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#### DLN: 93493135061367

OMB No 1545-0047

# **Return of Organization Exempt From Income Tax**

Department of the

Treasury

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at <u>www IRS gov/foim990</u>

Open to Public Inspection

		ue Servi	<u>'</u>						
			lendar year, or tax year beg  C Name of organization	inning 07-01-2015 , and ending 06-3	0-2016	5	D Emple	over ic	dentification number
_	eck if ap Idress ch		NRDC Action Fund Inc					-	
<u> </u>	ame cha	-	% STEVE BAGINSKI CFO Doing business as				13-3	9/60	62
	ıtıal retu	rn	Doing Dusiness as						
Fı return,	nal 'termina	ted		ox if mail is not delivered to street address) Ro	om/suit	e	E Teleph	ione nu	ımber
Mar.	nended r	eturn	40 WEST 20TH STREET				(212	727	-2700
Ар	plication	pending	City or town, state or province NEW YORK, NY 10011	e, country, and ZIP or foreign postal code			<b>G</b> Gross	receipt	cs \$ 2,887,816
			<b>F</b> Name and address of pr	rıncıpal officer		H(a) ī	s this a group		
			Rhea Suh President	'			ubordinates?		⊤ Yes 🗸
			40 WEST 20TH STREET NEW YORK, NY 10011				No	ınata	_
<b>I</b> Ta	x-exemp	ot status	501(c)(3) <b>√</b> 501(c) ( 4	4 ) <b>◀</b> (insert no )	27		re all subord ncluded?	mate	Yes No
J W	ebsite:	<b>▶</b> ww	w nrdcactionfund org						t (see instructions)
							Group exemp		
<b>K</b> Forr	n of orga	anızatıon	✓ Corporation   Trust   A	Association Other >		L Year	of formation 1	996	M State of legal domicile NY
Pa	rt I	Sum	ımary						
				ssion or most significant activities					
a)	<u>  I n</u>	е икр	action fund's mission is to	build political support in the United St	tates i	or proted	ting the plan	et an	a its people
Š									
EE.				<del>-, , , , , , , , , , , , , , , , , , , </del>			2524 64		
Governance	<b>2</b> C	heck th	nis box ▶ if the organizati	on discontinued its operations or dispo	osed of	more th	ian 25% of it	s net	assets
	3 N	umber	of voting members of the go	verning body (Part VI, line 1a)				3	20
Activities &	4 N	umber	of independent voting memb	ers of the governing body (Part VI, line	e 1b)			4	18
<u> </u>	5 To	otal nui	mber of individuals employed	d ın calendar year 2015 (Part V , lıne 2	(a) .			5	0
Act	6 T	otal nui	mber of volunteers (estimate	e if necessary)				6	0
				om Part VIII, column (C), line 12 .				7a	0
	<b>b</b> Ne	t unrela	ated business taxable incom	ne from Form 990-T, line 34	•			7b	
	8	Contr	ibutions and grants (Dart VI	II, line 1h)			Prior Year 3,874	936	<b>Current Year</b> 2,887,816
Ġ	9		,	II, line 2g)			3,674	0	2,007,010
Rəvenue	10	_	*	Dlumn (A), lines 3, 4, and 7d)				0	0
ç	11			(A), lines 5, 6d, 8c, 9c, 10c, and 11e				0	0
	12		revenue—add lines 8 throug	h 11 (must equal Part VIII, column (A	(), line		3,874	,936	2,887,816
	12	12)	a and a mular amounta naid (	(Part IX, column (A), lines 1–3)					145 500
	13 14		•	Part IX, column (A), lines 1-3 )				000,	145,500
	15		·	ployee benefits (Part IX, column (A), li	· · · · · · · · · · · · · · · · · · ·			,197	
Expenses		5-10	•						1,055,628
9	16a		- '	rt IX, column (A), line 11e)				0	0
ጃ	b		undraising expenses (Part IX, colur						
	17 18		expenses (Part IX, column	1,098,102 2,036 2,013,299 3,238					
	19		•	(must equal Part IX, column (A), line in line 18 from line 12	-		1,861	_	3,238,029
<u>ک ۵</u>			····			Reginn	ing of Current		End of Year
Net Assets or Fund Balances						beginn			
Ass. Bal	20		assets (Part X, line 16) .				3,581	_	2,957,555
<u>و</u> و	21		liabilities (Part X, line 26)	tract line 21 from line 20			516		226,725
	22 († 111		nature Block	Tact line 21 Holli line 20			3,065	,424	2,730,630
Unde my ki	r penal nowled	ties of ge and	perjury, I declare that I hav	e examined this return, including accoid complete Declaration of preparer (ot		_			
		***	k* k				2017-05-15		
Sign	ı	Sign	ature of officer				Date		
Here	e		/E BAGINSKI cfo						
		<u> </u>	e or print name and title	Dronaror's signature	I n-	to		DTIN	1
Dai:	1		Print/Type preparer's name scott thompsett	Preparer's signature scott thompsett	Da	ıe	Check If self-employed	PTIN POO7	i 741490
Paid Pre	ı pareı	,   <sub> </sub>	Firm's name FGRANT THORNTO	ON LLP			Firm's EIN >	1	
	Only	1 1	Firm's address > 757 THIRD AVE 3	RD FLOOR			Phone no (21	2) 599	-0100
	J.111	7	NEW YORK NY	100173013					

	990 (2015)			Page <b>3</b>
Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? ${\bf 9}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	Yes	
4	Section 501(c)(3) organizations.  Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?  If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19?  If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part $I$	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III "	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕲	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a		No
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	<b>11</b> c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 💆	<b>11</b> d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?  If "Yes," complete Schedule D, Part X	<b>11</b> f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	<b>12</b> a		No
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 and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, 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		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		N o
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form	990 (2015)			Page <b>4</b>
Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

**d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

**b** Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

**b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . .

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

31

instructions for applicable filing thresholds, conditions, and exceptions)

24b

24c

24d

25a

25b

26

27

28a

28b

28c

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35b

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Yes

Yes

Yes

Form 990 (2015)

