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DLN: 93493081000187

OMB No 1545-0047

Department of the Internal Revenue Service 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

Return of Organization Exempt From Income Tax

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

Open to Public Inspection

		15 calendar year, or tax year beginning 10-01-2015 , and ending 09-30-201	5	D Empl		lentification number
	ck if applic	NATIONAL ENVIRONMENTAL EDUCATION AND			-	
	ldress chan ime chang	· •		54-1	5570	43
	ille chang tial return	Doing business as SEE SCHEDULE O				
				E Teleph	one nu	 ımber
	terminated	Number and street (or P O box if mail is not delivered to street address) Room/sui 4301 CONNECTICUT AVENUE NW NO 160	:e			
<u>'</u>	ended retu	ım		(202) 833	-2933
Apı	olication pe	ending City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20008		6.6		+ 4 141 202
				G Gloss	receipt	s \$ 4,141,302
		F Name and address of principal officer DIANE WOOD	H(a) Is th			
		4301 CONNECTICUT AVENUE NW NO 160	subo No	rdinates?	•	☐ Yes 🗸
		WASHINGTON,DC 20008	н(ь) Are а	all subord	linate	s
[Ta:	c-exempt s	status	inclu	ded?		TES NO
ı w	ebsite: ▶	WWW NEEFUSA ORG		o," attacl	h a lıs	t (see instructions)
				ıp exemp		
K Form	n of organı	zation 🗸 Corporation Trust Association Other 🕨	L Year of fo	rmation 1	990	M State of legal domicile VA
Da	rt I	- Cummany				
Pd		Summary ly describe the organization's mission or most significant activities				
		PART III, LINE 1				
e e						
=						
Ē	3 61			250/ 6 /		
Governance	Z Che	ck this box $ ightharpoonup$ if the organization discontinued its operations or disposed c	r more than 2	25% OF IT	s net	assets
	3 Nun	nber of voting members of the governing body (Part VI, line 1a)			3	11
Ž.		nber of independent voting members of the governing body (Part VI, line 1b)		•	4	11
4E		al number of individuals employed in calendar year 2015 (Part V, line 2a) .		•	5	25
Activities &		al number of marviduals employed in calcidar year 2015 (Fart V, line 2a)		•	6	175,000
ď		al unrelated business revenue from Part VIII, column (C), line 12			7a	0
		Inrelated business taxable income from Form 990-T, line 34			7a 7b	- ,
	D Nece	ametated business taxable medine nonitronii 550 1, inte 54	Deic	r Year	75	Current Year
		Contributions and grants (Dart VIII line 1b)	PIIC		000	
<u>Qı</u>		Contributions and grants (Part VIII, line 1h)	3,507	0	4,116,417	
Rəvenue		rogram service revenue (Part VIII, line 2g)	1,020		1,099	
Σ. S.		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)				23,786
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line	. —		,001	23,780
		2)		3,510	,030	4,141,302
	13 G	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	1	764	,995	392,713
	14 B	senefits paid to or for members (Part IX, column (A), line 4)			0	
	15 S	alaries, other compensation, employee benefits (Part IX, column (A), lines		1 6 5 4	966	1 772 276
Expenses	5	-10)		1,654	,866	1,772,378
£	16 a F	Professional fundraising fees (Part IX, column (A), line 11e)			0	
ਨੂੰ	b _T	otal fundraising expenses (Part IX, column (D), line 25) ▶332,148				
_	17 C	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,175	,564	1,355,520
	18 T	otal expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		3,595	,425	3,520,611
	19 R	levenue less expenses Subtract line 18 from line 12		-85	,395	620,691
Net Assets or Fund Balances			Beginning o	of Current	Year	End of Year
a ge				2.042	070	2.624.504
ASS I Ba		otal assets (Part X, line 16)		3,012		3,624,586
<u> </u>		otal liabilities (Part X, line 26)	•	412	_	404,092
		let assets or fund balances Subtract line 21 from line 20		2,599	,803	3,220,494
		Signature Block es of perjury, I declare that I have examined this return, including accompan	vina scheduli	es and st	ateme	ents, and to the hest of
		and belief, it is true, correct, and complete Declaration of preparer (other th				
orepa	rer has a	ny knowledge				
	- Ik	******	٦,	117_02 22		
Sign		Signature of officer		017-03-22 ate		
Jere Jere		DIANE W WOOD DRECIDENT				
`		DIANE W WOOD PRESIDENT Type or print name and title				
	17	Print/Type preparer's name Preparer's signature Da	ate	. – .	PTIN	
Paid	1		Che	eck ıf -employed		
	parer	Firm's name ► GELMAN ROSENBERG & FREEDMAN		n's EIN ► 5		2008
	•	Firm's address ► 4550 MONTGOMERY AVE SUITE 650N	Pho	ne no (30	1) 951	-9090
use	Only	BETHESDA, MD 208142930				

. ✓Yes No

the prior Form 990 or 990-EZ?
If "Yes," describe these new services on Schedule O
Did the organization cease conducting, or make significant changes in how it conducts, any program
services?
If "Yes," describe these changes on Schedule O
Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section $501(c)(3)$ and $501(c)(4)$ organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

OUR SOULS FROM GRAND NATIONAL PARKS TO CITY POCKET PARKS, OUR VALUABLE NATIONAL INHERITANCE OF PUBLIC LANDS CAN OPEN A DOORWAY TO NATURE AND RECREATION WITH GENEROUS SUPPORT FROM TOYOTA MOTOR SALES USA, INC., NEEF'S PUBLIC LANDS EVERY DAY PROGRAM WORKS WITH PARK RANGERS AND OTHER LAND MANAGERS TO ENGAGE AMERICANS IN LEARNING, ENJOYING, AND CARING FOR PUBLIC LANDS NEEF SUPPORTS THE COMMUNITY-BASED FRIENDS GROUPS THAT PROTECT AND MAINTAIN THESE GREEN SPACES BY PROVIDING RESOURCES, SUCH AS WEBINARS, FINANCIAL TRAINING MODULES, AND GRANTS FOR CAPACITY-BUILDING AND EDUCATIONAL EVENTS TO ENGAGE LOCAL COMMUNITIES THE PROGRAM'S ANNUAL SIGNATURE EVENT, NATIONAL PUBLIC LANDS DAY (NPLD), IS THE NATION'S LARGEST SINGLE-DAY VOLUNTEER EFFORT FOR PUBLIC LANDS NPLD BEGAN IN 1994 WITH THREE SITES AND 700 VOLUNTEERS IN 2015, NPLD WAS HELD AT MORE THAN 2,500 SITES ON SEPTEMBER 26, ATTRACTING 200,000 VOLUNTEERS WHO CONTRIBUTED AN ESTIMATED \$18 5 MILLION IN SERVICE NPLD ALSO REPRESENTS A TRUE PUBLIC-PRIVATE PARTNERSHIP WITH COMMITMENTS FROM SEVERAL PRIVATE COMPANIES AND SEVEN FEDERAL AGENCIES (Code 572,788 including grants of \$ 20,814) (Revenue \$ ENVIRONMENT & EDUCATION ENVIRONMENTAL EDUCATION FROM PRE-K THROUGH HIGH SCHOOL AND BEYOND IS RECOGNIZED AS AN IDEAL WAY TO INTEGRATE ACADEMIC DISCIPLINES, STIMULATE THE ACADEMIC AND SOCIAL GROWTH OF YOUNG PEOPLE, AND PROMOTE CONSERVATION OF THE NATURAL ENVIRONMENT

DEVELOPMENT, ESPECIALLY IN THE STEM (SCIENCE, TECHNOLOGY, ENGINEERING, AND MATHEMATICS) CAREERS TO FURTHER ENVIRONMENTAL EDUCATION, NEEF RUNS NATIONAL ENVIRONMENTAL EDUCATION WEEK (EE WEEK), ONE OF OUR SIGNATURE PROGRAMS FOR EDUCATORS AND YOUNG PEOPLE, ANNUALLY AROUND EARTH DAY EE WEEK INSPIRES LEARNING AMONG K-12 STUDENTS, BRINGING YOUNG PEOPLE, THEIR TEACHERS, AND THEIR FAMILIES TOGETHER TO LEARN ABOUT OUR NATURAL ENVIRONMENT THROUGH PROJECTS AND EDUCATIONAL MATERIALS GROUNDED IN SCIENCE AND TIED TO LOCAL, STATE AND FOR TEACHING STEM CONCEPTS AND SKILLS AS IT PROVIDES TEACHERS WITH A DIVERSE RANGE OF REAL-WORLD CHALLENGES

