

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury Internal Revenue Service

EXTENDED TO NOVEMBER 15, 2016
Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf. OMB No 1545-0052

| For cal | endar year 2015 or tax year beginning | | , and ending_ | | |
|---|---|---|---------------------------|--|--|
| | of foundation | | | A Employer identificatio | n number |
| | CKEL PRODUCERS ENVIRONME | | | | |
| | SEARCH ASSOCIATION, INC. | | | 13-3070077 | <u> </u> |
| | r and street (or P O box number if mail is not delivered to street | address) | Room/suite | B Telephone number | |
| | 25 MERIDIAN PARKWAY | | 240 | 919-595-19 | 950 |
| • | town, state or province, country, and ZIP or foreign p | ostal code | | C if exemption application is p | pending, check here |
| _DUI | RHAM, NC 27713 | | | | |
| G Che | ck all that apply: Initial return | Initial return of a fo | ormer public charity | D 1. Foreign organization | s, check here 🕨 🔃 |
| | Final return | Amended return | | 2 Foreign ergenmeters | |
| | Address change | Name change | | Foreign organizations micheck here and attach co | omputation |
| | ck type of organization: X Section 501(c)(3) ex | • • | | E If private foundation sta | tus was terminated |
| | | Other taxable private founda | | under section 507(b)(1 |)(A), check here 🕨 🔲 |
| | market value of all assets at end of year J Accounti | = | X Accrual | F If the foundation is in a | 60-month termination |
| | | ther (specify) | | under section 507(b)(1 |)(B), check here 🕨 📖 |
| <u></u> \$ | 722,088 • (Part I, colu | mn (d) must be on cash i | basis) | | T |
| Part | The total of amounts in columns (b), (c), and (d) may not | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net | (d) Disbursements for charitable purposes |
| | necessarily equal the amounts in column (a)) | · ' ' | income | income | (cash basis only) |
| 1 | | 3,313,375. | | N/A | |
| 2 | Check [If the foundation is not required to attach Sch. B. Interest on savings and temporary | | | - | |
| 3 | cash investments | | | | |
| 4 | Dividends and interest from securities | | | | |
| 2016 | a Gross rents | | <u> </u> | | |
| . 50 | Net rental income or (loss) | | | _ | |
| ဗာမွေ ၆ | Net gain or (loss) from sale of assets not on line 10 Gross sales price for all | | | N | TEN - |
| . ق⊱∍ | D assets on line 6a | | | RECE | <u> </u> |
| 7 ا≨ ج | , , | | 0. | | 18/ |
| <u> </u> | Net short-term capital gain | | | I VON 18! | 2016 \sightarrow |
| | Income modifications Gross sales less returns | | | | LE CONTRACTOR OF THE PARTY OF T |
| | | | | 101 | The state of the s |
| ≫ | b Less Cost of goods sold c Gross profit or (loss) | | - | TO GIA | · I M A I STATE OF THE PARTY OF THE PART |
| ξ 11 | Other income | | - | | |
| $\tilde{\Omega} = \begin{bmatrix} 11\\12 \end{bmatrix}$ | | 3,313,375. | 0. | | |
| 13 | | 787,172. | 0. | | 0. |
| 14 | | 1,094,565. | 0. | | 0. |
| 15 | • • | 265,113. | 0. | - | 0. |
| 9 16 | a Legal fees STMT 1 | 3,592. | 0. | · • · | 0 |
| ens , | b Accounting fees STMT 2 | 9,500. | 0. | | 0. |
| Ω. | c Other professional fees STMT 3 | 3,600. | 0. | | 0. |
| 9 17 | • | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| اغة 18 18 | | | | | |
| 19 | | 44,539. | 0. | | |
| · | | | | | |
| ₹ 21 | • • | 246,210. | 0. | · | 0. |
| P 22 | | 274. | 0. | | 0. |
| ဋ္ဌာ 23 | | 199,904. | 0. | | 0. |
| Operating 52 | Total operating and administrative | | | | |
| ber | expenses. Add lines 13 through 23 | 2,654,469. | . 0. | | 0. |
| 0 25 | Contributions, gifts, grants paid | 609,932. | · | | 788,439. |
| 26 | Total expenses and disbursements. | | | | |
| | Add lines 24 and 25 | 3,264,401. | 0. | | 788,439. |
| 27 | Subtract line 26 from line 12: | | | | |
| | Excess of revenue over expenses and disbursements | 48,974. | | | |
| | b Net investment income (if negative, enter -0-) | | 0. | | <u> </u> |
| | c Adjusted net income (if negative, enter -0-) | | | N/A | |
| 523501 11-24-15 | LHA For Paperwork Reduction Act Notice, see i | instructions. | | Δ. 22 | Form 990-PF (2015) |

16081108 783398 211<u>90</u>

NICKEL PRODUCERS ENVIRONMENTAL

| | | | NC. | <u></u> | <u>3070077 Page 2</u> |
|---------------|------------|--|---------------------------------------|----------------|---------------------------|
| F | art | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only | Beginning of year | End of | f year |
| | art | Balance Sneets column should be for end-of-year amounts only | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash - non-interest-bearing | | 221,285. | 221,285. |
| | 2 | Savings and temporary cash investments | 405,137. | | |
| | 3 | Accounts receivable ► 234,380. | | - | |
| | 1 | Less; allowance for doubtful accounts | 38,551. | 234,380. | 234,380. |
| | 4 | Pledges receivable ► | | <u> </u> | =,1 |
| | | Less: allowance for doubtful accounts ▶ | | | |
| | 5 | Grants receivable | | ·· | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | ľ | disqualified persons | | | |
| | 1 , | Other notes and loans receivable | | | |
| | ' | Less: allowance for doubtful accounts | | | |
| | | | | | |
| Assets | 1 - | Inventories for sale or use | 10 700 | 15 220 | 15 020 |
| Ass | 1 | Prepaid expenses and deferred charges | 10,790. | 15,238. | 15,238. |
| _ | | Investments - U.S. and state government obligations | | | |
| | 1 | Investments - corporate stock | | | |
| | 1 | Investments - corporate bonds | | | |
| | 11 | tnvestments - land, buildings, and equipment basis | | | |
| | | Less accumulated depreciation | | | |
| | 12 | Investments - mortgage loans | | | |
| | 1 | Investments - other | | | |
| | 14 | Land, buildings, and equipment; basis ► 366,756. | 1 | | |
| | | Less accumulated depreciation STMT 5 ▶ 128,239. | 43,300. | 238,517. | <u>238,517.</u> |
| | 15 | Other assets (describe ► SECURITY DEPOSIT) | 12,668. | 12,668. | 12,668. |
| | 16 | Total assets (to be completed by all filers - see the | | | |
| | | instructions. Also, see page 1, item I) | 510,446. | 722,088. | 722,088. |
| | 17 | Accounts payable and accrued expenses | 54,507. | 162,416. | |
| | 18 | Grants payable | 1,124,794. | 980,342. | |
| Ś | | Deferred revenue | | | |
| Liabilities | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | |
| api | | Mortgages and other notes payable | | | |
| Ξ | | Other liabilities (describe STATEMENT 6 | 365,688. | 564,899. | |
| | | | | 302,0333 | |
| | 23 | Total liabilities (add lines 17 through 22) | 1,544,989. | 1,707,657. | |
| _ | | Foundations that follow SFAS 117, check here | 2702275051 | 1770170371 | |
| | | and complete lines 24 through 26 and lines 30 and 31 | | | |
| es | 24 | Unrestricted | <1,034,543.> | <985,569. | |
| Fund Balances | 1 | Temporarily restricted | <u> </u> | | |
| 39 | ı | Permanently restricted | | | |
| <u>8</u> | 20 | · ["- | | <u> </u> | |
| 풀 | | Foundations that do not follow SFAS 117, check here | | | |
| 6 | | and complete lines 27 through 31. | | | |
| Net Assets or | 1 | Capital stock, trust principal, or current funds | | | |
| SS | | Paid-in or capital surplus, or land, bldg., and equipment fund | · · · · · · · · · · · · · · · · · · · | | |
| ž | | Retained earnings, accumulated income, endowment, or other funds | -1 024 542 | 100E ECO | |
| ž | 30 | Total net assets or fund balances | <1,034,543.> | <985,569·> | • |
| | | Tatal liabilitation and not accept them the balances | 510,446. | 722,088. | |
| | | Total liabilities and net assets/fund balances | | 122,000 | |
| P | <u>art</u> | Analysis of Changes in Net Assets or Fund B | alances | | |
| 1 | Total | net assets or fund balances at beginning of year - Part II, column (a), line | 30 | | |
| | | st agree with end-of-year figure reported on prior year's return) | | 1 | <1,034,543.> |
| | | amount from Part I, line 27a | | 2 | 48,974. |
| | | r increases not included in line 2 (itemize) | | 3 | 0. |
| | | lines 1, 2, and 3 | | 4 | <985,569.> |
| 5 | Decr | eases not included in line 2 (itemize) | | 5 | 0. |
| <u>6</u> | Total | net assets or fund balances at end of year (line 4 minus line 5) - Part II, co | lumn (b), line 30 | 6 | <985,569.> |
| | | | | | Form 990-PF (2015) |