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Νo

Nο

Nο

Par	t V	Statements Regarding Other IRS Filings and Tax Complianc Check if Schedule O contains a response or note to any line in this		N.			
		check if Schedule o contains a response of note to any line in this	rait	<u>v</u>		Yes	No
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	19		103	110
		the number of Forms W-2G included in line 1a Enter -0 - if not applicable	1b	0			
		L ie organization comply with backup withholding rules for reportable payments to	o venc	fors and reportable			
·		g (gambling) winnings to prize winners?		· · · · · ·	1c	Yes	
2a	Enter	the number of employees reported on Form W-3, Transmittal of Wage and					
		tatements, filed for the calendar year ending with or within the year covered	3.	0			
<b>.</b>	•	s return	2a		2b		
D		If the sum of lines 1a and 2a is greater than 250, you may be required to e-file					
3a	Did th	e organization have unrelated business gross income of \$1,000 or more during	g the y	/ear?	3a		No
ь	If "Ye:	s," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanati</i> c	on ın S	Schedule O	3b		
4a	Atany	y time during the calendar year, did the organization have an interest in, or a si	gnatu	re or other authority			
		a financial account in a foreign country (such as a bank account, securities acc	count,	or other financial	4a		N.a
		int)?					No
b		s," enter the name of the foreign country ▶	. a n d 1	Financial Assounts			
	(FBAF		( anu i	Fillancial Accounts			
5a	Was t	· he organization a party to a prohibited tax shelter transaction at any time durir	na the	tax year?	5a		No
		ny taxable party notify the organization that it was or is a party to a prohibited t		ŀ	5b		No
		s," to line 5a or 5b, did the organization file Form 8886-T?			30		
	1, 10	5, to 5 50 of 50, and the organization meronii 0000 1			5c		
6a		the organization have annual gross receipts that are normally greater than \$10 ization solicit any contributions that were not tax deductible as charitable cont			6a	Yes	
b		s," did the organization include with every solicitation an express statement the	nat sud	ch contributions or gifts	6b	Yes	
7	Organ	izations that may receive deductible contributions under section 170(c).					
а		e organization receive a payment in excess of \$75 made partly as a contributi		d partly for goods and	7a		
b		s," did the organization notify the donor of the value of the goods or services p		d?	7b		
c		e organization sell, exchange, or otherwise dispose of tangible personal proper	ty for	which it was required to	_		
d		orm 8282?	 7d		<b>7</b> c		
				-1			
е	Dia tri	le organization receive any funds, directly or indirectly, to pay premiums on a p	erson	ar benefit contract?	7e		
		e organization, during the year, pay premiums, directly or indirectly, on a perso		ŀ	7f		
g	If the requir	organization received a contribution of qualified intellectual property, did the o	rganız	ation file Form 8899 as	<b>7</b> g		
h		organization received a contribution of cars, boats, airplanes, or other vehicles	s, did t	the organization file a			
		1098-C?			7h		
8	Did a	oring organizations maintaining donor advised funds.  donor advised fund maintained by the sponsoring organization have excess built the year?	siness	s holdings at any time	8		
Q2	_	, ne sponsoring organization make any taxable distributions under section 4966.	7	_	9a		
		e sponsoring organization make a distribution to a donor, donor advisor, or rela		erson?	9b		
10		on 501(c)(7) organizations. Enter	P				
а	Initiat	tion fees and capital contributions included on Part VIII, line 12	10a				
b		receipts, included on Form 990, Part VIII, line 12, for public use of club	10b				
	faciliti	nes on <b>501(c)(12) organizations.</b> Enter					
		Income from members or shareholders	11a				
		Income from other sources (Do not net amounts due or paid to other sources					
		st amounts due or received from them)...........	11b				
12a	Section	on <b>4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990	) in lie	u of Form 1041?	<b>12</b> a		
b		s," enter the amount of tax-exempt interest received or accrued during the	12b				
13	year <b>Sectio</b>	on 501(c)(29) qualified nonprofit health insurance issuers.					
а		organization licensed to issue qualified health plans in more than one state? <b>N</b>	<b>lote.</b> S	ee the instructions for			
		onal information the organization must report on Schedule O	ı		13a		
b		the amount of reserves the organization is required to maintain by the states of the organization is licensed to issue qualified health plans	13b				
С		the amount of reserves on hand	13c				
14a	Dıd th	ı e organızatıon receive any payments for indoor tannıng services during the tax	(year	·	14a		No
ь	If"Ye	s," has it filed a Form 720 to report these payments? <i>If "No," provide an explana</i>	ition in	Schedule O	14b		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b describe the circumstances, processes, or changes in Schedule O. See instructions.  Check if Schedule O contains a response or note to any line in this Part VI	Yes	Ν, ∇
	Yes	No
	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  1b 18		
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?	Yes	
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? .		Νo
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5		Νo
6 Did the organization have members or stockholders?	Yes	
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	Yes	
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	Yes	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a The governing body?	Yes	
<b>b</b> Each committee with authority to act on behalf of the governing body?	Yes	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		No
Section B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	∍.)
	Yes	No
10a Did the organization have local chapters, branches, or affiliates?		Νo

8	bid the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	<b>8</b> b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal R	even	ie Cod	e.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	<b>10</b> a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	<b>10</b> b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	<b>12</b> a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>12</b> b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<b>12</b> c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		
b	Other officers or key employees of the organization	<b>15</b> b		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<b>16</b> a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			

#### MD, MA, MN, MS, MO, NH, NJ, NY, NC, ND, OH, OK, $\mathsf{OR}$ , $\mathsf{PA}$ , $\mathsf{RI}$ , $\mathsf{SC}$ , $\mathsf{TN}$ , $\mathsf{UT}$ , $\mathsf{VA}$ , $\mathsf{WA}$ , $\mathsf{WV}$ , $\mathsf{WI}$ Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)

organization's exempt status with respect to such arrangements? . . . . . . . . . . . . . . . . . .

Section C. Disclosure

AL, AK, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, ME,

- (3)s only) available for public inspection. Indicate how you made these available. Check all that apply  $\overline{\checkmark}$  O wn website  $\overline{\ }$  A nother's website  $\overline{\ }$  Upon request  $\overline{\ }$  O ther (explain in Schedule O )
- Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

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

State the name, address, and telephone number of the person who possesses the organization's books and records ▶STEVE BAGINSKI CFO 40 WEST 20TH STREET NEW YORK, NY 10011 (212) 727-2700

16b

Part VII

# Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (B) (C) (D) (F) (A) (E) Name and Title Average Position (do not check Reportable Reportable Estimated hours per more than one box, unless compensation compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization (Worganizations from the (W-2/1099for related 2/1099-MISC) organization and Former Highest compensat employee Individual trustee É organizations MISC) related ũ stitutional below organizations employee 更合 dotted line) Trustee See Additional Data Table

Part VIII Section A Officers Directors Trustees Key Employees and Highest Compensated Employees (continued)

<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	more t	tion ( han d n is	ne b both	oox, an d	heck unless officer stee)	i	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
See Additional Data Table										
1b Sub-Total			<u> </u>			<u> </u>				
c Total from continuation sheet d Total (add lines 1b and 1c)	s to Part VII, S			•		}		0	2,731,099	200,812
2 Total number of individuals (in \$100,000 of reportable compa	cluding but not l	limited t	o the	se I	ıste	d abov	e) wl	no received more th	nan	

- Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual . . . . . 3 Yes For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such 4 Yes
- Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of

services rendered to the organization? If "Yes," complete Schedule J for such person .