ENVIRONMENTAL EDUCATION HAS DEMONSTRATED THAT IT HELPS BUILD CRITICAL THINKING AND PROBLEM SOLVING SKILLS IT IS KEY TO FUTURE WORKFORCE NATIONAL LEARNING STANDARDS YEAR-ROUND, NEEF'S VIRTUAL GREENING STEM LEARNING CENTER PROMOTES THE ENVIRONMENT AS A COMPELLING CONTEXT (Code) (Expenses \$ 477,819 including grants of \$) (Revenue \$ WEATHER/BEST PRACTICES NEEF'S PUBLIC SURVEY REVEALED THAT EXTREME WEATHER AND CLIMATE ARE THE ENVIRONMENTAL TOPICS THAT GET THE MOST ATTENTION AND ADULTS ARE MOST LIKELY TO HEAR ABOUT NEEF PROVIDES WEEKLY, SCIENCE-BASED ENVIRONMENTAL FACTS AND TIPS IN ENGLISH AND SPANISH TO OUR NETWORK OF MORE THAN 350 METEOROLOGISTS, RADIO BROADCASTERS, AND JOURNALISTS WHO REACH MILLIONS OF HOUSEHOLDS ACROSS THE COUNTRY IN LIGHT OF CURRENT WEATHER TRENDS, NEEF IS ALSO PROVIDING RESOURCES TO HELP THE PUBLIC UNDERSTAND PREPARE FOR THE IMPACTS OF EXTREME WEATHER, INCLUDING "WEATHER-READY" TIPS, WHITE PAPERS, AND UDEMY COURSES FOR ONLINE LEARNING See Additional Data

Other program services (Describe in Schedule O) 694,765 including grants of \$ 4,902) (Revenue \$ (Expenses \$ Total program service expenses ▶ 2,924,479 Form 990 (2015)

Page 2

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	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🥞	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
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		No
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, Pait 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			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
	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
	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	11 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	11 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	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12 a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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? <i>If</i> "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? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
202	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		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		1

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28a

28b

28c

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Form 990 (2015)

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ΙV	Checklist of Required Schedules	(continued)	ī

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?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24 c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L. Part I	25a		No

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

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

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

instructions for applicable filing thresholds, conditions, and exceptions)

year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? 26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

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

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

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

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

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Pait II, III, or IV,

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

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

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

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

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

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

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?

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

member of any of these persons? *If "Yes," complete Schedule L, Part III* Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

Part V Statements Regarding Other IRS Filings and Tax Complian
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Pai	t V	Statements Regarding Other IRS Filings and Tax Complianc Check if Schedule O contains a response or note to any line in this		V			_
		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	26		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 vend	tors and reportable			
·		g (gambling) winnings to prize winners?		· · · · · ·	1 c	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	,	25			
L	•	s return	2a		2b	Yes	
U		If the sum of lines 1a and 2a is greater than 250, you may be required to e-file				103	
3a	Did th	e organization have unrelated business gross income of \$1,000 or more during	g the y	year?	3a		No
b	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 in S	Schedule O	3b		
4a	Atany	y time during the calendar year, did the organization have an interest in, or a si	ıgnatu	re or other authority			
		a financial account in a foreign country (such as a bank account, securities acc	count,	, or other financial	4a		N.o.
L		int)?					No
b		s," enter the name of the foreign country ▶	le a a d	Funancial Assounts			
	(FBAF		Kanu	rillalicial 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			5b		No
		s," to line 5a or 5b, did the organization file Form 8886-T?			30		
•	11 10	3, to line 3d of 3b, and the organization me form 0000 fr	•		5c		
6a		the organization have annual gross receipts that are normally greater than \$10			6a		No
.	_	ization solicit any contributions that were not tax deductible as charitable cont s," did the organization include with every solicitation an express statement th					
U		not tax deductible?		· · · ·	6 b		
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		Νo
h		es provided to the payor?			7b		
		ie organization sell, exchange, or otherwise dispose of tangible personal proper			76		
•		orm 8282?	• •		7 c		No
d	If"Ye	s," indicate the number of Forms 8282 filed during the year \dots .	7d				
e	Dıd th	ie organization receive any funds, directly or indirectly, to pay premiums on a p	erson	al benefit contract?			
					7e		No
		e organization, during the year, pay premiums, directly or indirectly, on a person			7f		No
g	If the requir	organization received a contribution of qualified intellectual property, did the o	rganız 	zation file Form 8899 as	7 g		
h	•	organization received a contribution of cars, boats, airplanes, or other vehicles	s, did i	the organization file a			
		1098-C?			7h		
8	-	oring organizations maintaining donor advised funds. donor advised fund maintained by the sponsoring organization have excess bu	sines	s holdings at any time			
		the year?		· · · · ·	8		
9a	Did th	e 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		-			
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				
	facilit				ı		
		on 501(c)(12) organizations. Enter	11a				
		Income from other sources (Do not net amounts due or paid to other sources	IIG				
_		st amounts due or received from them)	11b				
12a	Section	on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990) in lie	u of Form 1041?	12a		
		s," enter the amount of tax-exempt interest received or accrued during the					
	year		12b				
13	Section	on 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the	organization licensed to issue qualified health plans in more than one state? N	lote. S	See the instructions for			
_		onal information the organization must report on Schedule O			13 a		
b		the amount of reserves the organization is required to maintain by the states chithe organization is licensed to issue qualified health plans	13b				
c		the amount of reserves on hand	13c				
		L le organization receive any payments for indoor tanning services during the tax		7	14a		No
		s," has it filed a Form 720 to report these payments? <i>If "No," provide an explana</i>	•		14b		

orm	990 (2015)					Page
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No describe the circumstances, processes, or changes in Schedule O. 3			or 10	Ob belo	w,
	Check if Schedule O contains a response or note to any line in this Part VI		<u></u>			
Se	ction A. Governing Body and Management				1	
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	11			
	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	11			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?			2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co			3		No
4	Did the organization make any significant changes to its governing documents since filed?	the p	orior Form 990 was	4		No
5	Did the organization become aware during the year of a significant diversion of the o	rganız	ation's assets?	5		No
6	Did the organization have members or stockholders?			6		No
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?		elect or appoint one or	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approve or persons other than the governing body?			7b	Yes	
8	Did the organization contemporaneously document the meetings held or written active year by the following	ons u	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? If "Yes," provide the names and addresses in Schedule			9		No
Se	ction B. Policies (This Section B requests information about policies not	requ.	red by the Internal R	even	ue Cod	e.)
		•	•		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10 a		No

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10h affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing **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 **12**a **b** Were officers, directors, or trustees, and key employees required to disclose annually interests that could give Yes Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe **12**c Yes Did the organization have a written whistleblower policy? . . . 13 Yes 14 Did the organization have a written document retention and destruction policy? Yes Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official . . . **15**a Yes Νo 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 16a Nο **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its

Section C. Disclosure

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

AL,AR,CA,CT,FL,GA,HI,IL,KS,KY,MD,MA,MI,MN,MS,MO,NH,NJ,NM,NY,NC,OR,PA,RI,SC,TN,UT,VA,WV,WI

16b

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

participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

- Own website A nother's website Upon request Other (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
- State the name, address, and telephone number of the person who possesses the organization's books and records
 ►NANCY L SMITH 4301 CONNECTICUT AVENUE NW SUITE WASHINGTON, DC 20008 (202) 261-6467

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

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation 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

compensated employees, and former such persons

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (F) (A) (B) (C) (D) (E) Name and Title Position (do not check Reportable Average Reportable Estimated hours per more than one box, unless compensation compensation amount of person is both an officer week (list from the from related other any hours and a director/trustee) organization organizations compensation (W-2/1099-(W-2/1099for related from the Highest compensated Individual trustee organizations Institutional MISC) MISC) organization 空域 below and related employee dotted line) organizations ੋਂ Trustee (1) CARLOS ALCAZAR Х Х 0 BOARD CHAIR 1 00 (2) DAVID KISER Х Х BOARD TREASURER 1 00 (3) WONYA LUCAS 0 Х BOARD MEMBER 1.00 (4) MEGAN REILLY CAYTEN BOARD MEMBER 1.00 (5) DECKER ANSTROM BOARD MEMBER 1 00 (6) SHANNON SCHUYLER 0 BOARD MEMBER 1 00 (7) JACQUELINE THOMAS X 0 BOARD MEMBER (8) GEORGE BASILE X 0 BOARD MEMBER 1 00 (9) RAUL PEREA-HENZE UNTIL 092916 X BOARD MEMBER 1 00 (10) JENNIFER HARPER TAYLOR 0 Х BOARD MEMBER 1 00 (11) ROBERT GARCIA BOARD MEMBER 1 00 (12) MARTIN PHILBERT BOARD MEMBER 40 00 (13) DIANE WOOD Χ 199,871 38,825 PRESIDENT 40 00 (14) NANCY SMITH Х 122,788 22,017 SR DIRECTOR OF FINANCE & ADMINISTRATION

art VII	Section A. Officers,	Directors, Trustees	, Key Employees,	and Highest Co	mpensated Employees	(continued)

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations	unles c	(do han rso cer cor/t	(C) do not check in one box, ion is both an ir and a r/trustee)			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization	
	below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	мізс)	and related organizations
(15) CAROL WATSON SVP FOR PROGRAMS	40 00					×		148,750	ı	16,275
1b Sub-Total				▶						•
c Total from continuation sheets to Part VII	•			<u>•</u> [
d Total (add lines 1b and 1c)	<u></u>			>			4	71,409	0	77,117

- Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization > 3

- - Did the organization list any former officer, director or trustee, key employee, or highest compensated employee
- on line 1a? If "Yes," complete Schedule J for such individual 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 I for such individual
- Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person . . .
- 3 Νo 4 Yes 5 Νo

