Form **990-ÉZ**

Short Form Return of Organization Exempt From Income Tax

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

OMB No 1545-1150

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

2016

Open to Public

Department of the Treasury

Inte	mal Reven	lue Service	Information about	Form 990-EZ and it	ts instructions is	at www.ir	s.gov/form9	90.	i V	inspection
Α	For th	ne 2016 cale	ndar year, or tax year beginr	ning	8/1/2016	, and	ending		7/31/20	
8	1	if applicable	C Name of organization	·- · -				D	Employer ide	entification number
_	;	s change	Vermonters For A Clean Er					1		
	Name c	change	Number and street (or PO box, if	mail is not delivered to s	street address)		Room/suite	L		-0362871
	Initial re	etum	789 Baker Brook Road					E	Telephone nu	mber
	Final retu	ım/terminated	City or town		State	ZIP code	•			
	Amende	ed return	Danby	.=	VT	05739		<u></u>	(802	2) 446-2094
	Applicat	tion pending	Foreign country name	Foreign province	/state/county	Foreign	postal code	F	Group Exer	nption
							<u> </u>	1_	Number ▶	
G	Accour	nting Method	X Cash Accrual	Other (specify	y) ►		1	I Ch	eck ▶ 🗍 i	if the organization is
		te: ► www		(-F-2)	•		<u> </u>			attach Schedule B
			ck only one) — X 501(c)(3)	501(c) ()◀ (insert no)	4947(a)(1) d	or 527		•)-EZ, or 990-PF)
				=						
		f organization	<u></u>	Trust	Association	U Otl				
L			7b to line 9 to determine gros	_		000 or more	e, or if total as	sets		
			elow) are \$500,000 or more, fi						▶\$	158,077
P	art l		e, Expenses, and Char						ictions for	
		Check if	the organization used S	schedule O to re	spond to any o	question i	n this Part	١.		. <u>X</u>
	1		ns, gifts, grants, and similar						1	158,077
	2		ervice revenue including gov	ernment fees and	contracts				2	
	3		p dues and assessments .						3	
	4	Investment							4	
	5a		unt from sale of assets othe	•		5a			- ₹5.	
	b		or other basis and sales exp			5b			——————————————————————————————————————	
	C		ss) from sale of assets other	tnan inventory (S	ubtract line 5b fr	om line 5a	1)		5c	
	6	_	d fundraising events		41					
<u>e</u>	а		ne from gaming (attach Sch	requie G if greater	tnan I	اما			*	
Revenue	L	\$15,000)	no from fundrologo accorda	not including		6a	ributions.			
eVe	b		ne from fundraising events ising events reported on lin		Ψ Iula G if tha	or com	tributions		5 87.6	
œ,			ising events reported on ling gross income and contribution	• •		66			· .	
	С		expenses from gaming and		•	6c			- "	
	d		or (loss) from gaming and	•		\	subtract		$\dashv \cdot \mid$	
	_ u	line 6c)	or (1000) from gaining and		, caa iii ca oa ai	ia ob and			6d	
	7a	,	of inventory, less returns a	nd allowances		7a			7	
	b		of goods sold .			7b				
	С		or (loss) from sales of inve	ntory (Subtract line	e 7b from line 7a				7c	
	8		nue (describe in Schedule C				•		8	
	9	Total rever	ue. Add lines 1, 2, 3, 4, 5c,	6d, 7c, and 8		רפיפון נוי	·].		▶ 9	158,077
	10		sımılar amounts paid (list ir	Schedule O)	. KEUL			_	10	
	11	Benefits pa	d to or for members						11	
es	12	Salaries, ot	her compensation, and emp il fees and other payments	oloyee benefits	B FEB 2	7 2018	<u> </u>		12	110,102
Suc		Professiona	I fees and other payments	to independent coi	ntractors				13	18,118
Expenses	14	Occupancy	rent, utilities, and maintena	ance .	OGDE				14	4,154
யி	15	• .	blications, postage, and shi	, , •		. I V, U I			15	8,047
	16		nses (describe in Schedule			•	٠	٠.	16	10,184
	17		nses. Add lines 10 through				· <u> </u>	. •	17	150,605
ध्र	18		deficit) for the year (Subtraction of headings				aroo with		18	7,472
SS	19		or fund balances at beginni		ie ∠≀, column (A	y) (must a	gree willi		19	23,547
Net Assets	20		figure reported on prior yea ges in net assets or fund ba		Schedule (1)	•	•	•	20	20,047
윈	20 21		ges in fiet assets of fund ba or fund balances at end of v	• •	·			٠ ،	► 20 21	31.019