compensation from the organization. Report compensation for the calendar year ending	with or within the organization's	s tax year
(A) Name and business address	(B) Description of services	(C) Compensation
WATERFRONT STRATEGIES INC, 3050 K STREET NW SUITE 100 WASHINGTON, DC 20007	lobbying/ADVERTISING	883,607

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization  $\triangleright$  1

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for

Yes

5

No

Νo

Form 99						Page <b>9</b>
Part V	/++	Statement of Revenue	lima in this B			
		Check if Schedule O contains a response or note to any	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s &	1a	Federated campaigns 1a	_			
ons, Gifts, Grants Similar Amounts	ь	Membership dues <b>1b</b> 35,389	<u> </u>			
	c	Fundraising events 1c				
ifts  ar /	d	Related organizations 1d	_			
s, G imi	e	Government grants (contributions) 1e				
tion er S	f	All other contributions, gifts, grants, and similar amounts not included above	,			
tributio Other	g	Noncash contributions included in lines 15,090	_  			
Contributions, and Other Sim		1a-1f \$	- 2,887,816			
ة <del>ن</del>	<u> </u>	Business Code	-			
in.	2a	Dusiness code	-			
£- ₹-	ь					
Ce F	С					
Ser.v	d					
an	e	Allaska				
Program Service Revenue	f	All other program service revenue				
	g 3	Total. Add lines 2a-2f ▶  Investment income (including dividends, interest,	0			
		and other similar amounts)	0			
	4   5	Income from investment of tax-exempt bond proceeds	0			
		(i) Real (ii) Personal				
	6a	Gross rents				
	ь	Less rental	1			
	С	expenses Rental income 0	0			
	d	or (loss)  Net rental income or (loss)	0			
	_	(I) Securities (II) Other				
	7a	Gross amount from sales of assets other than inventory				
	b c	Less cost or other basis and sales expenses Gain or (loss)				
	d	Net gain or (loss)	-  o			
enne	8a	Gross income from fundraising events (not including \$				
Other Revenue		of contributions reported on line 1c) See Part IV, line 18				
Ö	b   с	Less direct expenses b  Net income or (loss) from fundraising events •				
		Gross income from gaming activities See Part IV, line 19				
	Ь	Less direct expenses b	-			
	С	Net income or (loss) from gaming activities	0			
	10a	Gross sales of inventory, less				
		returns and allowances .	-			
	b c	Less cost of goods sold <b>b</b> Net income or (loss) from sales of inventory <b>&gt;</b>	0			
		Miscellaneous Revenue Business Code	_			
	11a					
	b c		+			
	d	All other revenue				
	e	Total. Add lines 11a-11d	0			
	12	Total revenue. See Instructions	2,887,816			

### Part IX Statement of Functional Expenses

Section $501(c)(3)$ and $501(c)(4)$	) organizations must complete al.	I columns All other organizations	must complete column (A

	ot include amounts reported on lines 6b,	(A)	(B) Program service	(C) Management and	<b>(D)</b> Fundraising
7b, 8l	o, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations and				
	domestic governments See Part IV, line 21	145,500	145,500		
2	Grants and other assistance to domestic individuals See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	150,006	134,678	7,050	8,278
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	679,241	600,300	68,924	10,017
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	0	000,300	00,324	10,017
9	Other employee benefits	226,381	200,381	20,954	5,046
10	Payroll taxes		•		·
		0			
11	Fees for services (non-employees)				
а	Management	2,630	480	2,150	
b	Legal	86,339	22,399	63,940	
С	Accounting	0			
d	Lobbying	1,001,012	1,001,012		
е	Professional fundraising services See Part IV, line 17	0			
f	Investment management fees	0			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	586,070	518,011	68,059	
12	Advertising and promotion	7,944	7,944		
13	Office expenses	42,063	16,813	24,752	498
14	Information technology	52,159	52,159		
15	Royalties	0			
16	Occupancy	181,852	160,472	17,231	4,149
17	Travel	47,402	47,402		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	6,824	6,824		
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	4,907		4,907	
23 24	Insurance	0			
	Schedule O )				
a	FILING FEES	12,470		12,470	
b	TEMPORARY/CLERICAL	2,688		2,688	
C	RECRUITING EXPENSES	1,479	1,479		
d	MISCELLANEOUS EXPENSES	1,062		1,062	
e ar	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	3,238,029	2,915,854	294,187	27,988
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

3,076,615

500,000

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0

0

4,907

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0 22

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432,062

516,098

3,065,424

3,065,424

3,581,522

0 29

3,581,522

84,036

14 720

14,720

10a

10b

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**10**c

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	Pairt X Balai	nce Snee
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Savings and temporary cash investments Pledges and grants receivable, net .

Notes and loans receivable, net . .

Prepaid expenses and deferred charges

Investments—publicly traded securities .

Land, buildings, and equipment cost or other basis

Investments—other securities See Part IV, line 11

Investments-program-related See Part IV, line 11

**Total assets.**Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability Complete Part IV of Schedule D .

key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L . . . . . .

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties

and other liabilities not included on lines 17-24)

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Total liabilities. Add lines 17 through 25 .

lines 27 through 29, and lines 33 and 34.

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ▶ 🕡 and complete

Organizations that do not follow SFAS 117 (ASC 958), check here ▶

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Inventories for sale or use .

Complete Part VI of Schedule D

Less accumulated depreciation .

Intangible assets . . . . .

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Accounts receivable, net . .

Schedule L .

II of Schedule L

Grants payable

Deferred revenue .

Tax-exempt bond liabilities

Complete Part X of Schedule D

Unrestricted net assets .

Temporarily restricted net assets

Permanently restricted net assets

complete lines 30 through 34.

Total net assets or fund balances

(A) (B) Beginning of year End of year

Part X	Balance Sheet
	Check if Schedule O contains a response or note
1	Cash-non-interest-bearing

2

3

4

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10a

b

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34

Fund Balances

Net Assets or

Form

Balance Sheet				
Check if Schedule O contains a response or note to any line in this Part X				

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part

Page	

2,868,140

89,415

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35,727

226,725

2,730,830

2,730,830

2,957,555

Form 990 (2015)

2,957,555

190,998

n 990 (2	2015)	Page
art X	Balance Sheet	

Page	

Check if Schedule O contains a response or note to any line in this Part XII . . . . . . . .

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

If the organization changed its method of accounting from a prior year or checked "Other," explain in

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

**b** Were the organization's financial statements audited by an independent accountant?

Other changes in net assets or fund balances (explain in Schedule O) . 10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,

Prior period adjustments .