Yes

No

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of

(A) Name and business address	(B) Description of services	(C) Compensation

compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

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 ▶ 0

Form 99								Page 9
Part V	* 🛊 🕂	Statement o						_
		Check if Schedu	ule O contains a respon	se or note to any III	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
s	1 a	Federated camp	paigns 1a					
Contributions, Giffs, Grants and Other Similar Amounts	ь	Membership du	es 1b					
	С	Fundraising eve	ents 1 c					
	d	Related organiz	ations 1d					
im:	e	Government grants	s (contributions) 1e	1,906,662				
tion er Si	f	All other contribution	ons, gifts, grants, and 1f of included above	2,209,755				
udi A	g	Noncash contribution	ons included in lines					
Cont and (h	1a-1f \$ Total. Add lines	s 1a-1f		4,116, 4 17			
	· ·	Totall Mad IIII es		Business Code	, ,			
TE e	2a			Busiliess Code				
	ь							
l e l	С							
Program Service Revenue	d							
an (e							
rogr	f		im service revenue					
<u> </u>	g		s 2a-2f					
	3		ome (including dividenc ar amounts)		1,099			1,099
	4		tment of tax-exempt bond p	roceeds >				
	5	Royalties	(ı) Real	(II) Personal				
	6a	Gross rents	(i) Neg.	(ii) i diddia				
	ь	Less rental expenses						
	С	Rental income or (loss)						
	d		me or (loss)					
	7a	Gross amount	(ı) Securities	(II) O ther				
	/ a	from sales of assets other than inventory						
	ь	Less cost or other basis and						
	c	sales expenses Gain or (loss)						
	d		s)					
Other Revenue	8a	Gross income frevents (not incl \$ of contributions See Part IV, lin	luding reported on line 1c)					
her	, h		a penses b					
ō	c		loss) from fundraising e	events >				
	9a	Gross income fi See Part IV, lin	rom gaming activities ee 19 a					
	ь	Less direct exp	penses b					
	С	Net income or (loss) from gaming activ	rities				
	10a	Gross sales of returns and allo						
	b c	Less cost of go	ļ-	ntory ▶				
		Miscellaneous		Business Code	22.75			
	11a	MISCELLANEC	ous	900099	23,786			23,786
	b c							
	d	All other revenu						
	e	Total. Add lines	L	•	23,786			
	12	Total revenue.	See Instructions		4,141,302	0	0	24,885
	ı				7,171,302	Ü		1 24,003

Part IX Statement of Functional Expenses

Section	501(c)(3)) and $501(c)(4)$ o	rganizations must coi	mnlete all columns	All other organizations	must complete column (A)

	▽				
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraısıng expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	392,713	392,713		
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	377,190	148,026	195,004	34,160
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	1,161,451	846,863	182,774	131,814
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	44,437	33,998	5,302	5,137
9	Other employee benefits	80,413	63,109	7,969	9,335
10	Payroll taxes				
		108,887	70,986	26,167	11,734
11	Fees for services (non-employees)				
а	Management				
b	Legal	4,908		4,908	
С	Accounting	46,291		46,291	
d	Lobbying	44,100			44,100
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	668,068	594,548	69,604	3,916
12	Advertising and promotion	1,721	40	1,673	8
13	Office expenses	50,120	20,870	28,647	603
14	Information technology				
15	Royalties				
16	Occupancy	223,357		223,357	
17	Travel	106,586	84,701	18,467	3,418
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	34,693		34,693	
23	Insurance	15,901		15,901	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	ALLOCATION OF G&A	0	636,719	-710,125	73,406
b	LICENSES AND FEES	68,198	13,060	43,194	11,944
c	BAD DEBT EXPENSE	46,200	1,063	44,933	204
d	PUBLICATIONS AND DUES	25,127	16,995	6,885	1,247
e	All other expenses	20,250	788	18,340	1,122
25	Total functional expenses. Add lines 1 through 24e	3,520,611	2,924,479	263,984	332,148
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)			,	,

Form 990 (2015)

69,678

36.527

16,063

3,624,586

188,246

205,584

10,262

404,092

1,756,409

1,464,085

3,220,494

3,624,586

Form 990 (2015)

56,368

63,488

16,063

3,012,070

165,865

196,271

50,131

412,267

1,651,290

2.599.803

3,012,070

948,513

697,261

660,734

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10c

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Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X . . . (A) (B) End of year Beginning of year 1 Cash-non-interest-bearing 1 2 2.467.046 2 2.633,439 Savings and temporary cash investments 408,384 3 868,540 3 Pledges and grants receivable, net . 4 421 4 39 Accounts receivable, net . . 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L . . . 5 6 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 II of Schedule L 6 Notes and loans receivable, net . . 7 7 8 Inventories for sale or use 8

> 10a 10b

Assets

9

10a

b

11

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Net Assets or Fund Balances

Prepaid expenses and deferred charges

Investments—publicly traded securities .

Other assets See Part IV, line 11 . . .

Intangible assets

Accounts payable and accrued expenses

Grants payable

Deferred revenue .

Tax-exempt bond liabilities

Complete Part X of Schedule D

Unrestricted net assets

Complete Part VI of Schedule D

Less accumulated depreciation .

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 .

Secured mortgages and notes payable to unrelated third parties

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

Retained earnings, endowment, accumulated income, or other funds

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

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.

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

complete lines 30 through 34.

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

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

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis

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

basis, consolidated basis, or both

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

Separate basis

Schedule O

Single Audit Act and OMB Circular A-133?

Consolidated basis c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight

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

of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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

Both consolidated and separate basis

Both consolidated and separate basis

2b Yes

Yes

Yes

Yes Form 990 (2015)

Νo

2a

2c

3a

3b

Additional Data

Software ID: Software Version:

EIN: 54-1557043

Name: NATIONAL ENVIRONMENTAL EDUCATION AND

TRAINING FOUNDATION INC

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

(Code) (Expenses \$ 279,788 including grants of \$ 4,902) (Revenue \$) HEALTH AND ENVIRONMENT 60% OF ADULTS KEEP UP WITH NEWS ABOUT HOW THE ENVIRONMENT IMPACTS THEIR HEALTH AND THE HEALTH OF THEIR FAMILIES CHILDREN AND UNDERSERVED POPULATIONS ARE ESPECIALLY VULNERABLE TO THE IMPACT THE ENVIRONMENT CAN HAVE ON HEALTH A HEALTHY ENVIRONMENT-INDOORS AND OUT-CAN PREVENT SERIOUS HEALTH CONDITONS NEEF'S WORK IS DESIGNED TO BUILD A BROAD, INCLUSIVE COALITION OF STAKEHOLDERS TO FOCUS ON ENVIRONMENTAL HEALTH CONCERNS AND BENEFITS NEEF HAS TRAINED TENS OF THOUSANDS OF HEALTH CARE PROFESSIONALS ON ENVIRONMENTAL HEALTH TOPICS, INCLUDING TAKING A PATIENT'S ENVIRONMENTAL HISTORY, THE ENVIRONMENTAL MANAGEMENT OF PEDIATRIC ASTHMA, AND PROMOTING OUTDOOR ACTIVITIES TO HELP PREVENT HEALTH CONDITIONS SUCH AS OBESITY AND DIABETES NEEF'S PROGRAMS FOCUS ON PROVIDING ENVIRONMENTAL EDUCATION RESOURCES TO HEALTHCARE PROVIDERS

(Code) (Expenses \$ 24,377 including grants of \$) (Revenue \$)
VISION 2022 NEEF'S VISION IS THAT BY 2022,300 MILLION AMERICANS ACTIVELY USE ENVIRONMENTAL KNOWLEDGE TO
ENSURE THE WELLBEING OF THE EARTH AND ITS PEOPLE ONCE NEEF COMMITTED TO THIS AMBITIOUS VISION IT WAS
CRITICAL TO ALIGN THE WEBSITE WITH THE ORGANZATION'S NEW DIRECTION NEEF SURVEY RESEARCH INDICATED THE
PUBLIC IS MOST RECEPTIVE TO ENVIRONMENTAL LEARNING IF PROGRAMS ARE CONNECTED TO ISSUES IMPORTANT TO
DAILY LIFE SUCH AS OUR HEALTH AND WELLBEING NEEF CONSOLIDATED FIVE SEPARATE WEBSITES INTO ONE NEEFUSA ORG
WEBSITE ORGANIZED AROUND THEMES THAT BEST CONNECT THE ENVIRONMENT TO DAILY LIFE NATURE, WEATHER +
CLIMATE, AND HEALTH

(Code) (Expenses \$ 390,600 including grants of \$) (Revenue \$)

PUBLIC OUTREACH NEEF RELIES ON NATIONAL EDUCATION CAMPAIGNS TO REACH AND ENGAGE ALL AMERICANS IN ENVIRONMENTAL STEWARDSHIP OUR OUTREACH CAMPAIGNS ARE TAILORED SPECIFICALLY FOR AFFINITY GROUPS THE PUBLIC TRUSTS. SUCH AS THE SPORTS COMMUNITY OR THE FAITH COMMUNITY CAMPAIGNS ARE MODELED ON OUR "TAKE A

PUBLIC TRUSTS, SUCH AS THE SPORTS COMMUNITY OR THE FAITH COMMUNITY CAMPAIGNS ARE MODELED ON OUR "TAKE A SECOND FOR THE ENVIRONMENT" PLATFORM NEEF PROGRAMS ALSO EDUCATE THE PUBLIC THROUGH COLLATERAL MATERIALS SUCH AS INFOGRAPHICS, NEWSLETTERS, ONLINE COURSES, AND NATIONAL REPORTS SUCH AS ENVIRONMENTAL LITERACY IN THE UNITED STATES. AN AGENDA FOR LEADERSHIP IN THE 21ST CENTURY

Employer identification number

54-1557043

SCHEDULE A (Form 990 or 990EZ)

Internal Revenue Service Name of the organization

TRAINING FOUNDATION INC

NATIONAL ENVIRONMENTAL EDUCATION AND

Department of the

Part I

Treasury

1

2

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at Open to Public Inspection

www.irs.gov/form990.

