Subtract line 7c from	AS ?	* ***	, , , , , , , , , , , , , , , , , , ,	**	. <	
	line 6)	· .			**		
Sec	tion B. Total Support					<u>-</u>	
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	Amounts from line 6		,	. ,	, ,	,,	
	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar						
h	Sources						
U	,						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is regularly						
	carried on						
12	Other income Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part IV)					,	
13	Total support (Add lines 9, 10c, 11,						
	and 12)						
14	First five years. If the Form $990\ \text{is}$ for	•			•	,	~ —
	organization, check this box and stop here.			<i></i>			▶ │
Sec	tion C. Computation of Public Sup	port Percenta	age				
15	Public support percentage for 2011 (line 8,	, column (f) dıvıde	ed by line 13, colun	nn (f))		15	%
16	Public support percentage from 2010 Sche	dule A, Part III, lin	ne 15	<i></i>		16	%
Sec	tion D. Computation of Investmer	nt Income Per	centage				
17	Investment income percentage for 2011 (lir	ne 10c, column (f) divided by line 1	3, column (f))		17	%
18	Investment income percentage from 2010					18	%
	331/3% support tests - 2011 If the org						_
	17 is not more than 331/3%, check thi	-					
h	331/3% support tests - 2010. If the orga	•	_	•	• •	· · · · · · ·	
J	line 18 is not more than 331/3%, check						
20	Private foundation. If the organization		•	•			├ ──
	ivanidation it the organization	2.3 1.5t OHOUR	~ 20x OII IIIIG	,,	, J.:550 tino DC	2.10 200 113010	

Schedule A (Form 990 or 990-EZ) 2011

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Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b, and Part III, line 12. Also complete this part for any additional information. (See instructions).

SCHEDULE A, PART II -	OTHER INCO)ME			ATTACHMENT 1	
DESCRIPTION	2007	2008	2009	2010	2011	TOTAL
MISCELLANEOUS REVENUE		67.				67.
FLEXSPENDING FORFEITURE		790.	280.	933.	7,104.	9,107.
SWISS TAX ADMIN FEES			236.	455.	323.	1,014.
ACCIDENT INSURANCE PAYMENT					7,063.	7,063.
TOTALS		857.	516.	1,388.	14,490,	17,251.

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

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

2011

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► See separate instructions.

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

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

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

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

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

Nam	e of organization		Employer identification number				
CEN	TER FOR INTERNATION	AL ENVIRONMENTAL LAW			52-16	33220	
Pa	rt I-A Complete if the o	rganization is exempt under	section 501(c) or i	s a sectio	n 527 orgar	nization.	
1	Provide a description of the	organization's direct and indirect p	oolitical campaign ac	ctivities in Pa	art IV	 	
2	Political expenditures	· · · · · · · · · · · · · · · · · · ·			> \$		
3	Volunteer hours			. .			
	115 0		1' 504/ \/0\				
		rganization is exempt under s				 	
1		cise tax incurred by the organization					
2		cise tax incurred by organization m					
3		a section 4955 tax, did it file Form					
	If "Yes," describe in Part IV		• • • • • • • • • • •			Yes No	
Pai	t I-C Complete if the o	rganization is exempt under	section 501(c), ex	cept secti	on 501(c)(3).	
1	Enter the amount directly e	expended by the filing organization	for section 527 ex	kempt func	tion	<u> </u>	
2		ng organization's funds contributed	•				
	527 exempt function activiti	es			▶ \$		
3	· · · · · · · · · · · · · · · · · · ·	enditures Add lines 1 and 2 En					
4 5		e Form 1120-POL for this year?					
3		and employer identification numb s. For each organization listed, en					
		tributions received that were prom					
		nd or a political action committee					
	(a) Name	(b) Address	(c) EIN	(d) Amou	nt paid from	(e) Amount of political	
	(4)	(5)/1851555	(5) 2	filing org	janization's	contributions received and	
				funds if no	one, enter -0-	promptly and directly delivered to a separate	
						political organization If	
						none, enter -0-	
(1)							
				-	·		
(2)		}					
/3)	·						
(3)							
(4)							
(5)							
				ļ			
(6)			1				

JSA 1E1264 1 000

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ

Schedule C (Form 990 or 990-EZ) 2011

		_ :_ : : _ :	_	
Sch	edule C (Form 990 or 990-EZ) 2011 CENTER	R FOR INTERNATIONAL ENVIRONMENTA	L LAW 52-1	633220 Page 2
Pa	art II-A Complete if the organization section 501(h)).	on is exempt under section 501(c)(3) and	filed Form 5768 (elec	ction under
A		belongs to an affiliated group (and list in P	•	oup member's
_		enses, and share of excess lobbying expen		
В		n checked box A and "limited control" provis	ions apply	
		bying Expenditures	(a) Filing	(b) Affiliated
	· · · · · · · · · · · · · · · · · · ·	eans amounts paid or incurred.)	organization's totals	group totals
1 a		public opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence	1,320.		
С	Total lobbying expenditures (add lines 1	1,320.		
d			3,221,143.	
е		d lines 1c and 1d)	3,222,463.	
f	Lobbying nontaxable amount Enter the	amount from the following table in both		
	columns		311,123.	
	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		į
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		1
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		i
	Over \$17,000,000	\$1,000,000	<u> </u>	;
g	Grassroots nontaxable amount (enter 25	5% of line 1f)	77,781.	., = -
h	Subtract line 1g from line 1a. If zero or le	ess, enter -0-	0	0
i	Subtract line 1f from line 1c If zero or les	ss, enter -0-	0	0
j	If there is an amount other than zero on	either line 1h or line 1i, did the organization file	Form 4720	