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2016)

Hr/WK

Page 3

instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V. Yes Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a 33 33 34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions) 35 a Did the organization have unrelated business gross income of \$1,000 or more during the year from business b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O . . . Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III. 35c Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N 37 a Enter amount of political expenditures, direct or indirect, as described in the instructions. b Did the organization file Form 1120-POL for this year? . . 38 a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return? **b** If "Yes," complete Schedule L, Part II and enter the total amount involved 39 Section 501(c)(7) organizations Enter. 39a a Initiation fees and capital contributions included on line 9. . . **b** Gross receipts, included on line 9, for public use of club facilities 39b 40 a Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: section 4911 ► , section 4912 ► ; section 4955 ► **b** Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I. . . 40b c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization . e All organizations At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T. List the states with which a copy of this return is filed ▶ NONE - NOT REQUIRED 42 a The organization's books are in care of ► Annette Smith (802) 446-2094 Telephone no ▶ ZIP + 4 ▶ 05739 Located at ► 789 Baker Brook Road City Danby ST VT **b** At any time during the calendar year, did the organization have an interest in or a signature or other authority over Yes No a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 42b If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here . 43 and enter the amount of tax-exempt interest received or accrued during the tax year Yes No 44 a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be Х 44a completed instead of Form 990-EZ **b** Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be Х 44b completed instead of Form 990-EZ . . . c Did the organization receive any payments for indoor tanning services during the year? . . . If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an 44d explanation in Schedule O 45 a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 45 b Did the organization receive any payment from or engage in any transaction with a controlled entity within the -1 meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Х Form 990-EZ (see instructions) Form **990-EZ** (2016)

Other Information (Note the Schedule A and personal benefit contract statement requirements in the