Page 3

| (a) List and describ | nd Losses for Tax on Ir be the kind(s) of property sold (e.g shouse; or common stock, 200 sho | J., real estate, | | ` P - | ow acquired Purchase Donation | (c) Date (mo., | acquired day, yr.) | (d) Date sold (mo., day, yr.) |
|--|--|--|--------------------------------------|--------------|-------------------------------------|------------------------|----------------------------------|----------------------------------|
| 1a | | | | <u> </u> | | | | |
| b NON | <u>E</u> | | | <u> </u> | | | | |
| <u> </u> | | | | ļ | | | _ | |
| <u>d</u> | | | | | | | | |
| <u>e</u> | | | | 1 | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | st or other basis expense of sale | | | | Gain or (loss) is (f) minus (| |
| a b | | | | | | | | |
| C | | - | | | | • | | |
| d | | | | | | | | |
| e | | | _ | | | | | |
| Complete only for assets showing | gain in column (h) and owned by | the foundation | on 12/31/69 | | | (I) Gains (| Col. (h) gain i | minus |
| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | cess of col. (ı) col. (j), if any | | C | ol. (k), but Losses | not less than (from col. (f | n -0-) or h)) |
| a | | | | | | | | |
| b | | | | | | | | |
| С | | | | | | | | |
| ď | | | | | | | | |
| е | | | | | | | | |
| 2 Capital gain net income or (net capi | tal loss) { If gain, also enter of the loss of the los | r in Part I, line - in Part I, line | 7 7 | } | 2 | | | |
| 3 Net short-term capital gain or (loss) If gain, also enter in Part I, line 8, co | as defined in sections 1222(5) ar | | | ٦ | | | | |
| If (loss), enter -0- in Part I, line 8 | der Section 4940(e) for | Dodugod | Tay on Not | | 3 l | | | |
| Was the foundation liable for the section f "Yes," the foundation does not qualify | under section 4940(e). Do not co | mplete this pa | rt. | | | | | Yes X No |
| 1 Enter the appropriate amount in each | | nstructions bei | ore making any e | | | - | | (d) |
| (a) Base period years Calendar year (or tax year beginning | | | Net value of no | | | | Distribi | útión ratio ded by col. (c)) |
| 2014 | 1,11 | 6,570. | | | 506,73 | | | 2.203468 |
| 2013 | | 7,122. | | | 616,75 | | - | 2.346363 |
| 2012 | | 6,182. | | | 522,82 | | | 2.211400 |
| 2011 | | 6,021. | | | 372,73 | | | 3.69173 |
| 2010 | 1,84 | 8,825. | | | 348,44 | | 1 | 5.248578 |
| 2 Total of line 1, column (d) | | l 0 h 5 | | | _ | 2 | | 15.701546 |
| Average distribution ratio for the 5-y the foundation has been in existence | | on line 2 by 5, | or by the number | or years | S | 3 | | 3.140309 |
| Enter the net value of noncharitable | -use assets for 2015 from Part X, | line 5 | | | | 4 | | 308,513 |
| 6 Multiply line 4 by line 3 | | | | | | 5 | | 968,826 |
| 6 Enter 1% of net investment income | (1% of Part I, line 27b) | | | | | 6 | | 0 |
| Add lines 5 and 6 | • | | | | | 7 | | 968,826 |
| | Dort VII. line A | | | | | 8 | | 788,439 |
| 3 Enter qualifying distributions from F if line 8 is equal to or greater than lin | | 1b, and comp | lete that part usin | ıg a 1% | tax rate. | _ 8 | <u>I</u> | 100,439 |
| See the Part VI instructions. | | | | | | | | |

NICKEL PRODUCERS ENVIRONMENTAL

Form 990-Pt² (2015) RESEARCH ASSOCIATION, INC.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.

Date of ruling or determination letter:

(attach copy of letter if necessary-see instructions)

| ıa | Exempt operating roundations described in Section 4540(0)(2), theta line 2 | i |] | | | |
|----|---|----------------|-------|-----------------|--|-----------------|
| | Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) |) [| | | | |
| þ | Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% | } | 1 | | | 0. |
| | of Part I, line 27b | | | | | |
| | e All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) |). J | | | | |
| | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | 2 | | | <u>0.</u> |
| - | Add lines 1 and 2 | | 3 | | | 0. |
| | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | 4 | | | 0. |
| | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | | 5 | | | 0. |
| | Credits/Payments: | | | | | |
| | a 2015 estimated tax payments and 2014 overpayment credited to 2015 | | 4 | | | |
| | Exempt foreign organizations - tax withheld at source | | - | | | |
| | : Tax paid with application for extension of time to file (Form 8868) | _ | - | | | |
| | Backup withholding erroneously withheld | | - | | | |
| | Total credits and payments. Add lines 6a through 6d | | 7 | | | 0. |
| | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | | 8 | | | |
| | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | 9 | | | 0. |
| | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | • | 10 | | | |
| | | funded 🚩 | 11 | | | |
| | art VII-A Statements Regarding Activities | | | | T | . I NI - |
| 1a | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate | or intervene | ı in | <u> </u> | Yes | |
| | any political campaign? | | ١٥ | 1a | | X |
| D | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for t | | • | <u>1b</u> | ┼ | X |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any material | ais publish | ea or | | | |
| | distributed by the foundation in connection with the activities. | | | | | ,, |
| | Did the foundation file Form 1120-POL for this year? | | | 1c | ├─ | X |
| a | I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ 0 • (2) On foundation managers. ▶ \$ | 0. | | | | 1 |
| | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation. | | - | | | |
| - | managers. > \$ 0. | ualiun | | | | |
| , | Has the foundation engaged in any activities that have not previously been reported to the IRS? | | | 2 | | x |
| _ | If "Yes," attach a detailed description of the activities | | | - - | | ├ ^ |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of income | ornoration o | ١r | | | |
| ٥ | bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | orporation, t | ,, | 3 | | х |
| Δa | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | | 4a | - | X |
| | o If "Yes," has it filed a tax return on Form 990-T for this year? | | N/A | 4b | | ^ |
| | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | / | 5 | | X |
| - | If "Yes," attach the statement required by General Instruction T | | | | | † ** |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | | | |
| | By language in the governing instrument, or | | | | | |
| | By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict v | vith the state | law | | | |
| | remain in the governing instrument? | | | 6 | х | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), a | nd Part XV | , | 7 | Х | |
| | | | | | | |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | | 1 | |
| | NY | | | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or design | nate) | | | 1 | |
| | of each state as required by General Instruction G? If "No," attach explanation | | | 8b | Х | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j) |)(5) for cale | ndar | | | |
| | year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV | | | 9 | | <u>X</u> |
| 0 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and add | esses | | 10 | L | X |
| | | | F | orm 99 0 |)-PF | (2015) |

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?

b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after

olf "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015)

b Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?

Form **990-PF** (2015)

X

N/A

2b

3b

4a

If "Yes," list the years

statement - see instructions.)