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							
(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total			
295,935.	282,256.	304,340.	311,123	1,193,654.			
· ·	Wing Marin	\$ 44,873	***	1,790,481.			
2,599.	13,602.	8,195.	1,320	25,716.			
73,984.	70,564.	76,085.	77,781	298,414.			
,	****	, , , , , , , , , , , , , , , , , , ,	₹ s+	447,621.			
	(a) 2008 295, 935. 2,599. 73,984.	(a) 2008 (b) 2009 295, 935. 282, 256. 2,599. 13,602. 73,984. 70,564.	(a) 2008 (b) 2009 (c) 2010 295, 935. 282, 256. 304, 340. 2,599. 13,602. 8,195. 73,984. 70,564. 76,085.	(a) 2008 (b) 2009 (c) 2010 (d) 2011 295, 935. 282, 256. 304, 340. 311, 123. 2, 599. 13, 602. 8, 195. 1, 320. 73, 984. 70, 564. 76, 085. 77, 781			

Schedule C (Form 990 or 990-EZ) 2011

reporting section 4911 tax for this year?

Page 3

Part	II-B	Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	T file	d For	rm 57	68	_	<u> </u>
For ea	ach "Y	es" response to lines 1a through 1i below, provide in Part IV a detailed description	(;	a)		(b)		
of the	lobby	ng activity	Yes	No		Amou	nt	
1 (During	the year, did the filing organization attempt to influence foreign, national, state or local						
	_	ion, including any attempt to influence public opinion on a legislative matter or						
		dum, through the use of						
a '	Volunte	ers?						
		aff or management (include compensation in expenses reported on lines 1c through 1i)?				- •		
c l	Media	advertisements?						
d l	Mailing	s to members, legislators, or the public?						
e l	Publica	tions, or published or broadcast statements? to other organizations for lobbying purposes?						
f (Grants	to other organizations for lobbying purposes?						
g !	Direct	contact with legislators, their staffs, government officials, or a legislative body?						
		demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
		activities?						
j	iotal A	add lines 1c through 1i					-	
2 a [Jid the	activities in line 1 cause the organization to be not described in section 501(c)(3)?						
b l	t "Yes,	enter the amount of any tax incurred under section 4912		,				
		enter the amount of any tax incurred by organization managers under section 4912						
1		ing organization incurred a section 4912 tax, did it file Form 4720 for this year?			4.		-	
Fart	III-A	Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5)	, or s	ectio	n 		
							Yes	No
		ubstantially all (90% or more) dues received nondeductible by members?		. .		1		
2 [Old the	organization make only in-house lobbying expenditures of \$2,000 or less? organization agree to carry over lobbying and political expenditures from the prior year?		. .		2		
		organization agree to carry over lobbying and political expenditures from the prior year?	<u></u>			3		
	III-B	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" (answered "Yes."	OR (b) Par			, is	
		ssessments and similar amounts from members			1			
þ	olitica	162(e) nondeductible lobbying and political expenditures (do not include amoul expenses for which the section 527(f) tax was paid).						
a (Current	year			2a			
b C	Carryov	er from last year			2b			
сΤ	otal .				2c			
3 A	Aggreg	ate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due			3	_		
		es were sent and the amount on line 2c exceeds the amount on line 3, what portion						
		does the organization agree to carryover to the reasonable estimate of nondeductible lo	bbyın	ıg				
		itical expenditure next year?			4			
		amount of lobbying and political expenditures (see instructions)			5			
Part	IV	Supplemental Information						
		s part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line olete this part for any additional information.	5, Pa	rt II-A	, and I	Part II-B,	line	· -
					. _			
								·
					- -			
							- -	

Schedule C (Form 990 or 990-EZ) 2011

Page 4

Part IV Supplemental Information (continued)

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No 1545-0047

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Department of the Treasury Internal Revenue Service

	e of the organization	Employer identification number
CEI	NTER FOR INTERNATIONAL ENVIRONMENTAL LAW	52-1633220
Pa	Organizations Maintaining Donor Advised Funds or Other Similar Funds or organization answered "Yes" to Form 990, Part IV, line 6	Accounts. Complete if the
	(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? .	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant fund	
•	only for charitable purposes and not for the benefit of the donor or donor advisor, or for any	
	conferring impermissible private benefit?	
Pa		orm 990 Part IV line 7
1	Purpose(s) of conservation easements held by the organization (check all that apply)	3111 000,1 01111, 1110 1.
-		f an historically important land area
		f a certified historic structure
		r a certified historic structure
2	Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in	the form of a concentration
2	easement on the last day of the tax year	the form of a conservation
	cuscinion and last day of the tax year	Held at the End of the Tax Year
_	Total number of concessation agreements	2a
a	Total number of conservation easements	2b
b	Total acreage restricted by conservation easements	2c
C	Number of conservation easements on a certified historic structure included in (a)	26
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a	
_	historic structure listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminal	ated by the organization during the
	tax year >	
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, ha	
_	violations, and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easi	ements during the year
_	>	
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easemer	nts during the year
_	> \$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of se	
	(i) and section 170(h)(4)(B)(ii)?	∐Yes ∐No
9	In Part XIV, describe how the organization reports conservation easements in its revenue and	
	balance sheet, and include, if applicable, the text of the footnote to the organization's financial	ai statements that describes the
	organization's accounting for conservation easements	Similar Accets
Ρa	organizations Maintaining Collections of Art, Historical Treasures, or Other Complete if the organization answered "Yes" to Form 990, Part IV, line 8	Similar Assets.
	· · · · · · · · · · · · · · · · · · ·	
1 a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its r works of art, historical treasures, or other similar assets held for public exhibition, educ	evenue statement and balance sheet
	public service, provide, in Part XIV, the text of the footnote to its financial statements that des	cribes these items
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its re	evenue statement and balance sheet
	works of art, historical treasures, or other similar assets held for public exhibition, educ	
	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 a	assets for financial gain, provide the
	following amounts required to be reported under SFAS 116 (ASC 958) relating to these items	
а	Revenues included in Form 990, Part VIII, line 1	
<u>b</u>	Assets included in Form 990, Part X	· · · · · · · > \$
For	Paperwork Reduction Act Notice, see the Instructions for Form 990	Schedule D (Form 990) 2011