Reason for Public Charity Status (All organizations must complete this part.) See instructions.

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).

A school described in section 170(b)(1)(A)(ii).(Attach Schedule E (Form 990 or 990-EZ))

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section **170(b)(1)(A)(iv).** (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 Seesection 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization Provide the following information about the supported organization(s) (i) (ii)EIN (iii) (iv) (v) (vi) Name of supported organization Type of Is the organization A mount of A mount of other listed in your governing organization monetary support support (see (described on lines document? (see instructions) instructions) 1-9 above (see instructions)) Yes No Total Cat No 11285F For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ.

Schedule A (Form 990 or 990-EZ) 2015 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

S	ection A. Public Support						
	Calendar year	(a)2011	(b) 2012	(c) 2013	(d)2014	(e) 2015	(f) Total
	fiscal year beginning in) ► Gifts, grants, contributions, and membership fees received (Do	5,040,214		3,782,486	3,507,009	4,116,417	19,037,279
2	not include any unusual grants) Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	5,040,214	2,591,153	3,782,486	3,507,009	4,116,417	19,037,279
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the						6,174,017
	amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						12,863,262
S	ection B. Total Support						
/or	Calendar year fiscal year beginning in)	(a) 2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f) Total
7	A mounts from line 4	5,040,214	2,591,153	3,782,486	3,507,009	4,116,417	19,037,279
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,038		790	1,086	1,099	4,013
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	5,770	1,887	8,515	2,001	23,786	41,959
11	Total support. Add lines 7 through 10						19,083,251
12	Gross receipts from related activity	ties, etc (see inst	ructions)			12	
13	First five years.If the Form 990 is				•	, , ,) organization,
	check this box and stop here					<u> ▶ </u>	
	ection C. Computation of Pu						
14	Public support percentage for 201	•	.,	11, column (f))		14	67 410 %
15	Public support percentage for 201	.4 Schedule A , Pa	rt II, line 14			15	71 860 %
16a	33 1/3% support test—2015. If the	e organization did	not check the box	on line 13, and l	ine 14 is 33 1/3%	or more, check t	
b	and stop here. The organization quality 33 1/3% support test—2014. If the				and line 15 is 33	1/3% or more, ch	▶ ✓ eck this
17a	box and stop here. The organization 10%-facts-and-circumstances tes	t—2015. If the orga	anızation did not c	heck a box on lin			▶┌

is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶□

b 10%-facts-and-circumstances test-2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
	Calendar year	(a)2011	(b) 2012	(c)2013	(d)2014	(e)2015	(f) ⊤otal
•	iscal year beginning in)	(4)2011	(5)2012	(6)2010	(4)2011	(0)2010	(1)10ta1
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions,						
-	merchandise sold or services						
	performed, or facilities furnished						
	in any activity that is related to						
	the organization's tax-exempt						
	purpose						
3	Gross receipts from activities						
	that are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
•	furnished by a governmental unit						
	to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified						
	persons						
b	Amounts included on lines 2 and						
	3 received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the amount on line 13 for the year						
_	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
Se	ction B. Total Support				1		I
	Calendar year			1	I	I	
(or f	iscal year beginning in)	(a) 2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
b	Unrelated business taxable						
	income (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
C	Net income from unrelated						
11	business activities not included						
	in line 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years.If the Form 990 is f	or the organization	n's first second	thurd fourth or	fifth tay year ac a	section 501/c	V3) organization
14	•	or the organization	on s mist, second	, tillia, louitii, oi	ilitii tax yeal as a	1 5600001 501(0)(3) organization, ▶ □
	check this box and stop here	lia Cunnant D					
	ction C. Computation of Pub						
15	Public support percentage for 2015	(line 8, column	(f) divided by line	: 13, column (f))		15	
16	Public support percentage from 201	l 4 Schedule A, P	art III, line 15			16	
Se	ction D. Computation of Inv	estment Inco	me Percenta	ae			
17	Investment income percentage for				nn (f))	14-1	
	· · · · · ·	•		•	···· (1 <i>))</i>	17	
18	Investment income percentage from	n 2014 Schedule	A, Part III, line	1 /		18	
19a	33 1/3% support tests—2015. If the	organization did	not check the bo	ox on line 14, and	l line 15 is more t	than 33 1/3%, a	ind line 17 is not
	more than 33 1/3%, check this box	and stop here. T	he organization q	ualıfıes as a publ	icly supported or	ganızatıon	▶┌
b	33 1/3% support tests—2014. If the	organization did	not check a box	on line 14 or line	19a, and line 16	ıs more than 3	3 1/3% and line
	18 is not more than 33 1/3%, check	this box and st	op here. The orga	nızatıon qualıfıes	as a publicly sup	ported organiz	ation 🕨 🗍
20	Private foundation. If the organizati	on did not check	a box on line 14	. 19a. or 19b. ch	eck this box and	see instruction	s ▶⊤ˈ

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and D, and complete Part V.)

	I, complete Sections A and D, and complete Part V)			
Se	ction A. All Supporting Organizations			
	Averally of the community of community of community of community of the community of community o		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section	2		
	509(a)(1) or (2)			<u> </u>
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?	3 c		
4a	If "Yes," explain in Part VI what controls the organization put in place to ensure such use Was any supported organization not organized in the United States ("foreign supported organization")?			l
	If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization?	4b		
	If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations			
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections $501(c)(3)$ and $509(a)(1)$ or (2) ? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported	4c		
	organization was used exclusively for section 170(c)(2)(B) purposes			l
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in	5b		
c	the organization's organizing document? Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	J.		
	anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9 c		
0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	10 b		
1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11 a		
	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11 c		

each of the supported organizations? Provide details in Part VI

b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

Par	t IV Supporting Organizations (continued)			
Se	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		
Se	ection C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
Se	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
	estion F. Tune III Functionally Internated Companies Operations			
	ection E. Type III Functionally-Integrated Supporting Organizations			
1 a b c	The organization is the parent of each of its supported organizations. Complete line 3 below			
2	Activities Test Answer (a) and (b) below.		Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of			

3a

3b

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S			ructions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
	Net short-term capital gain	1		
	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
i	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
,	Other expenses (see instructions)	7		
;	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
	Aggregate fair market value of all non-exempt-use assets (see	1		
_	instructions for short tax year or assets held for part of year)	—		
a L	A verage monthly value of securities	1a 1b		
b	A verage monthly cash balances			
C	Fair market value of other non-exempt-use assets	1c 1d		+
d	Total (add lines 1a, 1b, and 1c) Discount claimed for blockage or other factors	La		
e	(explain in detail in Part VI)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting	organization (see

Part V Type III Non-Functionally Integra	ated 509(a)(3) Suppo	rting Organizations (co	ontinuea)
Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furthe excess of income from activity	ers exempt purposes of supp	ported organizations, in	
3 Administrative expenses paid to accomplish exemp			
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec	quired)		
6 Other distributions (describe in Part VI) See instru	ictions		
· · · · · · · · · · · · · · · · · · ·	20010115		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is r	esponsive (provide	
9 Distributable amount for 2015 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
		T	T
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
<u>c</u>			
d From 2013			
e From 2014			
f Total of lines 3a through e g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 31 and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013			
d From 2014			
e From 2015			
			(F 000 000 F7) /2.01 F

DLN: 93493081000187

Employer identification number

54-1557043

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Name of the organization

TRAINING FOUNDATION INC

1

2

3

NATIONAL ENVIRONMENTAL EDUCATION AND

Political expenditures

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.