Part XIII Financial Statements and Reporting

1 Accounting method used to prepare the Form 990

a separate basis, consolidated basis, or both

column (B))

Schedule O

Schedule O

Separate basis

Separate basis

basis, consolidated basis, or both

Yes Nο 3b

Form 990 (2015)

Yes

15,619

2,730,830

No

Νo

Yes

2a

2b

8

9

10

✓ Consolidated basis Both consolidated and separate basis c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c If the organization changed either its oversight process or selection process during the tax year, explain in 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the 3a Single Audit Act and OMB Circular A-133? **b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Cash ✓ Accrual COther

Both consolidated and separate basis

Software ID: Software Version:

EIN: 13-3976062

Name: NRDC Action Fund Inc

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (B) (C) (D) (E) (F) Name and Title Average Position (do not check Reportable Reportable Estimated hours per more than one box, unless compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the for related (W-2/1099-(W-2/1099-Highest employe organization Individual trustee organizations Institutional MISC) MISC) and related director. below organizations employee dotted line) t compenso Trustee i i i i i Wendy Abrams 0 Director 0 0 10 John H Adams Х 0 189,583 77,323 Director 20 0 10 Christopher Arndt Х 0 0 Director 0 0 10 Richard E Ayres Х 0 0 Director 10 1 0 Anne Bartley 0 Director 0 0 10 Patricia Bauman 0 Chair/Director 10 10 Dayna Bochco Х 0 Director (Thru 2/2016) 0 0 10 Sherwood Boehlert 0 Director 0.0 10 Hamilton Candee 0 Х 0 Director 0 0 10 An Emanuel 0 Director (Thru 2/2016) 0 0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors											
<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the	
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations	
Bob Epstein Director	10	×						0	0	0	
Michael Finnegan Director	10	×						0	0	0	
William Haney Director (Thru 2/2016)	10	×						0	0	0	
Barbanna Heyerdahl Director	10	×						0	0	0	
Cindy Hom Director (Thru 2/2016)	1 0	×						0	0	0	
Honorable Hamilton Kean Director (Thru 4/2016)	1 0	×						0	0	0	
Patricia Sullivan Director (Thru 12/2015)	100	×						0	20,000	C	

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Vernice Miller-Travis

Edward James Olmos

Daniel R Tishman

Director

Director

Director

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

50,714

39,448

233,965

567,053

(A) Name and Title	(B) Average hours per week (list any hours for related	unles	ore ti ss pe	than erso icer	not one on is and		,	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the	
	organizations below dotted line)	individual trustee or director	Institutional Trustee		key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations	
Enc Wepsic Director	1 0	х						0	0	o	
Ira Ziering Director	1 0	х						0	0	0	
KATHLEEN WELCH Director	10	x						0	0	0	
JOANN KAPLAN Director	10	x						0	0	C	
Sigmund Anderman Director	1 0	x						0	0	C	
Rhea Suh	1 0	х		×				0	541,142	10,157	

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> 10 10

> 0 0

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Х

President

Mitchell Bernard

COO (as of 11/2015)

Executive Director

MARIPAT ALPUCH

Jennifer Reynoso Assistant Secretary

SECRETARY

Peter Lehner thru 82015

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

(A) (B) (C) (D) (E)

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	m unle:	ore t ss pe	han erso cer	not one n is and trus	tee)		(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Steven Baginski	1 0					۵				
Chief Financial Officer	40 0			×				0	438,404	0
KEVIN CURTIS as of 22016  EXECUTIVE DIRECTOR	40 0			×				0	0	0
Heather Taylor-Miesle	22 0					Х		0	108,794	13,925
LEGISLATIVE ADVOCATE	0 0									·
FRANCES BEINECKE Former President	1 0						x	0	183,372	0
Sarah A Gillman Former Chief Financial Officer	0 0						х	0	189,146	9,245

259,640

0 0

0 0

Judith A Keefer

Former Chief Operating Officer

#### DLN: 93493135061367

Employer identification number

13-3976062

#### SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Name of the organization

Political expenditures

Volunteer hours

NRDC Action Fund Inc

Service

1

2

3

## **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.

▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

2015
Open to Public Inspection

354,730

If the organization answered "Yes" on 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

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

Complete if the organization is exempt under section 501(c)(3).

Section 527 organizations Complete Part I-A only

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

If the organization answered "Yes" on 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

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

• 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" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

_	Enter the amount of any excise	e tax incurred by the organization un	dei section 4955		\$	
2	Enter the amount of any excise	e tax incurred by organization manag	ers under section	n 4955 ►	\$	
3	If the organization incurred a s	ection 4955 tax, did it file Form 472	20 for this year?		☐ Yes	☐ No
4a	Was a correction made?				Yes	□ No
b	If "Yes," describe in Part IV				·	·
Par	t I-C Complete if the or	ganization is exempt under	section 501(	c), except section 50	1(c)(3).	
1	Enter the amount directly expe	ended by the filing organization for se	ection 527 exemp	ot function activities 🕨	\$	354,730
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to ot	her organizations	for section 527	\$	
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b ►	\$	354,730
4	Did the filing organization file <b>F</b>	orm 1120-POL for this year?			Yes	√ No
5	organization made payments if amount of political contribution	nd employer identification number (E For each organization listed, enter th ns received that were promptly and d political action committee (PAC) If	e amount paid fro Irectly delivered	m the filing organization's f to a separate political orga	funds Also ent anızatıon, such	ter the
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount contribution and prom directly deli separate organization enter	s received ptly and vered to a political n If none,
2						
3						
4						
5						
6						
For F	Paperwork Reduction Act Notice, se	ee the instructions for Form 990 or 990	)-EZ.	Cat No 50084S Schedule C (	Form 990 or 99	0-EZ) 2015

Grassroots nontaxable amount (enter 25% of line 1f)

g

ch	nedule C	(Fo	rm 990 or 990-E2) 2015			Page <b>2</b>
P	art II-/	4	Complete if the organization is exempt under section 501(c)(3) and	file	ed Form 5768	(election
			under section 501(h)).			
١.	Check	•	If the filing organization belongs to an affiliated group (and list in Part IV each affiliated expenses, and share of excess lobbying expenditures)	gro	up member's nam	e, address, EIN
3	Check	$\blacktriangleright$	If the filing organization checked box A and "limited control" provisions apply			
			Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lo	obb	ring expenditures to influence public opinion (grass roots			
La	lobbyır	ıg)				
	Total lo	obb	ying expenditures to influence a legislative body (direct lobbying)			

Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns The lobbying nontaxable amount is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 20% of the amount on line 1e Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000

Subtract line 1g from line 1a If zero or less, enter -0-Subtract line 1f from line 1c If zero or less, enter -0-If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