Schedule D (Form 990) 2011 Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) Part III Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply) Public exhibition Loan or exchange programs а b Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV. 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? 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 If "Yes," explain the arrangement in Part XIV and complete the following table Amount d Additions during the year 1 d 2a Did the organization include an amount on Form 990, Part X, line 21? b If "Yes," explain the arrangement in Part XIV Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10 Part V (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 Net investment earnings, gains, and losses Grants or scholarships Other expenditures for facilities . and programs f Administrative expenses 14.A g End of year balance..... Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as 2 Board designated or quasi-endowment Permanent endowment ▶___ Temporarily restricted endowment ▶ The percentages in lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by Yes No 3a(i) 3a(ii) Describe in Part XIV the intended uses of the organization's endowment funds Land, Buildings, and Equipment. See Form 990, Part X, line 10. Part VI Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value (investment) (other) depreciation **1a** Land.............. 58,920. 29,960 28,960. c Leasehold improvements..... 89,061. 70,331 18,730. d Equipment Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)). 47,690.

Schedule D (Form 990) 2011

Part X Other Liabilities. See Form 990, Part X, line	25	
1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) SUBRENTAL DEPOSIT	1,775.	
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		[기술환 기존 - 사람이 아이를 하시네요 사람님]
(9)		
(10)		
(11)		
Total (Column (b) must equal Form 990, Part X, col (B) line 25)	1,775.	

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 (ASC 740)

JSA 1E1270 1 000

Total (Column (b) must equal Form 990, Part X, col (B) line 15)

Schedu	le D (Form 990) 2011			Page 4
Part	XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Staten	nent	s	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	T	3,663,792
2	Total expenses (Form 990, Part IX, column (A), line 25)	2		3,222,463
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	t	441,329
4	Net unrealized gains (losses) on investments	4	1	
5	Donated services and use of facilities	_ -	-	
6	Investment expenses	_ _	<u> </u>	
7	Prior period adjustments	7	┼─-	
8	Prior period adjustments Other (Describe in Part XIV.)	8	┢	
9	Other (Describe in Part XIV) Total adjustments (net) Add lines 4 through 8			
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	9	\vdash	441,329
Part		10	<u> </u>	441,323
	Total revenue game, and other numbert per audited financial statements with Revenue per Rei	turn	•	3,825,489
1	Total revenue, gains, and other support per audited financial statements	⊦	1	3,023,409
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12.		- 1	
a	Net unrealized gains on investments 2a			
b	Donated services and use of facilities 2b 161,69	2/-		
С	Recoveries of prior year grants 2c		I	
d	Other (Describe in Part XIV)2d	_		
е	Add lines 2a through 2d	L	2e	161,697
3	Subtract line 2e from line 1	L	3	3,663,792
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1.			
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a	\$:		
b	Other (Describe in Part XIV.)		ļ	
С	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	3,663,792
Part	XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per R		n	
1	Total expenses and losses per audited financial statements		1	3,384,160
2	Amounts included on line 1 but not on Form 990, Part IX, line 25.	· ·		
а	Donated services and use of facilities 2a 161,69	7.		
b	Prior year adjustments 2b	\neg		
С	Other leases	T Ý		
d	Other losses Other (Describe in Part XIV) Add lines 3a through 3d	*	93	
e			2e	161,697
3	Subtract line 2e from line 1	··├	3	3,222,463
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	``⊢	-	3,222,103
a	Investment expenses not included on Form 990, Part VIII, line 7b			
h	01 (5)			
c	Other (Describe in Part XIV) Add lines 4a and 4b			
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	├-	4c	3,222,463
		•	5	3,222,403
	XIV Supplemental Information lete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa	→ N/	linas	th and the
	tine 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also comp.			
	Iditional information	.010 1	,,,,	art to provide
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SEE	PAGE 5		- -	
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Part XIV Supplemental Information (continued)

FIN 48 DISCLOSURE

SCHEDULE D, PART X, LINE 2

CIEL BELIEVES IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITION TAKEN AND,
AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO
THE FINANCIAL STATEMENTS. CIEL RECOGNIZES INTEREST EXPENSE AND PENALTIES
ON ITS TAX POSITIONS IN MANAGEMENT AND GENERAL EXPENSES ON THE STATEMENTS
OF ACTIVITIES AND CHANGE IN NET ASSETS. FOR TAX YEARS PRIOR TO 2008, CIEL
IS NO LONGER SUBJECT TO EXAMINATION BY THE IRS AND THE TAX JURISDICTION
OF THE DISTRICT OF COLUMBIA.

SCHEDULE F (Form 990)'

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 **Open to Public** Inspection

Department of the Treasury Internal Revenue Service

Part I

CENTER FOR INTERNATIONAL ENVIRONMENTAL LAW

Employer identification number 52-1633220

Form 990, Part IV, line 14b For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the

General Information on Activities Outside the United States. Complete if the organization answered "Yes" to

For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

Activities per Region. (The following Part L. line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(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 and investments in region
(1) CENTRAL AMERICA/CARIBBEAN			PROGRAM SERVICES	ENVIRONMENTAL RIGHTS	15,474
(2) EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	IPEN SUPPORT	6,160.
(3) EUROPE	1.	2	PROGRAM SERVICES	IPEN SUPPORT	215,654.
(4) NORTH AMERICA			PROGRAM SERVICES	ENVIRONMENTAL RIGHTS	7,193.
(5) SOUTH AMERICA			PROGRAM SERVICES	SUSTAINABLE DEVLP.	594,000.
(6) SOUTH ASIA			PROGRAM SERVICES	IPEN SUPPORT	537.
(7) SUB-SAHARAN AFRICA			PROGRAM SERVICES	IPEN SUPPORT	2,734.
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
b Total from continuation sheets to Part I	1.	2			841,752.
c Totals (add lines 3a and 3b)	1	2.			841,752.