OMB No 1545-0047 Open to Public Inspection

Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-区, 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

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
 - 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

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

3	V olunteer hours								
Par	t I-B Complete if the or	ganization is exempt under :	section 501(c)(3).					
1	Enter the amount of any excise	e tax incurred by the organization und	ler section 4955	*	\$				
2	Enter the amount of any excise	e tax incurred by organization manage	ers under section	4955	\$				
3	If the organization incurred a s	section 4955 tax, did it file Form 472	0 for this year?		☐ Yes ☐ No				
4a	Was a correction made?				⊤Yes				
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	ction 527 exempt	function activities 🕨	\$				
2	Enter the amount of the filing o exempt function activities	organization's funds contributed to otl	ner organizations	for section 527 ▶	\$				
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 1120	POL, line 17b ►	\$				
4	Did the filing organization file F	orm 1120-POL for this year?			☐ Yes ☐ No				
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.								
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-				
2									
3									
4									
5									
6									
For F	Paperwork Reduction Act Notice, se	ee the instructions for Form 990 or 990	- EZ. Ca	at No 50084S Schedule C (F	orm 990 or 990-EZ) 2015				

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

Subtract line 1g from line 1a $\,$ If zero or less, enter -0-

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

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

		oying Expenditures neans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
3	Total lobbying expenditures to influence public lobbying)	opinion (grass roots	0	
)	Total lobbying expenditures to influence a legis	slative body (direct lobbying)	44,100	
2	Total lobbying expenditures (add lines 1a and	1b)	44,100	
i	Other exempt purpose expenditures		3,476,511	
2	Total exempt purpose expenditures (add lines	1c and 1d)	3,520,611	
F	Lobbying nontaxable amount Enter the amoun	t from the following table in both columns	326,031	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		

4-Year Averaging Period Under section 501(h)		
If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? — Yes		

Subtract line 1f from line 1c If zero or less, enter -0-	0	

j	if there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? Yes No											
	4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)											
	Lobbying Expenditures During 4-Year Averaging Period											
	Calendar year (or fiscal year beginning in)	(a)2012	(b) 2013	(c) 2014	(d) 2015	(e) Total						
2a	Lobbying nontaxable amount	346,993	337,890	329,771	326,031	1,340,685						
b	Lobbying ceiling amount (150% of line 2a, column(e))					2,011,028						
_с	Total lobbying expenditures	48,600	48,000	48,000	44,100	188,700						

	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 beginning in)	(a)2012	(b) 2013	(c)2014	(d) 2015	(e) Total						
2a	Lobbying nontaxable amount	346,993	337,890	329,771	326,031	1,340,685						
b	Lobbying ceiling amount (150% of line 2a, column(e))					2,011,028						
с	Total lobbying expenditures	48,600	48,000	48,000	44,100	188,700						
d	Grassroots nontaxable amount	86,748	84,473	82,443	81,508	335,172						
e	Grassroots ceiling amount (150% of line 2d, column (e))					502,758						
f	Grassroots lobbying expenditures				ule C (Form 990 o							

81,508

Return Reference

	filed Form 5768 (election under section 501(h)).	,			/ b>
or e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)		(b)
ctiv	ıty	Yes	No	An	nount
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	163			
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c	Media advertisements?				
d	Mailings to members, legislators, or the public?				
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	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total Add lines 1c through 1i				
а	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
ar	t III-A Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6).	01 (c)(5), c	or sec	ction
			_		Yes N
L	Were substantially all (90% or more) dues received nondeductible by members?		_	1	
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	
3					
3	Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."				III-A,
ar	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "				III-A,
ar 1	t III-B Complete if the organization is exempt under section 501(c)(4), section 5 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."	No" C			III-A
ar 1	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." Dues, assessments and similar amounts from members 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	1 2a			III-A
a L 2	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." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	No" C			III-A
ar L a 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." Dues, assessments and similar amounts from members 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 Carryover from last year Total	1 2a 2b 2c			III-A
ar 1 2 a b c	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." Dues, assessments and similar amounts from members 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 Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	1 2a 2b			111-A,
1 2 a	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." Dues, assessments and similar amounts from members 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 Carryover from last year Total 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	2a 2b 2c 3			111-A,
3 Par 1 2 a b c	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." Dues, assessments and similar amounts from members 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 Carryover from last year Total 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	1 2a 2b 2c			III-A,

Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

SCHEDULE D

(Form 990)

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. OMB No 1545-0047

DLN: 93493081000187

Open to Public

Department of the ► Attach to Form 990. Information about Schedule D (Form 990) and its instructions is at $\underline{www.irs.gov/form990}$. Treasury **Inspection** Internal Revenue Service

NAT	IONAL ENVIRONMENTAL EDUCATION AND					Empi	oyer identification number	
	INING FOUNDATION INC	Advisod Francis	01	LI.	Cirraila I		557043	
Рa	rt I Organizations Maintaining Donor Complete if the organization answere					runas c	or Accounts.	
	gamental and an gamental and an arrange	(a) Donor advised fi				(b)	Funds and other accounts	_
1	Total number at end of year	(4) 2 010 1 4 4 1 1 1 1				(-,		_
2	Aggregate value of contributions to (during year)							
3	Aggregate value of grants from (during year)							
4	Aggregate value at end of year							
5	Did the organization inform all donors and donor a funds are the organization's property, subject to t					onor advis	sed Yes N	0
6	Did the organization inform all grantees, donors, a used only for charitable purposes and not for the conferring impermissible private benefit?			_	_		r purpose Yes N	0
Pai	t III Conservation Easements. Comple	ete if the organizati	on ar	ns۱	wered "Yes"	on Forn	n 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by th	e organızatıon (check	all th	nat	apply)			
	Preservation of land for public use (e.g., recre	eation or	_	_				
	education)		_				ically important land area	
	Protection of natural habitat		ı	Pī	eservation of	a cerune	d historic structure	
_	Preservation of open space						6	
2	Complete lines 2a through 2d if the organization leasement on the last day of the tax year	neid a qualified conse	rvatio	on c	contribution in	the form	or a conservation	
	,,,,,,,,,						Held at the End of the Year	_
а	Total number of conservation easements					2a		_
b	Total acreage restricted by conservation easeme	ents				2b		
c	Number of conservation easements on a certified	historic structure inc	luded	l in	(a)	2c		
d	Number of conservation easements included in (chistoric structure listed in the National Register	c) acquired after 8/17	/06, a	and	l not on a	2d		
3	Number of conservation easements modified, tran	nsferred, released, ext	tinguis	she	ed, or termina	ted by the	e organization during the	
	tax year > _							
4	Number of states where property subject to cons	ervation eacement is	locate	ad ·	_			
5	Does the organization have a written policy regard					ndling of		
5	violations, and enforcement of the conservation e	asements it holds?	-			J	☐ Yes ☐ No	
6	Staff and volunteer hours devoted to monitoring, i year	inspecting, handling o	f viola	atio	ons, and enfor	cing cons	servation easements during the	
	A mount of expenses incurred in monitoring, inspe	acting handling of viol	lation	٠.	and enforcing	concerva	ation eacements during the year	
7	► \$	seeing, nanding of viol	iacioni	3,0	and emoreting	Conserva	icion easements during the year	
8	Does each conservation easement reported on lin (B)(I) and section $170(h)(4)(B)(II)$?	ne 2(d) above satisfy	the re	equ	rements of se	ection 17	0(h)(4)	
9	In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the						
Par	t IIII Organizations Maintaining Collection Complete if the organization answere	tions of Art, Hist				, or Oth	ner Similar Assets.	
1a	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the footr	FAS 116 (ASC 958), i assets held for public	not to	re bit	port in its rev ion, education	, or resea	arch in furtherance of public	
b	If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide the following amounts relating to	FAS 116 (ASC 958), t assets held for public	to rep	ort	: ın ıts revenu	e stateme	ent and balance sheet	
(i) Revenue included on Form 990, Part VIII, line 1	L				▶ \$		
(i) Assets included in Form 990, Part X							
2	If the organization received or held works of art, he following amounts required to be reported under S					for financ		
а	Revenue included on Form 990, Part VIII, line 1	· · · · · · · · · · · · · · · · · · ·		Þ			▶ \$	
b	Assets included in Form 990, Part X						▶ \$	