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 separate instructions for lines 2a through 2f.) **Lobbying Expenditures During 4-Year Averaging Period** Calendar year (or fiscal year (a)2012 **(b)**2013 (c)2014 (d)2015 (e) Total beginning in) 2a Lobbying nontaxable amount Lobbying ceiling amount (150% of line 2a, column(e)) Total lobbying expenditures Grassroots nontaxable amount Grassroots ceiling amount (150% of line 2d, column (e)) Grassroots lobbying expenditures

	rt II-B Complete if the organization is exempt under section 501(c)(3) and has I filed Form 5768 (election under section 501(h)).	пот		<u> </u>	age <b>3</b>
		(	a)	(b)	
or e ectiv	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying vity		No	A mou	nt
	,	Yes	<u> </u>		
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?				
b c	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h i	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?  Other activities?				
i	Total Add lines 1c through 1i				
, 2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		•		
b	If "Yes," enter the amount of any tax incurred under section 4912				
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	5 <b>01</b> (c	)(5), o	r sectio	on
			_	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1 Yes	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	Νo
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	Νo
Pai	rt III-B Complete if the organization is exempt under section 501(c)(4), section ! 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."				
1	Dues, assessments and similar amounts from members	1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political				

- expenses for which the section 527(f) tax was paid).
- Current year
- **b** Carryover from last year

- 3
- Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues
- If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess
- does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?
- $\label{tangent} \mbox{$\top$axable amount of lobbying and political expenditures (see instructions)}$

#### **Supplemental Information**

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation
Schedule C, Part I-A, Line 1	The Action Funds political expenditures during this period focused on the 2016 federal elections. The Action Fund produced blogs and social media content highlighting endorsed candidates who were running on pro-environmental positions, as well as calling out those who held anti-environmental positions. The NRDC Action Funds federal connected PAC, NRDC Action Fund Inc. PAC, also contributed to Senate campaigns and hosted fundraisers. \$211,344 of the total political expenditures was spent on staff salaries (including benefits and overhead), while the remaining \$143,386 was spent on discretionary expenses, including consultants and other vendors. The total amount of political expenditures represents 11 percent of the organization's overall expenditures for the year.
	Schedule C (Form 990 or 990E7) 2015

2a

2b 2c

3

5

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SCHEDULE D Cum

(Form 990)

Treasury

Department of the

Internal Revenue Service

## **Supplemental Financial Statements**

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

Information about Schedule D (Form 990) and its instructions is at  $\underline{www.irs.gov/form990}$ .

OMB No 1545-0047

DLN: 93493135061367

2015
Open to Public

Inspection

**Employer identification number** Name of the organization NRDC Action Fund Inc 13-3976062 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶\_ Number of states where property subject to conservation easement is located ▶\_ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the

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

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

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
- (i) Revenue included on Form 990, Part VIII, line 1
- (ii) Assets included in Form 990, Part X

the organization's accounting for conservation easements

- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items
- a Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

(B)(I) and section 170(h)(4)(B)(II)?

- **▶**\$\_\_\_\_\_
- For Paperwork Reduction Act Notice, see the Instructions for Form 990.

☐ No

Pari		Organizations Maintaining (continued)	Collections of A	Art, His	torica	l Treas	ures, or (	Other Si	milar A	ssets
3		the organization's acquisition, accetion items (check all that apply)	ession, and other re	cords, ch	neck any	of the fol	lowing that	are a sıgn	ıfıcant us	e of its
а		Public exhibition		d	Г	oan or ex	change pro	grams		
b	Γ 9	Scholarly research		e	Г	ther				
С	_ F	Preservation for future generations								
4	Provid Part X	de a description of the organization's (III	collections and ex	plain ho	w they fu	irther the	organızatıoı	n's exempl	t purpose	ın
5		g the year, did the organization solic s to be sold to raise funds rather tha							┌ Ye	s No
Par	t IV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.		n Form	990, Pa	art IV, lın	ie 9, or re	ported ar	n amour	nt on Form 990,
1a		organization an agent, trustee, cus led on Form 990 , Part X?	todian or other inte	rmediary	for cont	ributions	or other ass	sets not	<b>Г</b> Ye	s No
b	If"	Yes," explain the arrangement in Pa	art XIII and comple	te the fol	lowing to	able			Am	ount
c	Вед	jinning balance					10	:		_
d	Add	ditions during the year					1d	1		
e	Dıs	tributions during the year					1e	:		
f	End	ling balance					1f			
<b>2</b> a	Did th	ie organization include an amount or	n Form 990, Part X,	line 21,	for escr	ow or cust	odial accou	ınt lıabılıty	<sup>/?</sup>	s No
									·	
ь	If"Ye	s," explain the arrangement in Part								
Pa	rt V	Endowment Funds. Complet								
	Begun	nning of year balance	(a)Current year	<b>(b)</b> Pr	or year	<b>b</b> (c) w	o years back	(d)Three y	ears back	(e)Four years back
b		Tibutions								
c	Net ir losse	nvestment earnings, gains, and s								
d	Grant	s or scholarships								
е		r expenditures for facilities rograms								
f	A dmı	nistrative expenses								
g	End o	f year balance								
2	Provid	de the estimated percentage of the o	urrent year end bal	ance (lir	ne 1g, co	lumn (a))	held as			
а	Board	designated or quasi-endowment <b>&gt;</b>								
b	Perma	anent endowment ▶								
c		orarily restricted endowment ► ercentages on lines 2a, 2b, and 2c s	should equal 100%							
3a	A re th	nere endowment funds not in the pos ization by	·		that are	held and	admınıstere	d for the		Yes No
	(i) un	related organizations							3a	n(i)
	` '	lated organizations							3a	(ii)
b		s" on 3a(II), are the related organiza							3	Bb
4 Date	t VI	tibe in Part XIII the intended uses of Land, Buildings, and Equip		enaowm	ent runa	S				
1461	CAT	Complete if the organization a		Form 9	90, Par	t IV, line	11a.See	Form 990	O, Part X	(, line 10.
		Description of property		(a		other basis stment)	<b>(b)</b> Cost or other t (other)		Accumulate depreciatioi	
1a	Land			[						
b	Buildin	gs		[						
c	Leaseh	old improvements								
d	Equipm	nent								
					(5)		· · · · · · · · · · · · · · · · · · ·	,720	•	720
iota	ı. A da l	ines 1a through 1e (Column (d) mus	с equal FOFM 990, Pa	it X, COlu	mn (B), I	me 10(c) )			. ▶ Schedule	D (Form 990) 2015