NICKEL PRODUCERS ENVIRONMENTAL

| Part VII ² B Statements Regarding Activities for Which | | Required (contin | 13-30700 | 77 Page 6 |
|--|--|------------------|--|----------------------------|
| 5a During the year did the foundation pay or incur any amount to: | TOTTI 4720 May be I | nequired (contin | lued) | |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section | n 4945(a)\2 | - · | es X No | |
| (2) Influence the outcome of any specific public election (see section 4955); (2) | | | es LALINO | |
| any voter registration drive? | or to ourry on, an oonly or man | | es X No | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | 32 | | es X No | |
| (4) Provide a grant to an organization other than a charitable, etc., organization | | | | |
| 4945(d)(4)(A)? (see instructions) | | XY | es 🔲 No | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary. | or educational purposes, or | | | |
| the prevention of cruelty to children or animals? | , , , | | es X No | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un | der the exceptions described | | | |
| section 53.4945 or in a current notice regarding disaster assistance (see instru | | - | | 5b X |
| Organizations relying on a current notice regarding disaster assistance check h | nere | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f | rom the tax because it mainta | uned | | |
| expenditure responsibility for the grant? | E STATEMENT 8 | 3 X Y | es 🔲 No | |
| If "Yes," attach the statement required by Regulations section 53 494 | 5-5(d). | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to | pay premiums on | | | |
| a personal benefit contract? | | Y | es X No | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | personal benefit contract? | | | 6b X |
| If "Yes" to 6b, file Form 8870 | | | | |
| 7a At any time during the tax year, was the foundation a party to a prohibited tax s | shelter transaction? | Y | es 🗶 No 📙 | |
| b If "Yes," did the foundation receive any proceeds or have any net income attrib | | | | 7b |
| Part VIII Information About Officers, Directors, Trust | ees, Foundation Ma | anagers, Highl | y | |
| Paid Employees, and Contractors | | | | |
| 1 List all officers, directors, trustees, foundation managers and their | | (c) Compensation | (d) Contributions to | (a) Evnance |
| (a) Name and address | (b) Title, and average hours per week devoted | (If not paid, | (d) Contributions to employee benefit plans and deferred | (e) Expense account, other |
| | to position | `enter`-0-) | compensation | allowances |
| | - | | | |
| SEE STATEMENT 7 | - | 797 172 | 45,088. | 54,555. |
| SEE STATEMENT / | | 707,172. | 43,000. | 34,333. |
| | - | | | |
| | - | | | |
| | | - | | |
| | - | | | |
| | - | | | |
| | | | _ | |
| | 1 | | | |
| | 1 | | | |
| 2 Compensation of five highest-paid employees (other than those inc | luded on line 1). If none, | enter "NONE." | | |
| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week | (a) Componentian | (d) Contributions to employee benefit plans | (e) Expense account, other |
| (a) Name and address of each employee paid more than \$50,000 | devoted to position | (c) Compensation | and deferred compensation | allowances |
| CHRISTIAN E SCHLEKAT - 2525 MERIDIAN | TOXICOLOGIST | | | |
| PARKWAY, SUITE 240, DURHAM, NC 27713 | 40.00 | 189,652. | 11,600. | 15,307. |
| MIKE TAYLOR - 2525 MERIDIAN PARKWAY, | TOXICOLOGIST | | | |
| SUITE 240, DURHAM, NC 27713 | 40.00 | 146,979. | 8,997. | 8,765. |
| PHIL MOORE - 2525 MERIDIAN PARKWAY, | IT MANAGER | | | |
| SUITE 240, DURHAM, NC 27713 | 40.00 | 114,044. | <u>5,178.</u> | 18,764. |
| EMILY R GARMAN - 2525 MERIDIAN | TOXICOLOGIST | | _ | |
| PARKWAY, SUITE 240, DURHAM, NC 27713 | 40.00 | 117,263. | 0. | 17,494. |
| KATHERINE E HEIM - 2525 MERIDIAN | TOXOCOLOGIST | | | |
| PARKWAY, SUITE 240, DURHAM, NC 27713 | 40.00 | 101,440. | 6,045. | 0. |
| Total number of other employees paid over \$50,000 | | | | 3 |
| | | | Form | 990-PF (2015) |

Form **990-PF** (2015)

All other program-related investments. See instructions.

Total, Add lines 1 through 3

| | Minimum Investment Return (All domestic foundations must complete this part. Foreign fou | ndations, se | e instructions) |
|------|---|-----------------|-----------------|
| | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: | | |
| | Average monthly fair market value of securities | 1a | 0. |
| | Average of monthly cash balances | 1b | 313,211. |
| | air market value of all other assets | _1c | |
| | Total (add lines 1a, b, and c) | 1d | 313,211. |
| | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| • | Ic (attach detailed explanation) | | |
| 2 / | Acquisition indebtedness applicable to line 1 assets | 2 | 0. |
| 3 5 | Subtract line 2 from line 1d | 3 | 313,211. |
| 4 (| Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) | 4 | 4,698. |
| 5 1 | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 | 5 | 308,513. |
| | Minimum investment return Enter 5% of line 5 | 6_ | 15,426. |
| Pa | rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.) | nd certain | |
| 1 N | Minimum investment return from Part X, line 6 | 1 | 15,426. |
| 2a 1 | ax on investment income for 2015 from Part VI, line 5 | | |
| bІ | ncome tax for 2015. (This does not include the tax from Part VI.) | | |
| | Add lines 2a and 2b | 2c | 0. |
| 3 [| Distributable amount before adjustments. Subtract line 2c from line 1 | 3 | 15,426. |
| | Recoveries of amounts treated as qualifying distributions | 4 | 0. |
| | Add lines 3 and 4 | 5 | 15,426. |
| 6 [| Deduction from distributable amount (see instructions) | 6 | 0. |
| | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | 7 | 15,426. |
| | Qualifying Distributions (see instructions) | | |
| | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: | _ | F00 400 |
| | xpenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 788,439. |
| | Program-related investments - total from Part IX-B | 1b | 0. |
| | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes | 2 | |
| | amounts set aside for specific charitable projects that satisfy the: | | |
| | Suitability test (prior IRS approval required) | 3a | |
| | ash distribution test (attach the required schedule) | 3b | <u> </u> |
| | lualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 788,439. |
| | oundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | |
| | ncome. Enter 1% of Part I, line 27b | 5 | 0. |
| 6 A | djusted qualifying distributions. Subtract line 5 from line 4 | 6 | 788,439. |
| | late. The amount on line 6 will be used in Part V. column (h), in subsequent years when calculating whether the foundation of | walified for th | o continu |

Form **990-PF** (2015)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2014 | (c) 2014 | (d) 2015 |
|--|---------------|----------------------------|-------------|--------------------|
| 1 Distributable amount for 2015 from Part XI, | · , | | | |
| line 7 | | | | 15,426. |
| 2 Undistributed income, if any, as of the end of 2015 | - | · | | |
| a Enter amount for 2014 only | | | 0. | |
| b Total for prior years: | | | | |
| | | 0. | | |
| 3 Excess distributions carryover, if any, to 2015: | | | | |
| a From 2010 1,811,403. | | | | |
| b From 2011 1,357,384. | | | | |
| c From 2012 1,130,041. | | | | |
| d From 2013 e From 2014 1,091,233. | | | | |
| | 6,806,345. | | | |
| f Total of lines 3a through e 4 Qualifying distributions for 2015 from | 0,000,343. | | | |
| Part XII, line 4: ▶ \$ 788, 439. | | | | |
| a Applied to 2014, but not more than line 2a | | | 0. | |
| b Applied to undistributed income of prior | | | | - |
| years (Election required - see instructions) | | 0. | | |
| c Treated as distributions out of corpus | | | | |
| (Election required - see instructions) | 0. | | | |
| d Applied to 2015 distributable amount | | - | | 15,426. |
| e Remaining amount distributed out of corpus | 773,013. | | | |
| 5 Excess distributions carryover applied to 2015 | 0. | | | 0. |
| (If an amount appears in column (d), the same amount must be shown in column (a)) | | | | |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 7,579,358. | | | |
| b Prior years' undistributed income. Subtract | | | | |
| line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | 0. | | |
| d Subtract line 6c from line 6b. Taxable | | | | |
| amount - see instructions | | 0. | | |
| e Undistributed income for 2014. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2015. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2016 | | | | |
| 7 Amounts treated as distributions out of | | | | |
| corpus to satisfy requirements imposed by | | | | |
| section 170(b)(1)(F) or 4942(g)(3) (Election | | | | |
| may be required - see instructions) | 0. | | _ | |
| 8 Excess distributions carryover from 2010 | 1 011 402 | | | |
| not applied on line 5 or line 7 | 1,811,403. | | - | |
| 9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a | 5,767,955. | | | |
| | 5,101,355. | | | |
| 0 Analysis of line 9: a Excess from 2011 1,357,384. | | | | |
| b Excess from 2012 1, 130, 041. | | | | |
| c Excess from 2013 1,416,284. | | | | |
| d Excess from 2014 1,091,233. | | | | |
| e Excess from 2015 773,013. | | | | |
| | | ' | | Form 990-PF (2015) |