a Using the expansation's occurstion, accession, and other records, check any of the following that are a significant use of its collection terms (check all that apply) a Public exhibition b Scholarly research c Other C P Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII During the year, did the organization solic to receive donations of art, historical triasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part XIII During the year, did the organization solic to receive donations of art, historical triasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization of a part XIII During the year, did the organization an agent, triastice, custodian or other intermediary for contributions or other assets not included on Part XIII and complete the following table Description of Part XIII and complete the following table Distributions during the year Condition of Part XIII Check here if the explaination has been provided in Part XIII Distributions Distributions Cuntributions Part XI Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Cuntributions Part XIII and complete if the organization answered "Yes" to Form 990, Part IV, line 10. Cuntributions Part XIII and complete if the organization that are held and administered for the organization by Grants or scholarships Contributions Part XIII and complete if the organization that are held and administered for the organization by Part XIII and Brant All III and the organization is school and part XIII and the part XIII and the part XIII and the part	ssets	Other Similar As	, or Ot	asures,	cal Tre	listorio	f Art, F	Collections o	ons Maintaining	(continued)	Ti Dilli	Par
Description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII During the year, did the organization's solicit or receive donations of art, historical treasures or other similar assets to be solid to risase funds rather than to be maintained as part of the organization's collection? Ves No Part XV Scrow and Custodial Arrangements. Compete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the following table Beginning balance Distributions during the year Endition balance Distributions during the year Endition balance Distributions during the year Endity Balance Did the organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability? "Yes No If" "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII Check here if the explanation has been provided in Part XIII Check here if the explanation has been provided in Part XIII Check here if the explanation has been provided in Part XIII Check here if the organization answered "Yes" to Form 990, Part IV, line 10. Endowment Funds, Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Contributions Contributions If Administrative expenses End of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as and programs A active expension of year balance Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as and programs A contributions The percentages on lines 2a, 2b, and 2c should equal 100% A are there endowment IV and 3a (a) and 2c should equal 100% A returner endowment Endowment IV and 5a (b) (a) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c	se of its	are a significant use	g that ar	e following	any of the	check a	records,	ession, and other		Ising the organization		3
Scholarly research Schola		grams	je progra	rexchange	Loan o	ı L	(1	Public exhibition	• _	а
Preservation for future generations 4 Provide a description of the organizations collections and explain how they further the organization's exempt purpose in Part XIII 5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?					Other	• _	•		rc h	Scholarly resear	, L	b
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to rease funds rather than to be maintained as part of the organization's collection? Part XVI Excrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21. b If "Yes," explain the arrangement in Part XIII and complete the following table c Beginning balance d Additions during the year le Inding balance Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ▼ves No if "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. B Segmaning of year balance Contributions Net investment earnings, gains, and losses Grants or scholarships C Administrative expenses End of year balance Permanent endowment ► The percentages on lines 2a, 2b, and 2c should equal ±0.0% A Administrative expenses End of year balance Permanent endowment ► The percentages on lines 2a, 2b, and 2c should equal ±0.0% A Contributions Lift less on 3a(li), are the related organizations listed as required on Schedule R? Description of property Control of Part XIII the intended uses of the organization endowment finds Permanent endowment Form 5a(light) and 10 light less organization by (other pagnization on showered "Yes" to Form 990, Part IV, line 10. Control of Part XIII the intended uses of the organization sendowment finds Permanent endowment funds not in the possession of the organization endowment finds Complete if											: -	c
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Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Ves	<u>s No</u>	res	10001011		organiza		cu us pu					Pa
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(a)Current year (b)Pnor year b (c)Two years back (d)Three years back (e)Four year											11 1	
Beginning of year balance	•								runus. Comple	Endowment	art V	Pe
c Net investment earnings, gains, and losses d Grants or scholarships	(-)	(-,	,	, ,	-	, ,	,-	(-,,	ance	Beginning of year bala	B eg	1a
d Grants or scholarships											_	b
e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as a Board designated or quasi-endowment ▶ b Permanent endowment ▶ The percentages on lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations (ii) related organizations b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIII the intended uses of the organization's endowment funds Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10. Description of property Cost or other basis (investment) investment) Accumulated (c)depreciation (d)Boo (c)depreciation (d)Boo (c)depreciation (d)Boo									ngs, gains, and			С
and programs									os	Grants or scholarship	d Gran	d
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Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as Board designated or quasi-endowment ▶ Describe in Part XIII the intended uses of the organization shading and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10. Description of property Cost or other basis (other) Buildings										End of year balance		g
b Permanent endowment ► c Temporarily restricted endowment ► The percentages on lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations			as	(a)) held a	column	(line 1g,	palance	current year end	d percentage of the		Prov	2
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The percentages on lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations									nt 🕨	ermanent endowmen	Pern	b
Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations									d endowment ▶	emporarily restricted	Tem	c
organization by (i) unrelated organizations							%	should equal 100	ines 2a, 2b, and 2c	he percentages on l	The	
(i) unrelated organizations		d for the	ustered	ind admini	re held a	n that a	ganızatıd	ssession of the or	funds not in the pos			3a
(ii) related organizations		3a(_					itions	,	_	
Part VI Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10. Description of property (a) Cost or other basis (other) Cost or other basis (other) b Buildings Buildings Cost or other basis (other)										•	` .	
Land, Buildings, and Equipment. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) Cost or other basis (other) 1a Land B Buildings Description of property Description of p	3b				lule R?	n Sched	equired o	ations listed as re	the related organiz	f "Yes" on 3a(II), are	ıf"Y	b
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10. Description of property (a) Cost or other basis (investment) Cost or other basis (other) 1a Land b Buildings					ınds	vment fu	n's endov				Desc	4
Description of property (a) Cost or other basis (investment) Land	V line 10	Form 990 Part V	Soo Ed	lino 115 (art IV	000 B	to Form				art VI	Pa
1a Land	d (d)Book value	Accumulated	(b) other basi	Cost or o	(a) other basis	Cost or o	to Form	iliswered res		•		
b Buildings				1 (30		(1114-62				ind	Land	1a
c Leasehold improvements	214 17,284	498 244,2:	261,49							-		
d Equipment										•		
e Other	520 19,243	763 416,52	435,76				<u> </u>	<u> </u>				
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))	36,527			(c))), line 10	olumn (B)	Part X, co	t equal Form 990,	1 e (Column (d) mus	Add lines 1a through	tal. A dd	Tot

(a) Description of security or category	gory	(b) Book value	(c)Method of valuation
(Including name of security) (1)Financial derivatives			Cost or end-of-year market valu
(2)Closely-held equity interests			
(3)0 ther			
Fotal. (Column (b) must equal Form 990, Part X, col (B) line 12) •		
Part VIII Investments—Program Related Complete if the organization answe	I. Pred 'Yes' on Form 99	0. Part IV. line 11c.c	Con Form 000 Port V June 13
(a) Description of investment	100 100 011 101111 33	(b) Book value	(c) Method of valuation
			Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 , Part IX Other Assets. Complete if the organize		Form 990. Part IV. line	: 11d See Form 990, Part X, line 15
Part IX Other Assets. Complete if the organiz	/	Form 990, Part IV, line	: 11d See Form 990, Part X, line 15 (b) Book value
Part IX Other Assets. Complete if the organiz	zation answered 'Yes' on	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organiz	zation answered 'Yes' on	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organiz	zation answered 'Yes' on	Form 990, Part IV , line	
Part IX Other Assets. Complete if the organiz	zation answered 'Yes' on	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organiz	zation answered 'Yes' on	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organiz	zation answered 'Yes' on	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organiz	zation answered 'Yes' on	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organiz	zation answered 'Yes' on	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organiz	zation answered 'Yes' on	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organiz	zation answered 'Yes' on	Form 990, Part IV, line	
Part IX Other Assets. Complete if the organize (a) December 1. (a) December 2.	zation answered 'Yes' on escription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In Part X Other Liabilities. Complete if the of See Form 990, Part X, line 25.	zation answered 'Yes' on escription		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In Part X Other Liabilities. Complete if the organization of the See Form 990, Part X, line 25.	zation answered 'Yes' on escription	d 'Yes' on Form 990,	(b) Book value
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Total. (Column (b) must equal Form 990, Part X, col (B) In Part X Other Liabilities. Complete if the office See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	zation answered 'Yes' on escription ine 15) organization answere	d 'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In Part X Other Liabilities. Complete if the office See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	zation answered 'Yes' on escription ine 15) organization answere	d 'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In Part X Other Liabilities. Complete if the office See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	zation answered 'Yes' on escription ine 15) organization answere	d 'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In Part X Other Liabilities. Complete if the office See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	zation answered 'Yes' on escription ine 15) organization answere	d 'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In Part X Other Liabilities. Complete if the office See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	zation answered 'Yes' on escription ine 15) organization answere	d 'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In Part X Other Liabilities. Complete if the office See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	zation answered 'Yes' on escription ine 15) organization answere	d 'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In Part X Other Liabilities. Complete if the office See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	zation answered 'Yes' on escription ine 15) organization answere	d 'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In Part X Other Liabilities. Complete if the office See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	zation answered 'Yes' on escription ine 15) organization answere	d 'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In Part X Other Liabilities. Complete if the office See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	zation answered 'Yes' on escription ine 15) organization answere	d 'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In Part X Other Liabilities. Complete if the See Form 990, Part X, line 25. (a) Description of liability	zation answered 'Yes' on escription ine 15) organization answere	d 'Yes' on Form 990,	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) In Part X Other Liabilities. Complete if the office See Form 990, Part X, line 25. 1. (a) Description of liability Federal income taxes	zation answered 'Yes' on escription ine 15) organization answere	d 'Yes' on Form 990,	(b) Book value

Schedule D (Form 990) 2015

1

2

а

b

4,188,317

2c 2d d Add lines 2a through 2d . . . 2e 47,015 3 Subtract line 2e from line 1 . 4,141,302 3 Amounts included on Form 990, Part VIII, line 12, but not on line 1

2a

2b

47,015

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments

Investment expenses not included on Form 990, Part VIII, line 7b . 4a 4b Other (Describe in Part XIII) Add lines **4a** and **4b** 4c Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12) 4,141,302 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 3,567,626 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 а Donated services and use of facilities 2a 47,015 Prior year adjustments 2b 2c

d Other (Describe in Part XIII) 2d Add lines 2a through 2d . 47,015 2e 3 3,520,611 3 Subtract line 2e from line 1 . Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b. b Other (Describe in Part XIII) 4b

Add lines 4a and 4b . 4c Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 3,520,611 Supplemental Information Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Part XIII

PART X, LINE 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 provide any additional

information

Return Reference Explanation

UNCERTAINTY IN INCOME TAXES AND HAS DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS Schedule D (Form 990) 2015

FOR THE YEAR ENDED SEPTEMBER 30, 2016, NEEF HAS DOCUMENTED ITS CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR REPORTING

Schedule D (Form 990) 2015		Page 5
Part XIII Supplemental Information	on (continued)	
Return Reference	Explanation	