Part VII Investments—Other Securities. C See Form 990, Part X, line 12.	omplete if the organ	nization answered 'Ye	es' on Form 990, Part IV, line 11b
(a) Description of security or categor (including name of security)	ry	(b)Book value	(c)Method of valuation Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests			
(3)O ther			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	•		
Part VIII Investments—Program Related.	<u> </u>		
Complete if the organization answere  (a) Description of investment	ed 'Yes' on Form 990 	), Part IV, line 11c. <sub>Se</sub>	ee Form 990, Part X, line 13. (c) Method of valuation
(a) Description of investment		(b) Book value	Cost or end-of-year market value
	-		
<b>Part IX</b> Other Assets. Complete if the organizat	tion answered 'Yes' on	Form 990, Part IV, line	 11d See Form 990, Part X, line 15
	cription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15 )		
Part X Other Liabilities. Complete if the or		d 'Yes' on Form 990,	Part IV, line 11e or 11f.
See Form 990, Part X, line 25.  1. (a) Description of liability	(b) Book value		
Fodous Luciones Assura			
Federal income taxes		0	
DUE TO RELATED PARTIES	35,7	27	
		$\neg$	
		-	
		_	
	<u> </u>	27	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)  2. Liability for uncertain tax positions In Part XIII, prov	▶ 35,7 vide the text of the foot		's financial statements that reports th
organization's liability for uncertain tax positions under XIII $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$			

	Complete if the organ	ization answered 'Yes' on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and othe	r support per audited financial statements	1	
2	A mounts included on line 1 bu	t not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) o	on investments 2a		
b	Donated services and use of fa	acılıtıes 2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII )			
e	Add lines 2a through 2d	<del> </del>	2e	
3	Subtract line ${f 2e}$ from line ${f 1}$ .		3	
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not inclu	uded on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII )	4b		
c	Add lines <b>4a</b> and <b>4b</b>		4c	
5		<b>4c.</b> (This must equal Form 990, Part I, line 12)	5	
Part		openses per Audited Financial Statements With Expense	s per	Return.
1		raudited financial statements	1	T
2	·		<u> </u>	<del> </del>
		t not on Form 990, Part IX, line 25 acilities		
a b		2b	1	
			1	
C			1	
d			-	
e	•		2e	
3		0. Deat IV less 25 hat act on less 4	-3	
4		0, Part IX, line 25, but not on line 1:		
a	•	uded on Form 990, Part VIII, line 7b 4a	-	
b			٠	
с _			4c	
5	lotal expenses Add lines 3 ar	nd <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	<u> </u>
Part	XIII Supplemental Info	ormation		
Prov		Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2		
Part	V , line 4 , Part X , line 2 , Part XI ,	lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to		de any additional
ınfor	mation	T		
	Return Reference	Explanation		
Form 9	90, Schedule D, Part X, Line 2	NRDC Action Fund is included within the consolidated financial statemen		
		resources defense council, inc. The below Fin-48 footnote is reproduced financial statements. NRDC follows guidance that clarifies the accounting		
		positions taken or expected to be taken in a tax return, including issues	relatin	ng to financial
		statement recognition and measurement. This guidance provides that the uncertain tax position can only be recognized in the consolidated financial.		
		is "more-likely-than-not" to be sustained if the position were to be chall		•
		The assessment of the tax position is based solely on the technical mer		
		regard to the likelihood that the tax position may be challenged NRDC h	ias pro	cesses presently in

place to ensure the maintenance of its tax-exempt status, to identify and report unrelated income, determine its filing and tax obligations in jurisdictions for which it has nexus, and to review other matters that may be considered an uncertain tax position. The tax years ended June 30, 2013, 2014, 2015 and 2016 remain open to audit for both federal and state purposes. This standard had no impact on NRDCs 2016 and 2015 consolidated financial statements. NRDC does not believe its 2016 and 2015 consolidated financial statements include any material uncertain tax positions.

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

Schedule D (Form 990) 2015		Page <b>5</b>		
Part XIII Supplemental Information (continued)				
Return Reference	Explanation			

efile GRAPHIC print - DO NOT PROCESS DLN: 93493135061367 As Filed Data -OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) 2015 Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number NRDC Action Fund Inc 13-3976062 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient Part II that received more than \$5,000 Part II can be duplicated if additional space is needed (d) A mount of cash (a) Name and address of **(b)** EIN (c) IRC section (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance or government (book, FMV, assistance appraisal, other) See Additional Data Table Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2015

with periodic status reports about their environmental projects

#### **Additional Data**

organization

Fund

1615 M Street NW Washington, DC 20002

Software ID: Software Version:

ıf applicable

**EIN:** 13-3976062

Name: NRDC Action Fund Inc

grant

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non- (f) Method of valuation (g) Description of

or government			-	assistance	other)	
League of Conservation Voters Inc 1920 L Street NW Suite 800 Washington, DC 20036	52-1733698	501(c)(4)	85,000			ENV ADVOCACY
Partnership Project Action	81-0606786	501(C)(4)	55,500			ENV ADVOCACY

cash

(book, FMV, appraisal,

non-cash assistance

(h) Purpose of grant

or assistance

Schedule J (Form 990)

**Compensation Information** 

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

**Compensated Employees** ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

DLN: 93493135061367 OMB No 1545-0047

2015

epartment of the reasury nternal Revenue Service				) and its instructions is at <u>www.irs.gov/for</u>			o Pul ectio	
	me of the organı DC Action Fund Inc	zation		Employe	er identificatio	on nui	nber	
				13-397	6062			
Pa	rt I Quest	ions Regarding Compensation	n					
							Yes	No
<b>1</b> a				ny of the following to or for a person listed on ide any relevant information regarding these				
	First-clas	ss or charter travel		Housing allowance or residence for persona	ıluse		ļ	ļ
	Travel for	r companions		Payments for business use of personal resi	dence		ļ	ļ
	☐ Tax idem	nification and gross-up payments		Health or social club dues or initiation fees			ļ	ļ
	Discretio	nary spending account	Г	Personal services (e g , maid, chauffeur, ch	ef)		 	
b				on follow a written policy regarding payment o above? If "No," complete Part III to explain		1b		
2				ing or allowing expenses incurred by all irector, regarding the items checked in line 1	a?	2		
3	organization's	CEO/Executive Director Check all th	nat apply	used to establish the compensation of the Do not check any boxes for methods the CEO/Executive Director, but explain in F	art III			
	Compens	ation committee		Written employment contract				
	Independ	lent compensation consultant	Г	Compensation survey or study				
	Form 990	of other organizations	Г	Approval by the board or compensation cor	nmittee			
4	During the yea or a related or		Part VI	I, Section A, line 1a with respect to the filing	organization			
а	Receive a seve	erance payment or change-of-control	paymen	t?		4a	Yes	
b	Participate in,	or receive payment from, a supplemen	ntal non	qualified retirement plan?		4b		Νo
c	Participate in,	or receive payment from, an equity-ba	ased cor	npensation arrangement?		4c		Νo
	If "Yes" to any	of lines 4a-c, list the persons and pro	ovide th	e applicable amounts for each item in Part II	I			
5	For persons lis	), 501(c)(4), and 501(c)(29) organizated on Form 990, Part VII, Section A contingent on the revenues of		ist complete lines 5-9. , did the organization pay or accrue any				
а	The organizati	on?				5a		Νo
b	Any related or	ganization? ne 5a or 5b, describe in Part III				5b		No
6	For persons lis	•	, line 1a	, did the organization pay or accrue any				
а	The organizati	on?				<b>6</b> a		No
b	Any related or					6b		No
	·	ne 6a or 6b, describe in Part III						
7	For persons lis			, did the organization provide any non-fixed in Part III		7		No
В				iccured pursuant to a contract that was tions section 53 4958-4(a)(3)? If "Yes," des	scribe	8		No

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

section 53 4958-6(c)?