NICKEL PRODUCERS ENVIRONMENTAL

| Form 990-PF (2015) RESEARC | H ASSOCIATI | ON, INC. | | |)70077 Page 1 |
|--|-----------------------------|-----------------------------|-----------------------------|---------------------------------------|---------------------|
| Part XIV Private Operating F | oundations (see in | structions and Part V | II-A, question 9) | N/A | |
| 1 a If the foundation has received a ruling o | r determination letter tha | t it is a private operating | | | |
| foundation, and the ruling is effective fo | r 2015, enter the date of | the ruling | ▶ ∟ | | |
| b Check box to indicate whether the found | dation is a private operati | ng foundation described | | 4942(j)(3) or4 | 942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum | (a) 2015 | (b) 2014 | (c) 2013 | (d) 2012 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed | | | | | |
| b 85% of line 2a | | | _ | | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | | | | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities. | | | | | |
| Subtract line 2d from line 2c | | | | | |
| 3 Complete 3a, b, or c for the alternative test relied upon: | | | | | |
| a "Assets" alternative test - enter: | | | | | |
| (1) Value of all assets | | | | | |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| b "Endowment" alternative test - enter | | | | | |
| 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c "Support" alternative test - enter: | | | - | | |
| (1) Total support other than gross | | | | | |
| investment income (interest, dividends, rents, payments on securities loans (section | | | | | |
| 512(a)(5)), or royalties) | | | | | |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| (3) Largest amount of support from | | | | | |
| an exempt organization | | | | | |
| (4) Gross investment income | | | | | |
| Part XV Supplementary Info | rmation (Comple | te this part only | if the foundation | had \$5,000 or m | ore in assets |
| at any time during t | | | | | |
| 1 Information Regarding Foundation | | | | · · · · · · · · · · · · · · · · · · · | <u> </u> |
| a List any managers of the foundation wh year (but only if they have contributed n | o have contributed more | | tributions received by the | foundation before the clo | se of any tax |
| NONE | | | | | |
| b List any managers of the foundation wh other entity) of which the foundation has | | | (or an equally large porti | on of the ownership of a p | artnership or |
| NONE | | | | | |
| 2 Information Regarding Contributi | | | | not accept unsolicited requ | jacte for funde. If |
| the foundation makes gifts, grants, etc. | (see instructions) to indiv | riduals or organizations i | under other conditions, c | omplete items 2a, b, c, and | |
| a The name, address, and telephone num | ber or e-mail address of t | he person to whom app | ications should be addre | ssed: | |
| SEE STATEMENT 12 | | | | | |
| b The form in which applications should b | e submitted and informa | tion and materials they s | hould include: | | |
| c Any submission deadlines: | - | _ | | | |
| | | dana abadabla 6.44- | lundo of motifications | ath au foat ouar | |
| d Any restrictions or limitations on awards | s, such as by geographic | n areas, charitable fields | , kinds of institutions, or | omer factors: | |
| | | | | | |

13-3070077 Page 11

| Part XV Supplementary Information | 1 (continued) | · · · | | |
|--|--|-------------------------|----------------------------------|---------------|
| 3 Grants and Contributions Paid During the | fear or Approved for Future F | Payment | | |
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | status of recipient | Contribution | 7 anodra |
| a Paid during the year | | | | |
| | | | | |
| | | | | |
| | | | | |
| SEE ATTACHED STATEMENT 13 | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total | <u> </u> | | ▶ 3a | 0 |
| b Approved for future payment | | | | |
| | | | | |
| | | | | |
| | | | | |
| SEE ATTACHED STATEMENT 14 | | | | |
| | | | | - |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | <u></u> . |
| | | | | |
| | | | | |
| | | | | |
| | | j | | |
| Total | <u></u> | | ▶ 3b | |
| Total | | | | 0. |

RESEARCH ASSOCIATION, INC.

| inter gross amounts unless otherwise indicated. | Unrelated b | usiness income | Excluded t | y section 512, 513, or 514 | (0) |
|---|---|--|--|----------------------------|-------------------|
| | (a) Business | (b) Amount | (c) Exclu- sion | (d) Amount | Related or exempt |
| 1 Program service revenue: | code | | code | - Aillouill | function income |
| a | - | | | | |
| <u> </u> | | | + + | | |
| <u> </u> | 1 1 | | + | | |
| d | l l | | + | | |
| e | _ _ | | + | | |
| g Fees and contracts from government agencies | — | | + | | |
| g Fees and contracts from government agencies Membership dues and assessments | | | | | |
| Interest on savings and temporary cash | | | | | + |
| investments | | | | | |
| Dividends and interest from securities | | | | | |
| | | | | | |
| Net rental income or (loss) from real estate: | | | | | |
| a Debt-financed property | | | | | <u> </u> |
| b Not debt-financed property | | | ┼ | | |
| Net rental income or (loss) from personal | | | | | |
| property | <u> </u> | | | | |
| Other investment income | | | <u> </u> | | |
| Gain or (loss) from sales of assets other | | | | | |
| than inventory | | | <u> </u> | | |
| Net income or (loss) from special events | | · - | <u> </u> | | |
| Gross profit or (loss) from sales of inventory | | | | | |
| Other revenue: | | | | | |
| a | _ | | | | |
| b | _ | | <u> </u> | | |
| c | _ | | | | |
| | 1 | | | | |
| d | _ | | \longrightarrow $-$ | | |
| e | | | | | |
| e Subtotal. Add columns (b), (d), and (e) | | 0. | | 0. | |
| e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) | | 0. | | | |
| e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) | | 0. | | | |
| e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations | .) | | | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie | s to the Accom | plishment of Ex | cempt Pu | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which i | s to the Accom | plishment of Explumn (e) of Part XVI-A | cempt Pu | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accom | plishment of Explumn (e) of Part XVI-A | cempt Pu | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which i | s to the Accom | plishment of Explumn (e) of Part XVI-A | cempt Pu | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accom | plishment of Explumn (e) of Part XVI-A | cempt Pu | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accom | plishment of Explumn (e) of Part XVI-A | cempt Pu | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accom | plishment of Explumn (e) of Part XVI-A | cempt Pu | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accom | plishment of Explumn (e) of Part XVI-A | cempt Pu | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accom | plishment of Explumn (e) of Part XVI-A | cempt Pu | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accom | plishment of Explumn (e) of Part XVI-A | cempt Pu | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accom | plishment of Explumn (e) of Part XVI-A | cempt Pu | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accom | plishment of Explumn (e) of Part XVI-A | cempt Pu | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie The No. Explain below how each activity for which in the foundation's exempt purposes (other the subtotal activity). | s to the Accom | plishment of Explumn (e) of Part XVI-A | cempt Pu | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accom | plishment of Explumn (e) of Part XVI-A | cempt Pu | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accom | plishment of Explumn (e) of Part XVI-A | cempt Pu | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accom | plishment of Explumn (e) of Part XVI-A | cempt Pu | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie The No. Explain below how each activity for which in the foundation's exempt purposes (other the subtotal activity). | s to the Accom | plishment of Explumn (e) of Part XVI-A | cempt Pu | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accom | plishment of Explumn (e) of Part XVI-A | cempt Pu | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accom | plishment of Explumn (e) of Part XVI-A | cempt Pu | 13 _ | |
| Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activitie ine No. Explain below how each activity for which in the foundation's exempt purposes (other the | s to the Accom | plishment of Explumn (e) of Part XVI-A | cempt Pu | 13 _ | |

523621 11-24-15

12

5) RESEARCH ASSOCIATION, INC. 13-3070077 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Part XVII **Exempt Organizations**