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493081000187 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 NATIONAL ENVIRONMENTAL EDUCATION AND 54-1557043 TRAINING FOUNDATION INC **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 (a) Name and address of (c) IRC section (d) A mount of cash **(b)** EIN (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 21

(a)Type of grant or as	sistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistanc
rt IV Suppleme	ntal Inform	_l ation. Provide the inf	<u> </u>	Part I, line 2, Part III,	column (b), and any other a	additional information.
ırn Reference	Explana	ition				

Part IV Supplemen	ital Information. Provide the	information required in F	Part I, line 2, Part III,	column (b), and any other	additional information.		
Return Reference	Explanation						
PART I, LINE 2 EACH GRANT GOES THROUGH A CENTRALIZED PROCESS WITH EACH APPLICATION BEING CREATED WITH THE SAME TEMPLATE PARTICULAR ATTENTION IS PAID TO ELIGIBILITY REQUIREMENTS AND THE CRITERIA FOR GRANT SELECTION THE FACTORS THE FOUNDATION USES TO SCORE APPLICANTS INCLUDE THE PURPOSE AND RESTRICTIONS OF THE GRANTS, THE EXPECTED OUTCOMES AND TIMELINE, SUBMISSION INFORMATION, APPLICATION, AND ANY REQUIRED DOCUMENTS, SUCH AS AN AUDIT OR AN IRS DETERMINATION LETTER APPLICATIONS ARE CHECKED IN AGAINST THE ELIGIBILITY REQUIREMENTS AND REQUESTED DOCUMENTS COMPLETE APPLICATIONS ARE USUALLY SCORED BY EXTERNAL JUDGES SCORES PROVIDE THE FOUNDATION WITH A LIST OF FINALIST TO CONSIDER GRANTS ARE AWARDED BASED ON SCORES AND THE GOALS OF THE GRANT GRANTEES ARE SENT AN AWARD LETTER WIT A GRANT AGREEMENT TO BE SIGNED ALL GRANTEES ARE REQUIRED TO SUBMIT A FINAL REPORT (INCLUDING FINANCIALS) DEPENDING							

ALL REQUIRED REPORTS ARE SUBMITTED, A CLOSING LETTER IS SENT

ON THE GRANT, THEY MAY ALSO BE REQUIRED TO SUBMIT AN INTERIM REPORT AND/OR EVALUATION ONCE A GRANT IS COMPLETE AND

Additional Data

USAG REDSTONE ARSENAL

4488 MARTIN ROAD IMRE-

REDSTONE ARSENAL, AL

PWE-N

35898

13-6298310

Software ID: Software Version:

GOVERNMENT

EIN: 54-1557043

Name: NATIONAL ENVIRONMENTAL EDUCATION AND

TRAINING FOUNDATION INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CANYON DE CHELLY NATIONAL MONUMENT PO BOX 588 VISITOR CENTER 3 MILES E OF HWY 191 CHINLE,AZ 86503		GOVERNMENT	19,352				21ST CENTURY CCLC CONFERENCE TRAVEL/HOL CITIZEN SCIENCE			
COUNCIL SCHOOL DISTRICT PO BOX 68 COUNCIL,ID 83612		GOVERNMENT	5,400				HOL MINI-GRANT (PAYETTE NATIONAL FOREST AND BLM COTTONWOOD FIELD OFFICE)			

5,756

DOD LEGACY AWARD

organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) DISCO SE TONGASS 92-0128339 501(C)(3) 8,500 HOL GRANT & EVERY NATIONAL FOREST DAY CAPACITY

(e) A mount of non- (f) Method of valuation

(g) Description of

(h) Purpose of grant

21ST CENTURY CCLC

CONFERENCE

TRAVEL/ HOL

CITIZEN SCIENCE

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

501(C)(3)

(d) A mount of cash

(c) IRC section

(a) Name and address of

FRIENDS OF SAGUARO

2700 NORTH KINNEY ROAD

NATIONAL PARK

TUSCON, AZ 85743

(b) EIN

86-0842503

PO BOX 21867 _JUNEAU,AK 99802					BUILDING GRANT
GREAT SMOKY MOUNT NATPARK PO BOX 130 GATLINBURG,TN 37738	62-0576032	501(C)(3)	18,000		21ST CENTURY CCLC CONFERENCE TRAVEL/ HOL CITIZEN SCIENCE

19,979

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (h) Purpose of grant (g) Description of organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) GRAND TETON NAT PARK 83-0322668 501(C)(3) 10.000 PURA VIDA AWARD FOUN PO BOX 249

TRAVEL/HOL

CITIZEN SCIENCE

MOOSE,WY 83012					
GREEN FIELD NURSEY INC PO BOX 61 KANEOHE,HI 96744	20-3720876	OTHER	5,151		DOD LEGACY AWARD (BELLOWS AFS)
KNIFE RIVER HERITAGE FOUNDATION	36-3391446	501(C)(3)	10,000		21ST CENTURY CCLC CONFERENCE

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

4121 78TH ST AVE NE

BISMARK, ND 58503

(e) Amount of non- (f) Method of valuation (a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or government assistance other) KNIFE RIVER INDIAN GOVERNMENT 12,000 21ST CENTURY CCLC VILLAGES CONFERENCE PO BOX 9 TRAVEL/HOL STANTON, ND 58571 CITIZEN SCIENCE 81-0496791 GOVERNMENT 6.500 MALMSTROM AIR FORCE DOD LEGACY AWARD

BASE 341 CES/CEIEA 39 78TH STREET N MALSTROM AFB, MT 594027536	01 0130731	33 VERMITERY	0,500		DOU LEGICET NUMBER
MEDICAL UNI OF SOUTH CAROLINA 19 HAGOOD AVE STE 805	57-6000722	OTHER	6,808		ASTHMA INITIATIVE FOR JAMES ROBERTS

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

MSC 804

CHARLESTON, SC 294258040

organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) 501(C)(3) 6,360 NATIONAL AOUARIUM 52-1121163 DOD LEGACY 2015 -501 EAST PRATT ST NASO DAM NECK BALTIMORE, MD 21202 LANNEX INI-GRANT

(e) A mount of non- (f) Method of valuation

(h) Purpose of grant

(a) Description of

NATIONAL MARINE	94-3370994	501(C)(3)	7,500		HOL MINI-GRANT
	94-33/0994	301(0)(3)	7,300		
SANCTUARY FOUN					(MONITOR NATIONAL
8601 GEORGIA AVE 510					MARINE SANCTUARY
SILVER SPRING, MD 20910					AND OLYMPIC COAST
					NATIONAL MARINE

(d) A mount of cash

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

(c) IRC section

IE SANCTUARY LYMPIC COAST NALMARINE SANCTUARY) OLYMPIC NATIONAL PARK GOVERNMENT 13,000 HOLCITIZEN SCIENCE PROJECT

600 E PARK AVE

PORT ANGELES, WA 98362

(a) Name and address of

(b) EIN

(a) Name and address of (b) EIN (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (c) IRC section (d) A mount of cash organization if applicable cash (book, FMV, appraisal, non-cash assistance or assistance grant or aovernment assistance other) NORTH CASCADES 91-1327775 GOVERNMENT 12,000 HOL CITIZEN NATIONAL PARK SCIENCE PROJECT 810 STATE ROUTE 20 SEDRO-WOOLLEY WA 98284 WOOLEY, WA 95362 NWTF - TURKEYVILLE TOMS 57-0564993 DOD LEGACY AWARD

501(C)(3) 6,500 11250 LYNCH RD FT CUSTER

BATTLE CREEK, MI 49014 TRAINING CENTER GOVERNMENT 6,500 2016 DOD LEGACY OREGON MILITARY

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

DEPARTMENT

AWARD FOR OR ARMY PO BOX 14350 ATT AGE NG, BIAK TRAINING SALEM, OR 973016888 CTR

(a) Name and address of **(b)** EIN (d) A mount of cash (e) Amount of non- (f) Method of valuation (h) Purpose of grant (c) IRC section (g) Description of organization ıf applıcable cash (book, FMV, appraisal, non-cash assistance or assistance grant or government assistance other) 501(C)(3) 18,186 121ST CENTURY CCLC RIO GRANDE EDU 85-0471881 CONFERENCE COLLABORATIVE 6260 DIVERSIDE DI A 7A TRAVEL/HOL N SCIENCE

LANE NW STE A ALBUQUERQUE, NM 87120					CITIZEN
TALON SCIENTIFIC	20-2467708	OTHER	6,500		DOD LEG

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

OLYMPIA, WA 98516

MCCHORD

GACY 2015-N MILITARY ALEXANDRIA, VA 22310 DEPT

TANGLEWILDE LUMBER INC. 91-1276883 OTHER 5,499 DOD LEGACY 2016-7127 MARTIN WAY E DOINT BASE LEWIS-

(a) Name and address of **(b)** EIN (c) IRC section (d) A mount of cash (e) Amount of non- (f) Method of valuation (h) Purpose of grant (g) Description of organization if applicable cash (book, FMV, appraisal, non-cash assistance orassistance grant or government assistance other) 5.885 TEXAS MILITARY 74-6000053 GOVERNMENT DOD LEGACY AWARD DEPARTMENT 2200 W 35TH ST BLDG 1 AUSTIN.TX 78703 THREE RIVERS RC&D 59-2989537 501(C)(3) 7,388 DOD LEGACY AWARD-5230 WILLING ST EGLIN AFB MILTON, FL 32570

6,000

DOD LEGACY AWARD

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

GOVERNMENT

US TREASURY - YUMA

YUMA, AZ 85369

STREET

324 MCAS YUMA SMITH

(a) Name and address of (d) A mount of cash (e) A mount of non- (f) Method of valuation (h) Purpose of grant (b) EIN (c) IRC section (a) Description of organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance or aovernment assistance other) 6.250 WA MILITARY DEPT CAMP GOVERNMENT DOD LEGACY AWARD

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

MURRAY

36 QUARTERMASTER ROAD CAMP MURRAY, WA 98430

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Schedule J (Form 990)

Department of the

Treasury

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.