Form 9	90-EZ (201	6) 🖍 🛝	/ermonters For A Clear	Environment, Inc.					03-0362871 Page		
									Yes	No	
46				tly, in political campaign act							
		dates for public	office? If "Yes," comple	ete Schedule C, Part I	<u> </u>	<u> </u>		. 46		X	
Part			(3) organizations o								
			(c)(3) organizations	must answer questions 4	47–49b and 52, and	d comple	ete the table:	s for line	S		
		0 and 51		11.04						_	
		neck if the org	ganization used Sch	edule O to respond to ar	ny question in this i	Part VI				<u></u>	
									Yes	No	
47	Did the	organization en	gage in lobbying activiti	es or have a section 501(h)	election in effect duri	ing the ta	x				
	year? If	"Yes," complete	Schedule C, Part II.					47	Х		
48	Is the or	ganization a scl	hool as described in se	ction 170(b)(1)(A)(ii)? If "Ye	s," complete Schedul	eE.		. 48		X	
49 a				exempt non-charitable relat				49a		X	
b	If "Yes,"	was the related	organization a section	527 organization?			•	49b			
50				nighest compensated emplo				and key			
				0,000 of compensation from							
		'				1	ealth benefits,				
	(a) Name and title of e	ach employee	(b) Average hours per week	(c) Reportable compensation	contribu	tions to employee	(e) Estima			
		•		devoted to position	(Forms W-2/1099-MISC)		lans, and deferred mpensation	other co	ompensa	10011	
Name	None					1					
Title				 Hr/WK		1					
Name						1					
Title				 Hr/WK							
Name				TIIIVVI							
Title				·- Hr/WK							
				HIVVK		 			····		
Name											
Title				Hr/WK							
Name											
Title f	Total au	mbar of other or	nployees paid over \$10	Hr/WK	<u> </u>	<u> </u>		L			
			•	· ·	. —						
51			_	nighest compensated indepe		io each re	eceivea more	ınan			
	\$ 100,00	o or compensa	tion from the organizati	on If there is none, enter "!	vone."				-		
		(a) Name and busin	ness address of each indepen	dent contractor	(b) Type of serv	rice	(c)) Compensa	tion		
N	None					•••					
	140116		Str	710							
City			ST	ZIP							
Name			Str								
City			ST	ZIP							
Name			Str								
City			ST	ZIP							
Name			Str				1				
City			ST	ZIP	 		- 				
Name			Str		-						
City	Tabal		ST	ZIP	1						
_ d				each receiving over \$100,0		·	·				
52			nplete Schedule A7 No	te: All section 501(c)(3) org	janizations must attac	n a			s X	No	
	complet	ed Schedule A	· · · · · · · · · · · · · · · · · · ·	• • •	• • • • • •	· · · ·	·	<u> </u>	, <u> </u>	110	
Under p	enalties of	религу, I declare tha	t I have examined this return,	including accompanying schedules	and statements, and to the	best of my	knowledge and be	lief, it is			
true, co	rrect, and c	omplete Declaration	of preparer other than office	r) s based on all information of which	ch preparer has any knowle	age	-3111	1.0			
			<u> </u>	7 9			<u>~2 10</u>	118			
Sign		Signature of o	fficer	110 5	NO ()-200	1-0	Date				
Here		L/W	INO HE DON	ITVI LXCCUTT	NA KILLA	JOY					
		Type or print n		<i>j</i>							
Paid		Print/Type prepare		Preparer's signature	Dat		Check	ıf PTIN			
Prep		Norman E Fav	or III	Creenson	1	<u>/29/2018</u>	self-employed	P0123			
		Firm's name	Favor & Co	10			Firm's EIN ► 20				
	Only	Firm's address	PO Box 1586, Manc	nester Ctr , VT 05255				02 <u>)</u> 362-2			
May ti	he IRS di	scuss this return	n with the preparer sho	wn above? See instructions		. <u>.</u>	<u>. </u>	► X Ye	s	No_	
		- -					-	Form 9	90-F	(2016)	

SCHEDULE A' (Form 990 or 990-EZ)

Public Charity Status and Public Support

_{18t.} 2

20**16**

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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 www.irs.gov/form990.

Name of the organization

Vermonters For A Clean Environment, Inc

03-0362871

Pai	rt I	Reason for Public Char	ity Status (All org	ganizations must co	mplete ti	nis part.)	See instructions			
	orga	anization is not a private foundat A church, convention of church								
1	\vdash	A school described in section	·				A)(1).	,		
3	\vdash	A hospital or a cooperative hos				•	,	i		
4	H	A medical research organizatio			•			ter the		
•	_	hospital's name, city, and state	•							
5		An organization operated for th section 170(b)(1)(A)(iv). (Com		e or university owned	or operate	ed by a go	vernmental unit desc	cribed in		
6		A federal, state, or local govern	ment or governmen	ital unit described in se	ection 170)(b)(1)(A)(v).			
7	X	An organization that normally redescribed in section 170(b)(1)			m a gove	rnmental ι	init or from the gene	ral public		
8		A community trust described in	section 170(b)(1)(/	A)(vi). (Complete Part	II.)					
9		An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions) Enter the name, city, and state of the college or university								
10		An organization that normally receives (1) more than 33 1/3% 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 33 1/3% 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 See section 509(a)(2). (Complete Part III)								
11	Ц	An organization organized and operated exclusively to test for public safety. See section 509(a)(4).								
12	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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g									
а	a 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.									
b	·	Type II. A supporting organization(s) You must control or management of the organization(s) You must control organization(s)	ne supporting organi	zation vested in the sa						
C		Type III functionally integra	ated. A supporting o	organization operated i				rated with,		
d		its supported organization(s) Type III non-functionally integrithms in that is not functionally integrithms.	itegrated. A support	ting organization opera	ated in cor	nection w	ith its supported org			
		requirement (see instruction	s) You must comp	lete Part IV, Sections	A and D,	and Part	V.			
е	۱	Check this box if the organized functionally integrated, or Ty					Type I, Type II, Type	e III		
f		Enter the number of supported	•							
g		Provide the following information	n about the support							
	(i)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
					Yes	No				
A)										
 B)	_			<u> </u>						
		· · · · · · · · · · · · · · · · · · ·			<u></u>					
C)]				
D)					_					
E)										
ota	<u> </u>									