| 1 D | id the or | ganization directly or indir | rectly engage in any | of the followin | g with any other organizati | on described in sec | tion 501(c) of | | Yes | No |
|-------------|----------------|-------------------------------------|-----------------------------------|--------------------|----------------------------------|------------------------|---------------------------------|-------------------------------|----------------------|----------|
| th | e Code | (other than section 501(c) |)(3) organizations) (| or in section 52 | 7, relating to political organ | nizations? | | | | |
| a Tr | ansfers | from the reporting founda | ation to a noncharit | able exempt or | ganization of: | | | - | | |
| (1 |) Cash | | | | | | | 1a(1) | | Х |
| (2 |) Other | assets | | | | | | 1a(2) | | Х |
| b 0 | ther tran | isactions: | | | | | | | | |
| (1 |) Sales | of assets to a noncharital | ble exempt organiza | ation | | | | 15(1) | | X |
| • | • | hases of assets from a noi | · - | | | | | 1b(2) | | X |
| • | • | al of facilities, equipment, | • | - 0 | | | | 1b(3) | | X |
| • | • | bursement arrangements | | | | | | 1b(4) | | X |
| • | • | s or loan guarantees | | | | | | 1b(5) | | X |
| • | • | rmance of services or me | embership or fundra | usina solicitatio | ns | | | 1b(6) | | X |
| - | • | f facilities, equipment, ma | | | | | | 1c | | X |
| | | | | | dule. Column (b) should al | ways show the fair | market value of the good | 1 | ets | |
| | | <u>-</u> | | _ | ed less than fair market valu | | - | | 010, | |
| | | i) the value of the goods, | | | ou loos man han maner tan | ao ay abaob | o. onag arrangomon | ., | | |
| (a) Line | ··· · | (b) Amount involved | | | exempt organization | (d) Description | n of transfers, transactions, a | ind sharing an | angeme | |
| (, | | (2) | (,, | N/A | | (-) | | | | |
| | - | | | | | | • | | | |
| | - | | | | | <u> </u> | | | | |
| | - - | | | | | | | · <u></u> . | | |
| | | | | | | | | . | | |
| | | | | | | | | | | |
| | - | | | | | | | | | |
| | + | | | | | | | | | |
| | - | | | | | | | | | |
| | | | | | | | | | | |
| | - | | | | | - | - | | | |
| | - | | | | | | | | | |
| | _ | | | | | - | - | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | _ | | | |
| | | | | | | | | | | |
| | | | | | or more tax-exempt organi | zations described | | | | , |
| | | 501(c) of the Code (other | • | :)(3)) or in sect | ion 527? | | | Yes | X | No |
| b If | "Yes," co | omplete the following sche | | | | | ·· | | | |
| | | (a) Name of org | anization | | (b) Type of organization | | (c) Description of relatio | nship | | |
| | | N/A | | | | | | | | |
| | | | | | | _ | | | | |
| | | | | | | | · _ | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | Under | penalties of perjury declared | that I have examined th | s return, includin | g accompanying schedules and | statements, and to the | best of my knowledge | May the IRS d | scuss th | nis |
| Sign | and be | eller, it is true, correct, and com | notice Occupation of pr | recarer mines mar | taxpayer) is based on all inform | EXECU | PIVE ! | eturn with the shown below | prepare see instr | t r)? |
| Here | | \mathcal{H} | 400 | | 11-9-2016 | DIREC | | X Yes | | No |
| | Sign | ature of officer or trustee | | | Date | Title | L | | | |
| | | Print/Type preparer's na | ıme | Preparer's si | gnature | Date | Check if PTI | N | | |
| | | ANDREA WOO | DELL | Austi | | 1.151 | self- employed | | | |
| Paid | | EASON | | marec | Myason | 11/9/16 | P | 00361 | 629 | |
| Prep | arer | Firm's name ► BLA | CKMAN & S | SLOOP, | CPAS, P.A. | | Firm's EIN ▶ 56- | | | |
| Use | | | ··· - - - - | - • | <u>-</u> | | | | | |
| | - | Firm's address ▶ 14 | 14 RALEIC | H RD, | SUITE 300 | | | _ | | |
| | | | APEL HILI | | | | Phone no. (919 | 942- | 3700 |) |
| | _ | | | | | | , <u> </u> | Form 990 | | |
| | | | | | | | | | ٧. | / |

523622 11-24-15

Schedule B (Form 990, 990-EZ,

or 990-PF) Department of the Treasury

Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and

its instructions is at www.lrs.gov/form990 .

OMB No 1545-0047

Employer identification number

NICKEL PRODUCERS ENVIRONMENTAL RESEARCH ASSOCIATION, INC. 13-3070077 Organization type (check one) Section: Filers of: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II. ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF). but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization NICKEL PRODUCERS ENVIRONMENTAL RESEARCH ASSOCIATION, INC.

Employer identification number

13-3070077

| Part I | Contributors (see instructions) | Use duplicate copies of Part I if additional | space is needed. |
|--------|---------------------------------|--|------------------|
|--------|---------------------------------|--|------------------|

| (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
|---|--|---|
| NICKEL INSTITUTE BROOKFIELD PLACE 161 BAY STREET, SUITE 2700 TORONTO, ONTARIO, CANADA M5J 2S1 | \$3,313,375. | Person X Payroll Noncash (Complete Part II for noncash contributions.) |
| (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | \$ | Person Payroll Oncash Complete Part II for noncash contributions) |
| (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | Person Payroll Oncash Complete Part II for noncash contributions.) |
| | Name, address, and ZIP + 4 NICKEL INSTITUTE BROOKFIELD PLACE 161 BAY STREET, SUITE 2700 TORONTO, ONTARIO, CANADA M5J 2S1 (b) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 (b) Name, address, and ZIP + 4 | Name, address, and ZIP + 4 NICKEL INSTITUTE BROOKFIELD PLACE 161 BAY STREET, SUITE 2700 (b) Name, address, and ZIP + 4 (c) Total contributions (d) Total contributions (e) Total contributions (f) Name, address, and ZIP + 4 (h) Total contributions (h) Name, address, and ZIP + 4 (h) Total contributions |

Name of organization

NICKEL PRODUCERS ENVIRONMENTAL RESEARCH ASSOCIATION, INC.

Employer identification number

13-3070077

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|------------------------------|--|--|-----------------------------|
| | | | |
| | | _ | |
| | | \$ | |
| (a) No. | | (c) | 4.0 |
| from | (b) Description of noncash property given | FMV (or estimate) (see instructions) | (d) Date received |
| Part I | | (coomica double) | |
| | | | |
| | | \$ | |
| (a) | | | |
| No. | (b) | (c) FMV (or estimate) | (d) |
| from Part I | Description of noncash property given | (see instructions) | Date received |
| | | _ | |
| | | _ | |
| | | \$ | |
| (a) No. | (I-) | (c) | |
| from | (b) Description of noncash property given | FMV (or estimate) (see instructions) | (d) Date received |
| Part I | | (200 mos south) | |
| | | _ | |
| | | \$ | |
| (a) | | | |
| No. | (b) | (c) FMV (or estimate) | (d) |
| from Part I | Description of noncash property given | (see instructions) | Date received |
| | | | |
| | | | |
| | | \$ | |
| (a) No. | (6) | (c) | (4) |
| from | (b) Description of noncash property given | FMV (or estimate) (see instructions) | (d) Date received |
| Part I | | , , | |
| | | | |
| | | | |
| | | Schedule B /Form 0 | 00 000-E7 or 000-DE) (2015) |

| Schedule | R | (Form | 990 | 990-F7 | ٥r | aan.PF | ١ / | 2015 |
|----------|---|-------|------|--------|----|--------|-----|------|
| Concadio | _ | Ų. O | 000, | , | 01 | 33011 | , , | |

| Name of orga | nization PRODUCERS ENVIRONMENT | AL | Employer identification number |
|---------------------------|--|--|--|
| | CH ASSOCIATION, INC. Exclusively religious, charitable, etc., conthe year from any one contributor. Complete completing Part III, enter the total of exclusively religious. | tributions to organizations described columns (a) through (e) and the follo us, charitable, etc., contributions of \$1,000 o | 13-3070077 I in section 501(c)(7), (8), or (10) that total more than \$1,000 for wing line entry. For organizations r less for the year (Enterthis info once) \$\Bigsir \bigsir \Bigsi |
| (a) No. from Part I | Use duplicate copies of Part III if addition (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | (e) Transfer of git | ft |
| | Transferee's name, address, a | nd ZIP + 4 | Relationship of transferor to transferee |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | Transferee's name, address, a | (e) Transfer of git | Relationship of transferor to transferee |
| | | | · |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| _ | | (e) Transfer of gif | t |
| | Transferee's name, address, a | nd ZIP + 4 | Relationship of transferor to transferee |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | (e) Transfer of gif | t |
| | Transferee's name, address, a | nd ZIP + 4 | Relationship of transferor to transferee |
| | | | |

| FORM 990-PF | LEGAL | FEES | S | TATEMENT | 1 |
|---|------------------------------|-----------------------------------|------------------------|----------------------------|----|
| DESCRIPTION | (A) EXPENSES PER BOOKS | | | (D) CHARITA PURPOS | |
| LEGAL | 3,592. | 0. | | | 0. |
| TO FM 990-PF, PG 1, LN 16A | 3,592. | 0. | | | 0. |
| FORM 990-PF | ACCOUNTI | NG FEES | S | TATEMENT | 2 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | | (D) CHARITA PURPOS | |
| ACCOUNTING | 9,500. | 0. | | | 0. |
| TO FORM 990-PF, PG 1, LN 16B | 9,500. | 0. | | | 0. |
| FORM 990-PF (| OTHER PROFES | SIONAL FEES | S' | TATEMENT | 3 |
| DESCRIPTION | (A) EXPENSES PER BOOKS | (B) NET INVEST- MENT INCOME | | (D) CHARITA: PURPOS: | |
| MISCELLANEOUS PROFESSIONAL FEES | 3,600. | 0. | | | 0. |
| TO FORM 990-PF, PG 1, LN 16C | 3,600. | 0. | | | 0. |
| FORM 990-PF | OTHER E | XPENSES | S | FATEMENT | 4 |
| | | (B) | (C) | (D) | |
| DESCRIPTION | (A) EXPENSES PER BOOKS | NET INVEST- MENT INCOME | ADJUSTED NET INCOME | CHARITAI PURPOSI | |
| DESCRIPTION MEETINGS MISCELLANEOUS DUES & FEES OFFICE COSTS COMMUNICATIONS | EXPENSES | NET INVEST- | | | |