52-1633220

Page 2

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Schedule F (Form 990) 2011	•
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Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000. □ □ □ ■ □ ■ □ ■ □ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■	(c) Region (d) Purpose of cash grant cash grant (e) Amount of cash grant cash grant cash grant disbursement assistance assistance assistance assistance according to the cash grant cash gr	SOUTH AMERICA DEVELOPMENT 594,000. WIRE TRNSFR N/A	C. AMERICAN	h NA MINING 5,229. WIRE TRNSFR N/A N/A				I = 1		п.		· ·				- 55ES	
ates. Complete if th x if no one recipient	-			\dagger													
ide the United St. 00. Check this bo	(d) Purpose of grant	SUSTAINABLE	C. AMERICAN	MINING													
		< <		- 1													
stance to Organizati recipient who recen if additional space is	code nd EIN able)	The second secon	, j	The state of the s			The man to the second of the s		The state of the s		The state of the s					Complete Com	
Grants and Other Assistance to Organizations or Part IV, line 15, for any recipient who received mo Part II can be duplicated if additional space is neede		teles and the second se			reighter, indian reimiter militaries Egit frag			The second secon		中心			11. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.				
Part II G		10) (10)			3) 1986 1	4): 134, 14. 14. 14.	(S)	(9	(12)			(01)	12)	43)	14)	(4.5) Piper	a philips a state of the state

3 Enter total number of other organizations or entitles.

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Schedule F (Form 990) 2011

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Page 3

Schedule F (Form 990) 2011

Schedule F (Form 990) 2011 (h) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16 Part III can be duplicated if additional space is needed (g) Description of non-cash assistance (f) Amount of non-cash assistance (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients (b) Region (a) Type of grant or assistance Part III 4 (2) (1 2 (3) 9 (7 8 (6) (11 9 (12)(13)(14) (15) (16) (17) (18)

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Part	V Foreign Forms		
1	Was the organization a US transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a US Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X 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, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A).	Yes	X 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	X 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, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X 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	X 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	X No

Schedule F (Form 990) 2011

Part V Supplem

Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds), Part I, line 3, column (f) (accounting method, amounts of investments vs. expenditures per region), Part II, line 1 (accounting method); Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions)

SCHEDULE F, PART I ALL GRANTS, CONTRACTS AND SOURCES OF INCOME SUPPORTED ACTIVITIES RELATED DIRECTLY TO CIEL'S CHARITABLE MISSION/PURPOSE. CIEL HAS A NUMBER OF WAYS TO DETERMINE WHETHER INDIVIDUALS OR ORGANIZATIONS RECEIVING SUBGRANTS OUALIFY TO RECEIVE PAYMENTS WITHIN THE CONTEXT OF FURTHERING CIEL'S CHARITABLE PURPOSE. MOST OF CIEL'S SUBGRANTS ARE TO OTHER NON-GOVERNMENTAL ORGANIZATIONS WITH WHICH CIEL HAS HAD PREVIOUS COLLABORATION AND EXTENSIVE INTERACTION, AND PERFORM TASKS THAT ARE CONSISTENT WITH AND FURTHER ACHIEVING CIEL'S CHARITABLE PURPOSE. ARE SPECIFICALLY IDENTIFIED IN/BY THE SPECIFIC CONTRACTS OR GRANTS WHICH PROVIDE CIEL WITH THE FUNDS FOR THOSE SUBGRANTEES. IN THESE CASES, CIEL'S SUBGRANTEES UNDERGO NOT ONLY APPROPRIATE REVIEW BY CIEL BUT ALSO BY CIEL'S FUNDERS. ON THE FEW OCCASIONS WHERE CIEL IS UNFAMILIAR WITH POTENTIAL SUBGRANTEES, CIEL SOLICITS INFORMATION FROM BOTH THE SUBGRANTEE AND OTHER ORGANIZATIONS THAT MIGHT HAVE EXPERIENCE WORKING WITH THE POTENTIAL SUBGRANTEE.

PROCEDURES FOR MONITORING USE OF GRANT FUNDS OUTSIDE THE US

CIEL CHECKS BOTH THE U.S. DEPARTMENT OF THE TREASURY, OFFICE OF FOREIGN ASSETS CONTROL, SPECIALLY DESIGNATED NATIONALS AND BLOCKED PERSONS AND U.S. DEPARTMENT OF STATE FOREIGN TERRORIST ORGANIZATION LISTS BEFORE ANY FUNDS ARE TRANSFERRED OR PAID TO AN INDIVIDUAL OR ORGANIZATION WITHIN OR OUTSIDE THE UNITED STATES. CIEL DOES NOT PROVIDE FUNDS TO ANY INDIVIDUALS OR ORGANIZATIONS ON EITHER OF THESE TWO LISTS, AND CIEL WILL CONTINUE TO FOLLOW THAT POLICY.

Page 5

Part V Suppler

Supplemental Information

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region), Part II, line 1 (accounting method), Part III (accounting method), and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

FOR TRAVEL-RELATED SUBGRANTS, RECIPIENTS MUST PROVIDE CIEL WITH COPIES OF INVOICES/RECEIPTS SUCH AS FOR AIRFARES, TRAIN FARES, HOTELS, ETC. OTHER CIEL SUBGRANTEES MUST SUBMIT SPECIFIED DELIVERABLES AND/OR REPORTS TO DOCUMENT PROPER USE OF THE FUNDS FORWARDED BY CIEL. PAYMENTS FOR LARGER SUBGRANTS SPECIFYING DELIVERABLES ARE GENERALLY MADE IN TWO OR MORE PAYMENTS, WITH THE FINAL PAYMENT BEING MADE UPON SATISFACTORY COMPLETION OF THE RELATED DELIVERABLES. PAYMENTS FOR SMALLER SUBGRANTS ARE GENERALLY MADE UPON COMPLETION OF THE RELATED DELIVERABLES.