		For A Clean Env				03-0362871	Page
Yeart II Support Schedule for (Complete only if you compart III. If the organization	hecked	I the box on lin	ie 5, 7, or 8 of <mark>I</mark>	Part I or if the o	rganization fail	ed to qualify und	ler
Section A. Public Support						<u> </u>	
Calendar year (or fiscal year beginning in)	▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Tax revenues levied for the organization benefit and either paid to or expended its behalf. 		199,969	141,422	116,697	128,406	158,077	744,57
The value of services or facilities furnished by a governmental unit to th organization without charge	e						
4 Total. Add lines 1 through 3	[199,969	141,422	116,697	128,406	158,077	744,57

The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f) 88,802 Public support. Subtract line 5 from line 4 655,769 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2012 (b) 2013 (c) 2014 (d) 2015 (e) 2016 (f) Total 199,969 116,697 128,406 158,077 7 Amounts from line 4 141,422 744,571 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources 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) 744.571 11 Total support. Add lines 7 through 10. First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 14 88.07% Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)). Public support percentage from 2015 Schedule A, Part II, line 14. 15 16a 33 1/3% support test-2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, b 33 1/3% support test—2015. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 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—2015. 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 Schedule A (Form 990 or 990-EZ) 2016

wm 990 or 990-EZ) 2016 Vermonters For A Clean Environment, Inc. Support Schedule for Organizations Described in So