18 STATEMENT(S) 1, 2, 3, 4 16081108 783398 21190 2015.04030 NICKEL PRODUCERS ENVIRONMEN 21190 1

| FORM 990-PF DEPRECIATION | OF ASSETS NO | T HELD FOR INV | ESTMENT | STATEMENT 5 |
|--|---------------------------------|-----------------------------|-----------------------------|----------------------|
| DESCRIPTION | COST OR OTHER BASIS | ACCUMULATED DEPRECIATION | BOOK VALUE | FAIR MARKET VALUE |
| COMPUTER EQUIPMENT FURNITURE & FIXTURES LEASEHOLD IMPROVEMENTS | 167,152. 90,403. 109,201. | 47,336. | 93,262 43,067 102,188 | 43,067. |
| TO 990-PF, PART II, LN 14 | 366,756. | 128,239. | 238,517. | 238,517. |
| FORM 990-PF | OTHER LI | ABILITIES | | STATEMENT 6 |
| DESCRIPTION | | во | Y AMOUNT | EOY AMOUNT |
| PAYROLL LIABILITIES DEFERRED RENT | | | 328,112. 37,576. | 415,879. 149,020. |
| TOTAL TO FORM 990-PF, PART | II, LINE 22 | | 365,688. | 564,899. |

| FORM 990-PF PART VIII - LIST TRUSTEES AND | OF OFFICERS, D FOUNDATION MANA | | STAT | EMENT 7 |
|--|-----------------------------------|-----------------|---------------------------------|---------|
| NAME AND ADDRESS | TITLE AND AVRG HRS/WK | | EMPLOYEE BEN PLAN CONTRIB | |
| HUDSON BATES 2525 MERIDIAN PARKWAY, STE 240 DURHAM, NC 27713 | EXECUTIVE DIRE | | 15,909. | 16,509. |
| DAVID BUTLER 2525 MERIDIAN PARKWAY, STE 240 DURHAM, NC 27713 | CHAIRMAN (AS O 1.25 | F 6/1/15) 0. | 0. | 0. |
| TIM AIKEN 2525 MERIDIAN PARKWAY, STE 240 DURHAM, NC 27713 | CHAIRMAN(UNTIL 1.25 | 5/31/15) | 0. | 0. |
| GERALD M. SCHUETZ, CPA, CGMA 2525 MERIDIAN PARKWAY, STE 240 DURHAM, NC 27713 | TREASURER 40.00 | 247,696. | 15,166. | 22,463. |
| ADRIANA OLLER 2525 MERIDIAN PARKWAY, STE 240 DURHAM, NC 27713 | DEPUTY EXECUTI | | 14,013. | 15,583. |
| TOTALS INCLUDED ON 990-PF, PAGE 6, | PART VIII | 787,172. | 45,088. | 54,555. |

FORM 990-PF

EXPENDITURE RESPONSIBILITY STATEMENT PART VII-B, LINE 5C

STATEMENT

8

GRANTEE'S NAME

SEE STATEMENT 13

GRANTEE'S ADDRESS

GRANT AMOUNT

DATE OF GRANT

AMOUNT EXPENDED

PURPOSE OF GRANT

| | SUMMARY OF DIRECT CHARITABLE ACTIVITIES | STATEMENT | |
|---|---|-----------|-----|
| ACTIVITY TWO | | | |
| THIS PROJECT ON ESSENTIAL COMPO | KEL RISK ASSESSMENT IN TROPICAL REGIONS. NICKEL EXPOSURE RISK AIDS IN ADDRESSING THE NENTS OF RISK ASSESSMENT, INCLUDING PROBLEM FFECTS ASSESSMENT, AND EXPOSURE ASSESSMENT. | | |
| | | EXPENSES | 5 |
| TO FORM 990-PF, | PART IX-A, LINE 2 | 108,5 | 83. |
| FORM 990-PF | SUMMARY OF DIRECT CHARITABLE ACTIVITIES | STATEMENT | 10 |
| ACTIVITY THREE | | | |
| PANEL RELATED P NICKEL PRODUCER | 1: ETAP. THE ENVIRONMENTAL TOXICITY ADVISORY ROJECT HELPS SUPPORT AND PROVIDE GUIDANCE TO S ENVIRONMENTAL RESEARCH ASSOCIATION FOR URE RESEARCH REGARDING ECOTOXICOLOGICAL | EXPENSES | 5 |
| TO FORM 990-PF, | | 92 4 | |
| | PART IX-A, LINE 3 | 02,4 | 10. |
| | PART IX-A, LINE 3 | | 10. |
| FORM 990-PF | PART IX-A, LINE 3 SUMMARY OF DIRECT CHARITABLE ACTIVITIES | STATEMENT | |
| | | | |
| ACTIVITY FOUR 02-240107: EMER THIS PROJECT IS RESEARCH TO REV | | | |
| THIS PROJECT IS RESEARCH TO REV | SUMMARY OF DIRECT CHARITABLE ACTIVITIES GING ISSUES RESEARCH - HUMAN PATCH TESTING. UNDER THE BROAD CATEGORY OF SUPPORTING IEW AND/OR GATHER DATA ON VARIOUS EMERGING | | 11 |

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

12

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

HUDSON BATES NIPERA 2525 MERIDIAN PKW. SUITE 240 DURHAM, NC 27713

TELEPHONE NUMBER

919-595-1946

FORM AND CONTENT OF APPLICATIONS

APPLICANTS SHOULD SUBMIT DETAILS ON THE PROPOSED INVESTIGATION, A PROPOSED BUDGET & ESTIMATED TIME NECESSARY TO COMPLETE THE PROJECT.

ANY SUBMISSION DEADLINES

MOST APPLICATIONS ARE REPLIES TO PROPOSAL REQUESTS MADE BY NIPERA WITH SPECIFIC DEADLINES.

RESTRICTIONS AND LIMITATIONS ON AWARDS

GRANTS ARE AWARDED ONLY ON THE TOXICITY OF NICKEL AND NICKEL COMPOUNDS.