Former Chief Operating

12,540

(ii)

Officer

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the

instructions, on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual (A) Name and Title (B) Breakdown of W-2 and/or 1099-MISC compensation (C) Retirement and (E) Total of columns (D) Nontaxable (F) Compensation in other deferred benefits (B)(I)-(D)column(B) reported (11) (111) Base compensation as deferred on prior Other reportable Bonus & incentive (1) compensation compensation compensation Form 990 1 John H AdamsDirector (i) 0 0 0 Ω Ω 189,583 77,323 266,906 Ω 0 0 0 (ii) 2 Sarah A Gillman Ω 0 Ω 0 (i) Ω 0 Former Chief Financial Officer 64,396 124,750 4,630 4,615 198,391 Ω (ii) 3 Mitchell Bernard 0 Ω 0 0 Ω 0 (i) COO (as of 11/2015) 233,965 32,445 284,679 0 18,269 Ω (ii) 4 Peter Lehner thru 82015 0 (i) n 0 Executive Director 211,953 355,100 27,902 11,546 606,501 O (ii) 5 Rhea SuhPresident 0 (i) n 0 0 0 0 446,142 55,000 40,000 0 10,157 551,299 0 (ii) 6 Steven Baginski (i) 0 0 Chief Financial Officer 438,404 0 0 0 0 438,404 0 (ii) 7 FRANCES BEINECKE (i) 0 0 0 0 Former President 86,372 97,000 0 0 0 183,372 0 (ii) 8 Judith A Keefer (i) 0 0 0 n

247,100

0

259.640

Schedule J (Form 990) 2015

Explanation Part I, Line 4A Former Chief Financial Officer, Sarah Gillman, and Former Executive Director, Peter Lehner, received severance payments from the Natural Resources Defense Council in Calendar Year 2015, these amounts are reported in Schedule J, Part II, Column B(III) Part II, Compensation Reporting of Trustee, Mr John H Adams Column B(I) Base Compensation After thirty-five years of committed service as NRDC's Founder and President, John Adams retired on April 1, 2006 John is a part-time consultant for NRDC and received \$189,583 for these services in calendar year 2015 Column D Nontaxable Benefits As part of his retirement agreement, NRDC provides John Adams with medical and dental benefits and a long term care plan. The value of these benefits are Medical \$ 13,706 LTC \$ 63,617 Part II. Compensation Reporting of CFO. Mr Steve Baginski STEVE BAGINSKI, SERVED. AS NRDC'S INTERIM CHIEF FINANCIAL OFFICER FROM APRIL 27TH, 2015 THROUGH DECEMBER 21ST, 2015 DURING THAT TIME, MR BAGINSKI WAS THE EMPLOYEE OF AN EXTERNAL THIRD PARTY EXECUTIVE SEARCH FIRM AND NRDC PAID THAT THIRD PARTY FOR MR BAGINSKI'S SERVICES STEVE BAGINSKI WAS HIRED AS NRDC'S FULL-TIME CHIEF FINANCIAL OFFICER ON DECEMBER 22ND, 2015, AND HE RECEIVED HIS COMPENSATION FROM NRDC FROM THAT DATE On the Form 990, amounts reported in Part VII, Column (e) represent a combination of amounts NRDC paid to the third party executive search firm for Mr. Baginski's services as well as amounts NRDC paid Mr. Baginski directly. Form 990, Part VII & Schedule J, Part I The individuals reported on NRDC Action Fund's Form 990, Sarah Gillman, Mitchell Bernard, Rhea Suh, Peter Lehner and Heather Taylor-Miesle receive their compensation from the parent organization, Natural Resources Defense Council, Inc. (NRDC). Accordingly, all compensation is being reported on NRDC Action Fund's Form 990 as related organization compensation. However, a portion of each officer's compensation is reimbursed by NRDC Action Fund to NRDC based on services rendered to NRDC Action Fund. In the interest of clarity, NRDC Action Fund is disclosing the following salary and benefits amounts as having been reimbursed by NRDC Action Fund to NRDC for these services. Salary Benefits Sarah A Gillman \$1,097 \$307 Peter Lehner \$14,145 \$3,925 Heather Taylor-Miesle \$86,732 \$24,036 Mitchell Bernard \$440 \$121 Rhea Suh \$24,696 \$6,828 NRDC Action Fund reimburses NRDC for the services of other NRDC employees. Those individuals do not meet the criteria of an officer, key

Page 3

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -SCHEDULE O (Form 990 or 990-EZ)

Department of the

Internal Revenue

NRDC Action Fund Inc.

Name of the organization

Treasurv

Service

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.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2015 **Open to Public** Inspection

DLN: 93493135061367

Employer identification number

13-3976062 Return Explanation Reference Form 990, Part Form 990, Part VI, Line 2 Board of Directors Members, Bob Epstein and Patricia Bauman, have a business relationship Board VI - Governing of Directors members Kathleen Welch and Dan Tishman have a business relationship Form 990, Part VI, Line 3 STEVE Body And BAGINSKI, SERVED AS NRDC'S INTERIM CHIEF FINANCIAL OFFICER FROM APRIL 27TH, 2015 THROUGH DECEMBER 21ST, 2015 DURING THAT TIME, MR BAGINSKI WAS THE EMPLOYEE OF AN EXTERNAL THIRD PARTY EXECUTIVE SEARCH FIRM Management AND NRDC PAID THAT THIRD PARTY FOR MR. BAGINSKI'S SERVICES STEVE BAGINSKI WAS HIRED AS NRDC'S FULL-TIME CHIEF FINANCIAL OFFICER ON DECEMBER 22ND, 2015, AND HE RECEIVED HIS COMPENSATION FROM NRDC FROM THAT DATE. On the Form 990, amounts reported in Part VII, Column (e) represent a combination of amounts NRDC paid to the third party executive search firm for Mr Baginski's services as well as amounts NRDC paid Mr Baginski directly Form 990, Part VI, Line 6 NRDC Action Fund's sole institutional member is its parent organization, Natural Resources Defense Council, Inc. ("NRDC") Form 990, Part VI, Line 7a The sole institutional member, NRDC, has the sole authority to appoint NRDC Action Fund's Board of Directors on an annual basis. This power is reserved to NRDC in NRDC Action Fund's organizational documents