SCHEDULEI (Form 990) Department of the Treasury

Internal Revenue Service

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

2011

Open to Public

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

² ¬ (h) Purpose of grant or assistance HUMAN RIGHTS IPEN SUPPORT SUSTAINABLE 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. DEVELOPMENT STRENGTHEN STANDARDS × Employer identification number ENVIR. 52-1633220 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (g) Description of non-cash assistance A/A A/A A/N A/A (f) Method of valuation (book FMV, appraisal, other) V / A N/A N/A N/A (e) Amount of noncash assistance Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant 102,667. 67,250. 45,000. 6,000 (c) IRC section if applicable 27-0608154 b01(C)(3) 27-1629617 501(C)(3) 92-0177082 **5**01(C)(3) the selection criteria used to award the grants or assistance? . . . Part II can be duplicated if additional space is needed CENTER FOR INTERNATIONAL ENVIRONMENTAL LAW General Information on Grants and Assistance 56-6000756 (b) EIN 505 W N. LIGHTS BLVD, ANCHORAGE, AK 99503 221 PINE STREET SAN FRANCISCO, CA 94104 CAMPUS BOX 7205, RALEIGH, NC 27695-7205 (1) NORTH CAROLINA STATE UNIVERSITY (2) INTERNATIONAL ACCOUNTABILITY PROJECT (a) Name and address of organization or government (4) ALASKA COMMUNITY ACTION ON TOXICS PO BOX 4533 KANEOHE, HI 96744 (3) ULU FOUNDATION Name of the organization Part II

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(5)

[7]

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(12)

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table PAGE 38

Schedule 1 (Form 990) (2011)

For Paperwork Reduction Act Notice, see the Instructions for Form 990

Page 2

Schedule I (Form 990) (2011)

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. Part III

	(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
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Part IV	Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	is part to prov	vide the informat	tion required in	Part I, line 2, and an	other additional information.

MONITORING USE OF GRANT FUNDS WITHIN THE U.S.

SCHEDULE I, PART 1, LINE 2

ALL GRANTS, CONTRACTS AND SOURCES OF INCOME SUPPORTED ACTIVITIES RELATED

CIEL HAS A NUMBER OF WAYS DIRECTLY TO CIEL'S CHARITABLE MISSION/PURPOSE.

TO DETERMINE WHETHER INDIVIDUALS OR ORGANIZATIONS RECEIVING SUBGRANTS

QUALIFY TO RECEIVE PAYMENTS WITHIN THE CONTEXT OF FURTHERING CIEL'S

CHARITABLE PURPOSE. MOST OF CIEL'S SUBGRANTS ARE TO OTHER

NON-GOVERNMENTAL ORGANIZATIONS WITH WHICH CIEL HAS HAD PREVIOUS

COLLABORATION AND EXTENSIVE INTERACTION, AND PERFORM TASKS THAT ARE

MANY CONSISTENT WITH AND FURTHER ACHIEVING CIEL'S CHARITABLE PURPOSE. Schedule I (Form 990) (2011)

Schedule 1 (Form 990) (2011)

Page 2

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. Part III

	(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
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Part IV	Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	s part to prov	vide the informat	tion required in	Part I, line 2, and any	other additional information.

ARE SPECIFICALLY IDENTIFIED IN/BY THE SPECIFIC CONTRACTS OR GRANTS WHICH

PROVIDE CIEL WITH THE FUNDS FOR THOSE SUBGRANTEES. IN THESE CASES,

CIEL'S SUBGRANTEES UNDERGO NOT ONLY APPROPRIATE REVIEW BY CIEL BUT ALSO

ON THE FEW OCCASIONS WHERE CIEL IS UNFAMILIAR WITH BY CIEL'S FUNDERS.

POTENTIAL SUBGRANTEES, CIEL SOLICITS INFORMATION FROM BOTH THE SUBGRANTEE

AND OTHER ORGANIZATIONS THAT MIGHT HAVE EXPERIENCE WORKING WITH THE

POTENTIAL SUBGRANTEE.

CIEL CHECKS BOTH THE U.S. DEPARTMENT OF THE TREASURY, OFFICE OF FOREIGN

ASSETS CONTROL, SPECIALLY DESIGNATED NATIONALS AND BLOCKED PERSONS AND

Schedule I (Form 990) (2011)

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PAGE

Schedule 1 (Form 990) (2011)

Page 2

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed Part III

(f) Description of non-cash assistance Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information (e) Method of valuation (book FMV, appraisal, other) (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Part IV S

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FUNDS ARE TRANSFERRED OR PAID TO AN INDIVIDUAL OR ORGANIZATION WITHIN OR INDIVIDUALS OR ORGANIZATIONS ON EITHER OF THESE TWO LISTS, AND CIEL WILL U.S. DEPARTMENT OF STATE FOREIGN TERRORIST ORGANIZATION LISTS BEFORE ANY CIEL DOES NOT PROVIDE FUNDS TO ANY OUTSIDE THE UNITED STATES.

CONTINUE TO FOLLOW THAT POLICY.