NICKEL PRODUCERS ENVIORNMENTAL RESEARCH ASSOCIATION, INC

ID # 13-3070077 CALENDAR YEAR 2015

PART XV3(A) - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

| Grantee's Name | Š | Tin Or Breef. | Foreign Address Informat | ion | | | | | | | | |
|--|-------------|---|--|---|---|-----------------------|---|----------------------|--------------------------|----------------------|--|--|
| | 31416 | 1 | Frovince | | Grant Date Gi | Grant An Amount Ex | Amount Dates of Expended Reports by Grantee | Verification Date | Diversion by Grantee | Foundation Status | Purpose of Grant | Results of Verification |
| , Toxicology Excellence for Risk Assessment | В | 45211 | | 1 | 11/29/2010 | 30,000 | 1,944 Various | Various | None noted | 2 | Health and Environmental Research | No diversions noted |
| G Oberdorster | , N. | 14618 | e e e e e e e e e e e e e e e e e e e | , | 11/10/2010 | 25,000 | 2,125 Various | Various | None noted | - | Health and Environmental Research | No diversions noted |
| TNO Theme Urbanisation Ni classification management project | | 3508 | | The Netherlands 5/20/2015 | | 247,500 | 11,167 Various | Various | None noted | NC NC | Health and Environmental Research | No diversions noted |
| Epithelix Sarl | | - companies often - doubled macroscope in - | . Sw | Switzerland 5, | 5/12/2015 | 37,400 | 20,103 Various | Various | None noted | NC | Health and Environmental Research | No diversions noted |
| Product Safety Labs | 2 | 08810 | | | 11/18/2014 | 42,680 | 21,340 Various | Various | None noted | NC | Health and Environmental Research | No diversions noted |
| SKS Consulting Services | NC | 27344 | **** | 1 | 11/30/2015 | 30,000 | 12,000 Various | Various | None noted | NC | Health and Environmental Research | No diversions noted |
| Tox Strategies, Inc | ¥ | 77494 | the forest transmission of the second property and the second transmission of the second transmission | 3, | 3/4/2014 | 6,250 | 1 995 Various | Various | None noted | NC |] Health and Environmental Research | No diversions noted |
| Broelution Studies-round robin of alloys | - | | | | *************************************** | | 15,000 Various | Various | None noted | NC | Health and Environmental Research | No diversions noted |
| Gradient | WA | endergrin manager and manager | | /6 | 9/2/2011 | 15,000 | 1,099 Various | Various | None noted | NC | Health and Environmental Research | No diversions noted |
| Toxicology Excellence for Risk Assessment | 동 | 45211 | er er er en | /6 | 9/2/2011 | 36,060 | 10,200 Various | Vanous | None noted | PC | Health and Environmental Research | No diversions noted |
| SKS Consulting Services | S | 27344 | menter me spirit de manuel de constant me service de se | /6 | 9/16/2011 | 20,000 | 1,125 Various | Various | None noted | NC | Health and Environmental Research | No diversions noted |
| SKS Consulting Services | S | 27344 | des des manufactions applications applications and descriptions and descriptions and | 1/ | 1/31/2014 | 10,000 | 3,825 Various | Various | None noted | NC | Health and Environmental Research | No diversions noted |
| Bergeson & Campbell | 26 | 20037 | do un commercial de la casa de managamente de la casa d | 3/ | 3/24/2015 | 30,000 | 22,500 Various | Various | None noted | NC | Health and Environmental Research | No diversions noted |
| Toxmınds BVBA | | B-1200 | Bel | Belgium 11 | 11/15/2013 | 10,000 | 2,011 Various | Various | None noted | NC | Health and Environmental Research | No diversions noted |
| Toxminds BVBA | | B-1200 | Bel | Belgium | ** *** **** **** | | 4,892 Various | Various | None noted | NC | Health and Environmental Research | No diversions noted |
| ECETOC | | 1160 | Bel | Belgium 4/ | 4/9/2015 | 5,601 | 11,238 Various | Vanous | None noted | NC | Health and Environmental Research | No diversions noted |
| Regents of the Univ of MI | W | 48109 | | /6 | 9/18/2013 | 74,640 | 18,660 Various | Various | None noted | P.C | Health and Environmental Research | No diversions noted |
| Wright State University | 용 | | | /L | 7/6/2012 | 64,333 | 14,333 Various | Various | None noted | S. | Health and Environmental Research | No diversions noted |
| Regents of the Univ of MI | Ψ | 48109 | the desired transfer of the same beauty of | / | 7/11/2012 | 135,667 | 13,567 Various | Various | None noted | PC | Health and Environmental Research | No diversions noted |
| Sediment EQS scientific support | | | where theremented and the state of the state | *************************************** | | | 1,394 Various | Various | None noted | NC | Health and Environmental Research | No diversions noted |
| lwca environment limited | | SN7 7YR | Oxfordshire | United Kingdom 3/ | 3/24/2015 | 9.678 | 9.398 Various | Various | Postor acold | 0,1 | | |
| AKCHE | | 9006 | Belg | | | | 13,239 Various | Various | None noted | NC | nealth and Environmental Research Health and Environmental Research | No diversions noted No diversions noted |
| Rapid removal of metals from water columns | ; ; ; | | | | 1 | ! | 626 Various | Various | None noted | NC | Health and Environmental Research | No diversions noted |
| Mutch Associates | ż | | | 11 | 11/30/2015 1 | 10,000 | 4,000 Various | Vanous | None noted | NC | Health and Environmental Research | No diversions noted |
| Wilfrid Laurier University | | N2L 3CS | ON Canada | | 10/20/2014 10 | 100,000 | 50,000 Various | Various | None noted | UN | Health and Environmental Research | No diversions noted |
| Environmental Research Institute of the Supervising Scientist (eriss) | | 0820 | en Territory | Australia 12, | | 56,583 4 | 46,530 Various | Various | None noted | NC | Health and Environmental Research | No diversions noted |
| Ecotox Services Australia Pry Ltd Universiteit Gent (Ghent University) | | 2066 | NSW Aust | Australia 12/ Belgium 11/ | 11/6/2014 | 118,467 | 9,876 Various 4,540 Various | Various | None noted None noted | NO | Health and Environmental Research Health and Environmental Research | No diversions noted No diversions noted |
| | | | | | | | | , | 1 | | | |

| Colorado School of Mines ČO | | 80401 | , | 1 4 | 12/24/2013 | 15,000 | 3,750 Various | Various | None noted | م | Health and Environmental Research | No diversions noted |
|---|----------------|---------|--|--|--------------|---------|--------------------------------|--------------------|-------------|--------|---|---|
| Universitett Gent Kevin J Farely NY | , ¯ i ' '>- | 9000 | : | Belgium | 11/6/2014 | 24,364 | 4,714 Various 2,552 Various | Various Various | None noted | , NI – | Health and Environmental Research Health and Environmental Research | No diversions noted |
| CanmetMINING | ! | KIA 0G1 | , NO | Canada | 9/5/2014 | 49,248 | 18,858 Various | Various | None noted | NC | Health and Environmental Research | No diversions noted |
| EcoTox | 1 | 33145 | | - | 7/13/2015 | 15,000 | 15,000 Various | Various | None noted | NC | J Health and Environmental Research | No diversions noted |
| Hydrobiology Pty Ltd | | | Queensland | Australia | 1 1 | 26,923 | 2,987 Various | Various | None noted | NC | Health and Environmental Research | No diversions noted |
| Jein Stander | | | | | 3/24/2014 | 19,000 | 5,831 Various | Various | None noted | - | Health and Environmental Research | No diversions noted |
| Commonwealth Scientific and Industrial Research Organisation | | 4102 | arp | Australia | 11/29/2014 2 | 224,660 | 63,070 Various | Various | None noted | NC | Health and Environmental Research | No diversions noted |
| | | , | Queensland | Australia | 11/25/2014 | 65,161 | 35,839 Various | Various | None noted | NO. | Health and Environmental Research | No diversions noted |
| University of Hong Kong | | 1. | | designation of the second seco | 12/10/2014 | 15,000 | 856 Vanous | Various | None noted | NC | Health and Environmental Research | No diversions noted |
| VITONV | | 2400 | | Belgium | 1/9/2012 | 15,714 | 3,471 Various | Various | None noted | NC | J Health and Environmental Research | No diversions noted |
| Universiteit Gent (Ghent University) | | 9000 | | Belgium | 11/6/2014 | 17.198 | 3.329 Various | Various | None potent | Ų. | | |
| | | SN7 7YR | Oxfordshire | United Kingdom | 7/18/2013 | 5,376 | 59 Various | Various | None noted | Z Z | Health and Environmental Research | No diversions noted |
| International Lead Zinc Research Org, inc NC | | 27713 | | The second secon | 12/10/2014 | 36,855 | 36,855 Various | Various | None noted | 5 | Health and Environmental Research | No diversions noted |
| International Lead Zinc Research Org, Inc NC | i | 27713 | Aprilla de es especiales en especiales especiales es especiales es especiales establishes especiales especiales establishes especiales e | | 11/23/2015 | 45,512 | 45,555 Various | Various | None noted | PC | Health and Environmental Research | No diversions noted |
| Occupational and Dermatology Research Centre, Skin and Cancer Foundation | | 3053 | Vic | Australia | 5/27/2015 | 82,800 | 41,082 Various | Various | None noted | NC | Health and Environmental Research | No diversions noted |
| , Birmingham Assay Office | _ | B1 3AX | | England | 9/19/2015 | 2,580 | 2,580 Various | Various | None noted | NC | إ Health and Environmental Research | No diversions noted |
| Occupational and Dermatology Research Centre, Skin and Cancer Foundation | | 3053 | Vic | Australia | 12/2/2015 1 | 116,700 | 35,000 Various | Various | None noted | NC | Health and Environmental Research | No diversions noted |
| | | | | | 1 | | 4,448 Various | Various | None noted | L | The things of the state of the | 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - |
| American Chemistry Council, Inc | | 20002 | | | 3/11/2015 | 10,000 | 10,000 Vanous | Various | None noted | 5 | Health and Environmental Research | No diversions noted |
| NC Accept imaging | - | 27617 | | | 12/12/2014 | 8,582 | 7,757 Various | Various | None noted | S S | Health and Environmental Research | No diversions noted |
| | | | | | | 372 | \$788,439 | | | | | |