▶ Attach to Form 990.

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

DLN: 93493081000187 OMB No 1545-0047

2015

Open to Public Inspection

Na	ne of the organization IONAL ENVIRONMENTAL EDUCATION AND			Employer identificati	on nur	nber	
	INING FOUNDATION INC			54-1557043			
Pa	rt I Questions Regarding Compensation						
						Yes	No
1 a	Check the appropriate box(es) if the organization provid 990, Part VII, Section A, line 1a Complete Part III to						
	First-class or charter travel		Housing allowance or residence for	personal use			
	Travel for companions		Payments for business use of person	onal residence			
	Tax idemnification and gross-up payments		Health or social club dues or initial	ion fees			
	Discretionary spending account	Г	Personal services (e g , maid, chau	ffeur, chef)			
b	If any of the boxes in line 1a are checked, did the orgal reimbursement or provision of all of the expenses desc				1b		
2	Did the organization require substantiation prior to rein directors, trustees, officers, including the CEO/Execut				2		
3	Indicate which, if any, of the following the filing organization's CEO/Executive Director Check all that used by a related organization to establish compensati	apply	Do not check any boxes for method	ds			
	Compensation committee	Г	Written employment contract				
	Independent compensation consultant	~	Compensation survey or study		ĺ	İ	
	Form 990 of other organizations	√	Approval by the board or compensa	ation committee	İ		
4	During the year, did any person listed on Form 990, Pa or a related organization	rt VII	, Section A , line 1a with respect to 1	the filing organization			
а	Receive a severance payment or change-of-control pay	yment	7		4a		Νo
b	Participate in, or receive payment from, a supplementa	al nonq	qualified retirement plan?		4b		Νo
c	Participate in, or receive payment from, an equity-base	ed con	npensation arrangement?		4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provi	ide the	e applicable amounts for each item i	n Part III			
5	Only 501(c)(3), 501(c)(4), and 501(c)(29) organization For persons listed on Form 990, Part VII, Section A, li compensation contingent on the revenues of		•	any			
а	The organization?				5a		Νo
b	Any related organization?				5b		Νo
	If "Yes," on line 5a or 5b, describe in Part III						
6	For persons listed on Form 990, Part VII, Section A, li compensation contingent on the net earnings of	ne 1a	, did the organization pay or accrue	any			
а	The organization?				6 a		Νo
b	Any related organization?				6b		No
	If "Yes," on line 6a or 6b, describe in Part III						
7	For persons listed on Form 990, Part VII, Section A, li payments not described in lines 5 and 6? If "Yes," des			n-fixed	7	Yes	
8	Were any amounts reported on Form 990, Part VII, par subject to the initial contract exception described in Re in Part III				8		No
9	If "Yes" on line 8, did the organization also follow the resection 53 $4958-6(c)$?	ebutta	ible presumption procedure describe	ed in Regulations	9		
For F	aperwork Reduction Act Notice, see the Instructions fo	r Forn	n 990. Cat No 5	50053T Schedule	J (For	m 990	2015

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and		(E) Total of columns		
		Base (1) compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990	
1 DIANE WOODPRESIDENT	(i)	190,571	9,300	0	11,362	27,463	238,696	0	
	(ii)	0	0	0	0	0	0	0	

Schedule 7 (Form 990) 2015	Page 3						
Part III Supplemental Information							
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information							
Return Reference	Explanation						

Schedule J (Form 990) 2015

DIANE WOOD RECEIVED A BONUS OF \$9,300

Cabadula 1 (Form 000) 201 F

PART I, LINE 7

SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	Complet Fo	emental Information to Form 990 or 990 are to provide information for responses to specific question 990 or 990-EZ or to provide any additional information Attach to Form 990 or 990-EZ. ion about Schedule O (Form 990 or 990-EZ) and its instruction www.irs.gov/form990.	ons on I.	2015 Open to Public Inspection
Name of the organization NATIONAL ENVIRONMENTAL E TRAINING FOUNDATION INC			Employer ident	ification number
990 Schedule O, Su	ıpplemental In	formation	34-133/043	
Return Ref	erence	Explanation		
FORM 990, PART I, DOI	NG BUSINESS AS	NATIONAL ENVIRONMENTAL EDUCATION FOUNDATION		

THE EPA ADMINISTRATOR HAS THE POWER TO A PPOINT ALL THE MEMBERS OF THE BOARD

DLN: 93493081000187

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FORM 990, PART VI, SECTION A, LINE 7A

990 Schedule O, Supplemental Information

Return Reference

FORM 990, PART VI, SECTION A, LINE 7B	IN THE CONGRESSIONAL ACT THAT CREATED NEEF, IT STIPULATES THAT THE EPA APPROVES ALL NOMINEES TO THE ORGANIZATION'S BOARD OF DIRECTORS
, ,	THE 990 WAS REVIEWED BY THE SENIOR DIRECTOR OF FINANCE AND ADMINISTRATION AND THE PRESIDEN T OF THE FOUNDATION IT WAS THEN SENT TO THE PRESIDENT AND TREASURER OF THE BOARD OF TRUST FES FOR REVIEW BOTH CONTACT THE FOUNDATION STAFF AND/OR THE ALIDITORS DIRECTLY IS NIFEDED.

Explanation

THE 990 WAS THEN PRESENTED TO THE FULL BOARD FOR APPROVAL PRIOR TO FILING WITH THE IRS

990 Schedule O, Supplemental Information Return

THE BOARD AND STAFF COMPLETE A CONFLICT OF INTEREST FORM ANNUALLY IF A CONFLICT OF INTEREST ARISES.

IF THE PRESIDENT OR A MEMBER OF THE BOARD OF DIRECTORS FAILS TO FILE A REQUIRED DISCLOSURE. THE CHAIRMAN OF THE BOARD OF DIRECTORS DECIDES ON A PPROPRIATE ACTION. IF THE CHAIRMAN FAILS TO MAKE A REQUIRED DISCLOSURE. THE VICE CHAIRMEN DECIDES AN APPROPRIATE ACTION.

THE EXECUTIVE COMMITTEE REVIEWS A SALARY SURVEY AND ALSO WHAT INDIVIDUALS IN COMPARABLE PO

Explanation

ANY BOARD MEMBER FAILING TO MAKE A DISCLOSURE IS SUBJECT TO DISCIPLINARY ACTION. INCLUDING DISMISSAL

SITIONS IN OTHER, SIMILARLY SIZED NONPROFITS ARE CURRENTLY BEING PAID. THIS IS DONE THROUG H REVIEW OF THE 990'S OF OTHER NON-PROFITS AND ALSO PROFESSIONAL CONTACTS. THE COMPENSATIO N PROCESS IS DOCUMENTED IN THE BOARD MINUTES. THIS POLICY APPLIES TO THE PRESIDENT AND THI S PROCESS IS IMPLEMENTED AND REVIEWED BY THE BOARD CHAIR THE BOARD TREASURER IS CONSULTED.

FORM 990. PART VI. SECTION B. LINE 15A ON THE COMPENSATION OF KEY EMPLOYEES OF THE ORGANIZATION. THE LAST COMPENSATION REVIEW TO OK PLACE IN NOV 2015

Reference FORM 990. PART

VI. SECTION B.

LINE 12C

990 Schedule O, Supplemental Information

Return

Reference

VI, SECTION C, LINE 19	FINANCIAL INFORMATION IS PROVIDED IN THE FOUNDATION'S ANNUAL REPORT ON THE WEBSITE WWW NEEFUSA ORG FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST ONLINE AND IN PRINT THE ORGANIZATIONAL DOCUMENTS ESTABLISHING THE FOUNDATION ARE AVAILABLE ONLINE AND THE CONFLICT OF INTEREST POLICY IS AVAILABLE UPON REQUEST
'	SUBCONTRACTORS PROGRAM SERVICE EXPENSES 24,926 MANAGEMENT AND GENERAL EXPENSES 53,503 F UNDRAISING EXPENSES 1,589 TOTAL EXPENSES 80,018 FEDERAL SUBCONTRACTORS PROGRAM SERVICE

EXPENSES 568.353 MANAGEMENT AND GENERAL EXPENSES 10,768 FUNDRAISING EXPENSES 0 TOTAL EX PENSES 579,121 PROFESSIONAL FEES PROGRAM SERVICE EXPENSES 1,269 MANAGEMENT AND GENERAL

EXPENSES 5.333 FUNDRAISING EXPENSES 2.327 TOTAL EXPENSES 8.929

Explanation