FOR TRAVEL-RELATED SUBGRANTS, RECIPIENTS MUST PROVIDE CIEL WITH COPIES OF OTHER PAYMENTS FOR LARGER CIEL SUBGRANTEES MUST SUBMIT SPECIFIED DELIVERABLES AND/OR REPORTS HOTELS, ETC. INVOICES/RECEIPTS SUCH AS FOR AIRFARES, TRAIN FARES, DOCUMENT PROPER USE OF THE FUNDS FORWARDED BY CIEL. Schedule I (Form 990) (2011)

Page 2

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2011) Part III

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	(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
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Part IV	Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	is part to prov	vide the informa	tion required in	Part I, line 2, and an	other additional information.

SUBGRANTS SPECIFYING DELIVERABLES ARE GENERALLY MADE IN TWO OR MORE

PAYMENTS, WITH THE FINAL PAYMENT BEING MADE UPON SATISFACTORY COMPLETION

PAYMENTS FOR SMALLER SUBGRANTS ARE OF THE RELATED DELIVERABLES.

GENERALLY MADE UPON COMPLETION OF THE RELATED DELIVERABLES.

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

CENTER FOR INTERNATIONAL ENVIRONMENTAL LAW

Employer identification number 52-1633220

PROVIDING COPIES OF THE FORM 990 TO THE GOVERNING BODY

PART VI, LINE 11A

ON AN ANNUAL BASIS AND IN TIME TO COMPLY WITH THE IRS'S FILING DEADLINE, CIEL'S DIRECTOR OF FINANCE AND ADMINISTRATION WILL PROVIDE THE NECESSARY FINANCIAL AND NARRATIVE INFORMATION TO CIEL'S AUDITORS, WHO WILL THEN PREPARE A DRAFT FORM 990, COMPLETE WITH THE RELEVANT FINANCIAL INFORMATION AND SUPPORTING SCHEDULES. ONCE THE AUDITORS HAVE PROVIDED THE DIRECTOR OF FINANCE AND ADMINISTRATION WITH AN ACCEPTABLE DRAFT FORM 990, HE WILL SUBMIT THE DRAFT FORM 990 IN .PDF FORMAT, BY EMAIL, TO CIEL'S FULL BOARD OF TRUSTEES, INVITING THEIR REVIEW AND COMMENTS. THE DIRECTOR OF FINANCE AND ADMINISTRATION WILL SCHEDULE A MEETING OF THE AUDIT COMMITTEE TO PROVIDE FOR ITS OPPORTUNITY TO REVIEW AND COMMENT. AGREED-TO CHANGES WILL BE INCORPORATED BEFORE A FINAL SIGNED COPY OF THE FORM 990 IS EMAILED TO THE FULL CIEL BOARD OF TRUSTEES, ALSO BEFORE FILING WITH THE IRS.

MONITORING AND ENFORCING COMPLIANCE WITH CONFLICT OF INTEREST POLICY

PART VI, LINE 12C

ANNUALLY, CIEL REQUIRES EACH TRUSTEE, OFFICER, EMPLOYEE EARNING MORE THAN

\$125,000 PER YEAR INCLUDING BENEFITS, SUBSTANTIAL CONTRIBUTOR AND AGENT

OF CIEL: (1) TO REVIEW CIEL'S CONFLICT-OF-INTEREST GUIDELINES; (2) TO

DISCLOSE ON THE FORM PROVIDED, ANY POSSIBLE BUSINESS, FAMILIAL, OR

PERSONAL RELATIONSHIP THAT REASONABLY COULD GIVE RISE TO A CONFLICT OF

INTEREST OR THE APPEARANCE OF A CONFLICT OF INTEREST; AND (3) TO

ACKNOWLEDGE BY HIS OR HER SIGNATURE THAT HE OR SHE IS ACTING IN

ACCORDANCE WITH THE LETTER AND SPIRIT OF SUCH GUIDELINES. COMPLETED AND

SIGNED FORMS ARE KEPT IN THE OFFICE OF THE DIRECTOR OF FINANCE AND

ADMINISTRATION WHO REVIEWS ALL PENDING GRANTS, CONTRACTS AND PAYMENTS FOR

ANY POTENTIAL CONFLICT OF INTEREST. RATHER THAN COMPLETING A NEW FORM

EACH YEAR, TRUSTEES MAY ALSO INDICATE IN WRITING THAT NO CHANGES NEED TO

BE MADE TO THEIR PREVIOUSLY COMPLETED FORMS.

DETERMINING COMPENSATION

PART VI, LINES 15A & 15B

AS PART OF A PROGRAM TO CONSISTENTLY AND EFFECTIVELY MANAGE THE

COMPENSATION OF ALL INDIVIDUALS EMPLOYED BY CIEL, THE ORGANIZATION HAS

DEVELOPED A BASE SALARY ADMINISTRATION POLICY. BASE SALARY

ADMINISTRATION IS BUILT AROUND THE USE OF DETAILED POSITION DESCRIPTIONS,

AN INDIVIDUAL QUALIFICATIONS EVALUATION PROCESS, A MARKET-BASED SALARY

COMPARABILITY ANALYSIS PERFORMED BY AN INDEPENDENT CONSULTANT, AND THE

RESULTING SET SALARY RANGES FOR EACH POSITION TYPE WITHIN THE

ORGANIZATION. ALL OTHER RELATED BENEFITS ARE APPLIED UNIFORMLY TO ALL

INDIVIDUALS EMPLOYED BY CIEL. CONSIDERING THIS SALARY RANGE INFORMATION,

CIEL'S BOARD OF TRUSTEES NEGOTIATES AND APPROVES ANY NEW PRESIDENT'S

SALARY AND RELATED COMPENSATION. THE BOARD OF TRUSTEES ALSO MUST FIRST

REVIEW AND APPROVE ANY PERIODIC COST OF LIVING SALARY INCREASES AS

CONTAINED IN CIEL'S ANNUAL BUDGET.