Purpose of grant

NICKEL PRODUCERS ENVIORNMENTAL RESEARCH ASSOCIATION. INC ID # 13-3010077 CALENDAR YEAR 2015

PART XV3(4) - GRANTS AND CONTRIBUTIONS PAYABLE

| | Contract | | | | | Foreign Address Information | | | Purpose of grant | | |
|---|------------------|---|--------------------|--------------------|---------------|-----------------------------|------------------|------------|--|--------------|------------|
| Grantee | Number | 3 | ě | | 틟 | | | Foundation | | | |
| ellence for | 02-110101-0110 | 2300 Montana Avenue Suite 409 | Circingal | State | 8 | Province | Country | 2 | Title of Study | Relationship | Amount |
| G Oberdorster | 1 | 121 Southern Parkway | T | | 11704 | | | 슬 일 | Vitro and in Vivo Inhal support | None | 15,771 |
| H Clewell/The Hamner Institute | | 8 Days Drive / PO Box 12137 | T | T | 910 | | | 1 | Vitro and in vivo inhalation | None | 6,625 |
| TNO Theme Urbanisation | - | Princetoniaan 8 P.O. Box 80015 | TAllracht | T | 2500 | | | Ť | Mode of Action Ni Studies | None | 2,818 |
| Epithelix Sari | г | 14. Chemin des Aufx. CH-1228 Plan les Oustes | 10000 | 3 | 9 | Ž. | I ne Netherlands | 1 | In vitro uptake and dist studies | None | 116,355 |
| SKS Consulting Services | Г | 3942 Rives Chanel Church Road | Gelieve Glorion | | | Switzerland | rland | | In wtro studies-id of Biomarkers | None | 17.297 |
| Tox Strategies, Inc | 02-120101-0113 | 23501 Cinco Rancho Blvd G285 | State City | 7 | 21,344 | | | 7 | Meta Analysis non linear Dr. Seilkop | None | 18,000 |
| Tox Strategies, Inc | | 23501 Coron Rancho Blvd. G285 | T | | /464 | | 1 | ž | Pub Bioaccessibility Matt-Phase 1 Scoping | None | 312 |
| Gradient | | 20 University Road | | | 7.4 2.4 | | | | Pub Broad Mtl - Phase 2 & 3 | None | 889 |
| J Goodman/Gradient and S Seilkop/SKS Consulting | Т | 3942 Rives Chanel Church Board | | | | | | | Draft Manuscripts | None | 3 000 |
| Services | | | Siler City | 27 | 27344 | _ | | | Review Rpts and Manuscripts | None | 2 625 |
| SKS Consulting Services | 02-210202-0114 | 3942 Rives Chanel Church Road | Ciler Ch. | | 22044 | | | Ī | | | |
| Exponent, Inc | | | T | Ì | 344 | | - | | Dosimetry Calculations - Air | None | 2 350 |
| Bergeson & Campbell | | 2200 Pennsylvania Avenue N.W. State 100th | Ŀ | 1 | /0086 2000 | | | ٦ | Woker unnary nickel modeling analysis | None | 15 660 |
| Assessing Risks of Chemicals | | ARCHE - Staneliple 70 his 104 0000 Gent | _ | Ī | , 2003/ | | 1 | | Updates on Nanomatenal Requiations | None | 7 500 |
| Kent State University | 1 | Controller & Office PO Box 5100 | Ī | | 7 | ovendegem Belgium | _ | 7 | Modeling Spt for Biographility | None | 8.710 |
| Assessing Risks of Chemicals | 02-230102-0413 | ARCHE Standiology 20 bus 104 0000 Cont | Ī | Ī | 44242 0001 | | | | N. Sed Field Valid-Kent State | None | 17 701 |
| Assessing Risks of Chemicals | | APOHE Chospian 70 him to copp of the | Legion C | | Low | Lovendege Belgium | - | | Manne Sediment Bloavail-ARCHE | None | 13013 |
| Kent State University | | Controller's Office Of Base 100 | | | 7 | Lovendege Belgium | | NC | Pub of Adv Res on Nrm Sed | e con | 2007 |
| | | | Xent | 유 <u>4</u> | 44242-0001 | | | _ | Sediment EQS scientific support | None | 25,000 |
| USDA, Agricultural Research Service | 02-230201-0013 | Budget, Travel, and Agreements Branch, EBSC - | Beltsville | MD 20 | 20705 | | - | SOV E | Evaluation of ecological effectiveness of remediation | e GOV | 27 199 |
| ARCHE | 02-230202-0014 | Stapelolen 70. bus 104 | | 8 | | | | ٦ | methods | ? | |
| University of Guelph | Т | 50 Stone Rd Fast | 1 | DODA . | | 1 | _ | ٦ | Use current datasets models other RA purposes | None | 21714 |
| wca environment limited | 1 | Brunel House, Volunteer Way | Gueipn | ĺ | T | _ | - | Ť | Weight of Evidence Analysis | None | 4 888 |
| ARCHE | г | Stapelplen 70 hrs 104 | al aldoor | ก็เล | טאט אין איני | Oxfordshire United | United Kingdom | ٦ | Evidence Analysis-WCA | None | 338 |
| Regents of the University of MI | 1 | Box 223131 | | | 3 | Belgium | E | | Update ERV's | None | 13.378 |
| Mutch Associates | | 360 Darlington Avenue | Т | E | 15251-2131 | | | 8 | Rapid removal of metals from water columns-Umich | None | 59 868 |
| Wilfrd Launer University | 02-230401-0114 | 75 University Avenue West | | Ī | T | - | | 7 | Prelim removal modeling-Mutch | None | 0000 |
| Wilfind Leuner University | 02-230403-0114 | 75 University Avenue West | Waterloo | NZ S | NZL 3C3 | Canada | | 7 | Manne BLM Development | None | 25,000 |
| wca environment limited | _ | Brunel House, Volunteer Way | Ferredon | Ž G | T | _ | | 7 | Manne BLM Development | None | 25,000 |
| Universiteit Gent (Ghent University) | _ | Sint-Pietersnieuwstraat 25 | 1000 | 5 | ξ | Oxfordshire Canada | | ٦ | Refine Boavailability Models | None | 9,100 |
| Universiteit Gent | 02-230703-0114 | Sint-Pietersnieuwstraat 25 | | 0008 | 3 2 | Belgrum | _ | 7 | Evaluate Mechanisms of Muture Toxicity | None | 8.458 |
| Joseph S Meyer | | 414 Anvi Way | , | 0008 | 80404 | Belgium | اء | T | Mult-Metalic BLMev & Eval | None | 8.742 |
| wca environment imited | | Brunel House, Volunteer Way | 5 | | Ť | 0 | | 1 | Multi-metallic ENV data generation-Meyer | None | 15,000 |
| CanmetMINING | | 555 Booth Street | Ottawa | 3 | KAA OCA | - | | 7 | Mult-metallic ENV data generation-met-mix comm w | None | 55,937 |
| Hydrobiology Pty Ltd | | 27/43 Lang Parade | Auchenflower | | T | | | 7 | T/D P Latente Testing - CANMET | None | 20,530 |
| Seannes Autor | | CSIRO Land end Water Lucas Heights Science and | Lucas | SN | NSW 2234 | Australia | 9 9 | 2 - | Tropical RA Hydrobiology Tropical RA Workshop Consultant | None | 1 867 |
| Commonwealth Scientific and Industrial Research | 02-231401 0414 | 41 Booo Road | Heights | | | | | _ | | 2 | 370 |
| Organisation | | | Name of the second | 4 102 | ard zz | Australia | 9 | S S | CSIROTropical Research | None | 111,544 |
| Hydrobiology Pty Ltd | 02-231401-0514 | 02-231401-0514 27/43 Lange Parade | Auchenflower | | Č | | | Ī | | | |
| wer environment limited | 02-231401-0814 | Brunel House, Volunteer Way | | Oxfordshire SN77VD | Ţ | Blish Maisin | | 1 | Hydrobiology Tropical Research | None | 29,292 |
| University of Hong Kong | 02-231401-0714 | Kadoone Biological Sciences Bidg, Pokfulam Road | Т | NO DIMENSION | Τ | Canada | + | 1 | WCA Tropical Research | None | 30.084 |
| AKCHE, wca. Windward Env | | 200 West Mercer Street, Suite 401 | 7 | Washington 08110 | ٥ | Hong Kong | buo | T | Univ of Hong Kong | None | 15,000 |
| Crimershen Gent (Gnent University) | 02-230901-0114 | Sut-Pietersmeuwstraat 25 | Τ | 0000 | | - | 1 | T | Dev Env Risk Assmnt FS-ARCHE | None | 17,122 |
| was anvironment limited | | Brunel House, Volunteer Way | Farnadon | N. C | ٩ | Deformation | | 7 | J WFD Strategy | None | 6,165 |
| wea environment immaed | | Brunel House, Volunteer Way | Fannadon | 300 | Ť | _ | United Kinddom | 7 | Dev Guidance for Implementation of Ni EOS - WCA | None | 3.484 |
| Southern Research Institute | | MSC #215, PO Box 10992, Lockbox #992215 | Ę | Al 35 | + | Oxiorashire Onlied | Onlied Ningdom | 7 | EQS Implementation | None | 23 975 |
| Occupation research institute | | MSC #215, PO Box 10992, Lockbox #992215 | | | 35202-0002 | | 1 | 7 | One-Generation Study | None | 23.300 |
| Occupational and Dermatology Research Center | | 1/80 Drummond Street | Carlton | Š | + | 1 | 1 | ₹ | Acute Peranatal Study | None | 6 580 |
| Occupational and Dermatology Research Center | 02-240107-0415 1 | 1/80 Drummond Street | | , Š | Australia | 110 | + | T | Human PatchTesting | None | 41,718 |
| | | | | | I Charles | | - | 2 | Phase 2 Human patch testing-ODREC | None | 81 700 |
| | | | | | | | | | | - | 00 272 080 |