Return Reference	Explanation
Policies, Part VI - Governance	990 review process form 990, Part VI, Section B, Line 11 NRDC Action Fund's Form 990 is prepared by a nationally recognized accounting firm in conjunction with the organization's senior management and financial team. Upon completion, the Form 990 is distributed to senior management and THE BOARD OF DIRECTORS' finance and Audit Committee for review and approval. A copy of the final Form 990 is shared with the full board of directors prior to its electronic filing with the Internal Revenue. Service Conflict of interest policy monitoring & Enforcement Form 990, part VI, Section B, LINE 12 Each officer, director, and key employee is required to annually disclose any conflicts of interest that arise by virtue of their relationship to the organization, board service, or position with either NRDC Action Fund or NRDC Action Fund monitors compliance with its conflict of interest policy through an annual questionnaire/disclosure statement that is distributed to these individuals. Potential conflicts are investigated immediately. Process to determine compensation Form 990, Part VI, Section B, LINE 15 NRDC Action Fund does not directly compensate any officers, directors and/or employees. All compensation is paid by the parent organization, Natural Resources Defense Council, and is reimbursed by NRDC Action Fund to NRDC. The processes used for determining compensation as paid by the parent entity are described on that organization's Form 990.

Reference	Explanation
availability of	FORM 990, PART VI, SECTION C, LINE 19 NRDC Action Fund makes its Form 990 available to the public by retaining a copy at its
documents	place of business. The Action Fund also makes the 990 available on the Action Fund wiebsite at www indicactionfund org (and
	on www guidestar org) The organization's financial statements, governing documents and conflict of interest policy are not
	ordinarily made available to the public, but, if requested, will be provided at management's discretion. Other Changes in net
	assets or fund balanaces Form 990, Part XI Reconciliation of Net Assets Net Gain of Action Fund PAC \$15,619

Cymlanatics

D-4....

Return Reference	Explanation
XII, line 2c	THe NRDC Action Fund does not receive standalone financial statements, for audit purposes its operations are consolidated with an affiliated organization, the Natural Resources Defense Council, Inc. Form 990, part XII, line 3a The NRDC Action Fund
	did not receive any federal funding, nevertheless, its activities are included in the audited financial statements of its parent organization, Natural Resources Defense Council, which did undergo an A-133 audit

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION STRATEGIC PLANNING TOTAL FEES 192371

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION MEDIA DESIGN & PRODUCTION TOTAL FEES 145333

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION WEB SERVICES TOTAL FEES 162527

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION WRITING & EDITING TOTAL FEES 9196

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION PUBLIC EDUCATION & ADVOCACY TOTAL FEES 6884

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION CONSULTING TOTAL FEES 68059

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION ART FEES TOTAL FEES 420

Return Reference	Explanation
FORM 990 PART IX LINE 11G	DESCRIPTION PRINTING TOTAL FEES 1280

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## **Related Organizations and Unrelated Partnerships**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

2015

Open to Public

Department of the Treasury Internal Revenue Service

**SCHEDULE R** 

(Form 990)

▶ Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Inspection **Employer identification number** Name of the organization NRDC Action Fund Inc 13-3976062

Identification of Disregarded Entities Complete of the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	<b>(d)</b> Total income	<b>(e)</b> End-of-year ass	ets (	<b>(f)</b> Direct controlling entity		
Part II Identification of Related Tax-Exempt Organi or more related tax-exempt organizations during t	zations Complete if the tax year	ne organization ans	wered "Yes" o	on Form 990,	Part IV,	line 34 because it	had one	e
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code se	ction   Public ch	(e) Parity status Parity 501(c)(3))	(f) Direct controlling entity	Section (13) co	<b>g)</b> n 512(b) ontrolled tity?
(1)NATURAL RESOURCES DEFENSE COUNCIL INC 40 WEST 20TH STREET	ENVIRONMENTAL	NY	501(c)(3)	7		NA	Yes	No No
NEW YORK, NY 10011 13-2654926		1116				Nana		<u> </u>
(2)NRDC Limited 22/F Bank of China Tower HONG KONG HK	Environmental	нк	N/A	N/A		NRDC		No
(3)NRDC Action Fund PAC 40 west 20th street	environmental	NY	527	N/A		NRDC	Yes	
new york, NY 10011 32-0413564							1	<u> </u>
							+	
							+	
				•				

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h Disprop alloca	) rtionate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana parti	ral or aging	<b>(k)</b> Percentage ownership
				] 3117			Yes	No	1	Yes	No	
Part TV Identification of Polated Organizations Tayable a	<u> </u>			<u> </u>								

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

(a) Name, address, and EIN of related organization	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end- of-year assets	<b>(h)</b> Percentage ownership	(I) Section 512 (b)(13) controlled entity?	
								Yes	No

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

Yes No

art V	<b>Transactions With Related Organizations</b>	s Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

<b>1</b> During the tax year, did the orgranization engage in any of the following transactions with one or more	e related organizations lis	sted in Parts II-IV	?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		No
<b>b</b> Gift, grant, or capital contribution to related organization(s)				<b>1</b> b		No
${f c}$ Gift, grant, or capital contribution from related organization(s)				<b>1</b> c		No
f d Loans or loan guarantees to or for related organization(s)				<b>1</b> d		No
f e Loans or loan guarantees by related organization(s)				1e		No
f Dividends from related organization(s)				1f		No
g Sale of assets to related organization(s)				<b>1</b> g		No
h Purchase of assets from related organization(s)				1h		No
i Exchange of assets with related organization(s)				1i		No
j Lease of facilities, equipment, or other assets to related organization(s)				1j		No
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s)				1k		No
Performance of services or membership or fundraising solicitations for related organization(s)				11		No
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s) .				1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n	Yes	
$oldsymbol{o}$ Sharing of paid employees with related organization(s)				10	Yes	
p Reimbursement paid to related organization(s) for expenses				1p	Yes	<del>                                     </del>
<b>q</b> Reimbursement paid by related organization(s) for expenses				<b>1</b> q		No
r Other transfer of cash or property to related organization(s)				1r		No
f s Other transfer of cash or property from related organization(s)				<b>1</b> s	Yes	
2 If the answer to any of the above is "Yes," see the instructions for information on who must comple	ete this line, including co	vered relationships	and transaction threshold	s		
(a) Name of related organization	( <b>b)</b> Transaction type (a-s)	(c) Amount involved	(d) Method of determining a	mount ı	nvolved	d
)NATURAL RESOURCES DEFENSE COUNCIL INC	N, O,	1,351,711	COST			
			•			

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

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

revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships																	
<b>(a)</b> Name, address, and EIN of entity	( <b>b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		(e) Are all partners section 501(c)(3) organizations?		total end-c	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)			(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No					
												1 I					
													<u> </u>				