PROCESS FOR DISCLOSURE

PART VI, LINE 19

CIEL MAKES ITS AUDITED FINANCIAL STATEMENTS AND IRS FORM 990S AVAILABLE

TO THE GENERAL PUBLIC ON ITS WEBSITE AT WWW.CIEL.ORG AND BY EMAIL OR MAIL UPON REQUEST. CIEL'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND OTHER SIMILAR DOCUMENTS AND POLICIES ARE MADE AVAILABLE BY EMAIL OR MAIL UPON REQUEST.

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

TO INVESTIGATE, RESEARCH, WRITE, PUBLISH, PRESENT CONFERENCES AND
TEACH WITH RESPECT TO GLOBAL, REGIONAL, TRANSBOUNDARY, AND
COMPARATIVE ENVIRONMENTAL ISSUES AND TO MAKE THE FINDINGS FROM SUCH
ACTIVITIES AVAILABLE TO THE GENERAL PUBLIC;

TO CONDUCT CASE INVESTIGATION AND ADVOCACY, INCLUDING MEDIATION,
ARBITRATION AND LITIGATION IN MATTERS INVOLVING INTERNATIONAL
ENVIRONMENTAL ISSUES, THE OUTCOME OF WHICH IS IMPORTANT TO THE
GENERAL PUBLIC; AND

TO PERFORM SUCH OTHER CHARITABLE AND EDUCATIONAL ACTIVITIES AS MAY BE NECESSARY AND APPROPRIATE IN ORDER TO ACCOMPLISH THE FOREGOING PURPOSES.

ATTACHMENT 2

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

BIODIVERSITY & WILDLIFE: CIEL WORKED WITH OUR PERUVIAN NGO

PARTNER, DERECHOS, AMBIENTE, Y RECURSOS NATURALES (DAR), TO LAY

THE GROUNDWORK FOR A NEW FORUM FOR SUSTAINABLE DEVELOPMENT FOR THE

REGION OF LORETO, PERU, A PARTICIPATORY CLEARINGHOUSE FOR BASELINE

Name of the organization
CENTER FOR INTERNATIONAL ENVIRONMENTAL LAW

Employer identification number 52-1633220

ATTACHMENT 2 (CONT'D)

DATA ON SOCIAL AND ENVIRONMENTAL IMPACTS OF ECONOMIC DEVELOPMENT PROJECTS. THROUGHOUT THE YEAR, CIEL DEVELOPED AN INFORMATIONAL AND CARTOGRAPHIC BASELINE OF FOREST DEGRADATION AND DEFORESTATION THREATS OF PLANNED ECONOMIC PROJECTS IN LORETO; REVIEWED KEY NATIONAL AND REGIONAL LAWS AND POLICIES RELATED TO SIX DIFFERENT SECTORS: FORESTRY, OIL AND GAS, ELECTRICITY, TRANSPORTATION, AGRICULTURE, AND MINING; AND INVESTIGATED SUCCESSFUL EXAMPLES OF STRATEGIC ENVIRONMENTAL ASSESSMENTS FOR POTENTIAL APPLICATION IN LORETO. CIEL PROVIDED ASSISTANCE TO THE REGIONAL GOVERNMENT OF LORETO AND THE PERUVIAN AMAZON RESEARCH INSTITUTE (IIAP), TO INCORPORATE THE INFORMATION INTO REGIONAL DECISION MAKING FRAMEWORKS AND TO INCREASE THE CAPACITY OF REGIONAL GOVERNMENT AGENCIES AND CIVIL SOCIETY ORGANIZATIONS TO PREPARE FOR ADOPTION AND IMPLEMENTATION OF A REGIONAL POLICY FRAMEWORK FOR STRATEGIC ENVIRONMENTAL ASSESSMENTS.

ATTACHMENT 3

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

CHEMICALS PROGRAM: CIEL SERVED ON THE STEERING COMMITTEE OF THE SAFER CHEMICALS, HEALTHY FAMILIES COALITION OF PUBLIC INTEREST ORGANIZATIONS AND ASSISTED IN THE DEVELOPMENT OF APPROACHES FOR REFORM OF U.S. CHEMICAL POLICY, IN PARTICULAR BY LOOKING AT THE RELATIONSHIP BETWEEN INNOVATION POLICIES AND THE REPLACEMENT OF HAZARDOUS SUBSTANCES. CIEL PARTICIPATED IN EDUCATING POLICYMAKERS, THE PRESS AND THE PUBLIC ON THE MATTER OF DOMESTIC

Employer identification number 52-1633220

ATTACHMENT 3 (CONT'D)

CHEMICAL POLICY REFORM, AS WELL AS THE ONGOING DEVELOPMENT OF
INTERNATIONAL CHEMICAL LAW. CIEL DEVELOPED STRATEGIES FOR
IMPLEMENTING AND FURTHER DEVELOPING GLOBAL INSTRUMENTS TO FOSTER
THE SOUND MANAGEMENT OF CHEMICALS AT GLOBAL LEVEL. CIEL HELPED
STRENGTHEN THE CAPACITY OF PUBLIC INTEREST ORGANIZATIONS TO
GRAPPLE WITH THE LEGAL CHALLENGES PRESENTED BY NANOTECHNOLOGIES
AND ENDOCRINE DISRUPTING CHEMICALS, INCLUDING RAISING AWARENESS
AMONG CIVIL SOCIETY ON THE POTENTIAL FOR EXISTING INTERNATIONAL
PROCESSES TO CONFRONT THESE ISSUES AND ENGAGING THE EUROPEAN UNION
IN PARTICULAR. CIEL ALSO PROVIDED ASSISTANCE TO THE UNITED
NATIONS ENVIRONMENT PROGRAMME (UNEP) BY PREPARING PAPERS IN
SUPPORT OF INTERGOVERNMENTAL NEGOTIATIONS ON A LEGALLY BINDING
INSTRUMENT ON MERCURY AND BY PROVIDING LEGAL SUPPORT TO THE UNEP
SECRETARIAT AT NEGOTIATING SESSIONS.

ATTACHMENT 4

FORM 990, PART III - PROGRAM SERVICE, LINE 4C

INTERNATIONAL FINANCIAL INSTITUTIONS PROGRAM: CIEL'S EXEMPT

PURPOSE ACHIEVEMENTS INCLUDED THE FOLLOWING: ASSISTING COMMUNITIES

IN KOSOVO IN THEIR EFFORTS TO HOLD THE WORLD BANK GROUP

ACCOUNTABLE FOR THE POTENTIAL IMPACTS OF A NEW COAL-FIRED POWER

PLANT AND COAL MINE; SUPPORTING COMMUNITIES IN COLOMBIA WHO SEEK

TO HOLD THE INTERNATIONAL FINANCE CORPORATION ACCOUNTABLE FOR ITS

FINANCIAL SUPPORT FOR AN OPEN-PIT GOLD MINE IN A SENSITIVE WETLAND

ECOSYSTEM; DESIGNING AND DEVELOPING AN EARLY WARNING SYSTEM FOR

Employer identification number 52-1633220

ATTACHMENT 4 (CONT'D)

PROJECTS FINANCED BY INTERNATIONAL FINANCIAL INSTITUTIONS THAT
COULD IMPACT HUMAN RIGHTS; AND WORKING WITH OTHER CIVIL SOCIETY
ORGANIZATIONS TO PREPARE FOR THE UPCOMING REVIEW OF THE WORLD
BANK'S SAFEGUARD POLICIES.

FORM 990, PART III, LINE 4D - OTHER PROGRAM S	ERVICES_	ATTACHMENT	5
DESCRIPTION	GRANTS	EXPENSES	REVENUE
IPEN SECRETARIAT	16,179.	286,946.	259,690.
CLIMATE CHANGE	0	319,337.	19,400.
LAW & COMMUNITIES PROGRAM	27,413.	167,639.	0
MISCELLANEOUS PROJECTS	500.	50,398.	40,541.
HUMAN RIGHTS & THE ENVIRONMENT PROGRAM	0	188,535.	31,330.
TRADE & SUSTAINABLE DEVELOPMENT PROGRAM	0	30,823.	30,823.
TOTALS	44,092.	1,043,678.	381,784.

	ATTACHME	NT 6	
990, PART VII- COMPENSATION OF THE FIVE HIGHES	ST PAID IND. CONTRACTORS		
NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION	
JOHN WHITELAW KM. 10 RIO LEONES COMUNA CHILE CHICO REGION XI CHILE	CHEMICAL PROJECTS	106,416.	
TOTAL COMPENSATION	N	106,416.	

Form **8868**

(Rev January 2012)

Department of the Treasury

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Internal Revenue	e Service	► File a	separate ap	plication for each return.			
-	_	Automatic 3-Month Extension, o		-		X	
-	-	Additional (Not Automatic) 3-Mo					
Do not comp	elete Part II u	ınless you have already been gra	nted an aut	omatic 3-month extens	sion on a previously filed Form 886	8	
	9 1 /		,		omatic extension of time to file (6		
					nsion of time. You can electronical		
					ith the exception of Form 8870,		
					t be sent to the IRS in paper f		
					d click on e-file for Charities & Non	protits	
		Month Extension of Time. On					
	•	o file Form 990-T and requesting			•		
Part I only				and trusts must use t	Earm 7004 to request an extension	▶ ∐	
·-		<u> </u>	ips, KEMIC	s, and trusts must use i	Form 7004 to request an extension of		
Name of exempt organization or other filer, see inst			structions	Enter filer's identifying number, see instruction Employer identification number (EIN) or			
Type or	or				Employer identification flumber (EIN) or		
print	Number, street, and room or suite no. If a P.O. box, see instructions 1350. CONNECTIONS. AND CHARTE 1100.			X 52-1633220			
File by the				tions	Social security number (SSN)		
due date for filing your)			
return See	City, town o	or post office, state, and ZIP code For	a foreign add	dress, see instructions			
instructions	WASHIN	GTON, DC 20036-1739					
Enter the Re	turn code f	or the return that this application i	s for (file a	separate application fo	or each return)	. 01	
Application			Return	Application		Return	
is For			Code	Is For		Code	
Form 990			01	Form 990-T (corporat	tion)	07	
Form 990-BL	•		02	Form 1041-A		08	
Form 990-EZ		01	Form 4720		09		
Form 990-PF		04	Form 5227		10		
Form 990-T (sec 401(a) or 408(a) trust)		05	Form 6069				
Form 990-T (trust other than above) 06 Form				Form 8870		12	
The books		care of ▶ _ JEFFREY W. WAN					
Telephone		202 785-8700		AX No ▶ 202 785			
		es not have an office or place of t				▶∐	
	=	Return, enter the organization's for	-				
	•			rt of the group, check t	this box ▶ 🔛 and att	ach	
		d EINs of all members the extensi) T)		
	st an auton	natic 3-month (6 months for a cor				.4	
until			exempt org	janization return for the	e organization named above. The e	xtension is	
	-	n's return for					
	▶ calendar year 20 or ▶ X tax year beginning 07/01 , 2011 , and ending 06/30 , 2012						
	tax year be	giiiiiig		, and ending	, 20_12_		
2 If the ta	ax vear ente	ered in line 1 is for less than 12 m	onths chec	k reason I Initial r	eturn Final return		
	-	counting period	o, oo		otem		
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any							
	nonrefundable credits. See instructions						
		n is for Form 990-PF, 990-T,					
		nents made Include any prior yea				-	
c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions 3c \$							
				with this Form 8868.	see Form 8453-EO and Form 8	879-EO for	
payment inst	_						