ction A. Public Support					/	
endar year (or fiscal year beginning in)	► (a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
Gifts, grants, contributions, and membership fee	·s					
received (Do not include any "unusual grants")		<u> </u>			<i>y</i>	
Gross receipts from admissions, merchandise					1	
sold or services performed, or facilities furnished in any activity that is related to the				/	,	
organization's tax-exempt purpose		ĺ		,'		
Gross receipts from activities that are not an		 		<u> </u>		
unrelated trade or business under section 513		}		1	1	
Tax revenues levied for the organization's					†	
benefit and either paid to or expended on				, '		
its behalf	'					
The value of services or facilities	<u> </u>			 	 	
			,	1		
furnished by a governmental unit to the						
organization without charge .	ļ	 		 	 	
Total. Add lines 1 through 5		 	<i>f</i>	 	 	
Amounts included on lines 1, 2, and 3			1			
received from disqualified persons .		 	· · · · · · · · · · · · · · · · · · ·	 	 	
Amounts included on lines 2 and 3 received	/ed		/		1	
from other than disqualified persons that		1		ł	}	
exceed the greater of \$5,000 or 1% of the	e					
amount on line 13 for the year.		1				
Add lines 7a and 7b						
Public support (Subtract line 7c from	,	· Marie Constitution	1	在我人们的	175	
line 6.) .		1 1 / 1 / 1 / 1			1.45	
tion B. Total Support		4				
ndar year (or fiscal year beginning in)	► (a) 2012	/ (b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
Amounts from line 6		,/				
Gross income from interest, dividends,		<u> </u>				
payments received on secunties loans,			i Î		1	
rents, royalties and income from similar sources	1				<u> </u>	
Unrelated business taxable income (less	7					
section 511 taxes) from businesses						
acquired after June 30, 1975					1	
Add lines 10a and 10b	· //	 				
Net income from unrelated business	·	1			 	
activities not included in line 10b, whethe	. l /					
· ·	1 1				[
or not the business is regularly carried on	' //	 		 	 	
Other income Do not include gain or		1		1	1	
loss from the sale of capital assets	/				ļ İ	
(Explain in Part VI)	/	 		 	 	
Total support. (Add lines 9, 10c, 11,	/					
and 12)	' <u> </u>	1				
•	-	, second, third, fourt	h, or fifth tax year	as a section 501(c)	(3)	_
First five years. If the Form 990 is for the	re:		·	<u> </u>	_:	ا.
First five years. If the Form 990 is for the organization, check this box and stop he		4				
First five years. If the Form 990 is for the organization, check this box and stop he		tage			15	
First five years. If the Form 990 is for the organization, check this box and stop hection C. Computation of Public S	Support Percen		(f))			
First five years. If the Form 990 is for the organization, check this box and stop he tion C. Computation of Public S Public support percentage for 2016 (line of the computation)	Support Percen 8, column (f) divided	by line 13, column (ff)	· · · · · ·	16	
First five years. If the Form 990 is for the organization, check this box and stop he tion C. Computation of Public S Public support percentage for 2016 (line of Public support percentage from 2015 Sch	Support Percen 8, column (f) divided hedule A, Part III, line	by line 13, column (e 15		· · · · · · · · · · · · · · · · · · ·		
First five years. If the Form 990 is for the organization, check this box and stop he tion C. Computation of Public S Public support percentage for 2016 (line of Public support percentage from 2015 Sch	Support Percen 8, column (f) divided hedule A, Part III, line nent Income Per	by line 13, column (e 15	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
First five years. If the Form 990 is for the organization, check this box and stop he stion C. Computation of Public Service Public support percentage for 2016 (line Public support percentage from 2015 Schetton D. Computation of Investment	Support Percen 8, column (f) divided hedule A, Part III, line hent Income Per (line 10c, column (f)	by line 13, column (e 15	· · · · · · · · · · · · · · · · · · ·		16	

line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . .

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A. D. and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

_	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete I	Part V.)		
Sect	ion A. All Supporting Organizations			
		F	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			l
_	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			jJ
	organization was described in section 509(a)(1) or (2).	2		
3a	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		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)			لـــــا
	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		L
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			. 1
	supported organization? 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	4b		
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 organization was used exclusively for section 170(c)(2)(B)			
	purposes	4c		
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			<u> </u>
	designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or	ļ		
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		<u> </u>
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			-
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with		<u> </u>	لنبا
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		<u></u>
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 I of Schedule L (Form 990 or 990-EZ)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			6
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described	<u> </u>		13 54
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		Ĺ
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) 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.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			. 7
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			3 ,
	supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			1444

determine whether the organization had excess business holdings)

10b

Part	W Supporting Opening tions (optimized)	<u> </u>		age O
rart	Supporting Organizations (continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		163	100
a	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?	11a		
b	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.	11c		
Sect	ion 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,			ļ
	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			1
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	2		
Sect	supervised, or controlled the supporting organization. ion C. Type II Supporting Organizations			
OCCL	ion of Type it 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		100	
-	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			ļ
	the supported organization(s)	1		
Sect	ion 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, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) 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			<u> </u>
3	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		
Sect	ion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in:	struction	s).	
a	The organization satisfied the Activities Test Complete line 2 below.		,	
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
-	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	eaa instrii	ctions	·1
c		ee mana		
2	Activities Test Answer (a) and (b) below.	المستحد	Yes	No
a	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	2a		
ь	that these activities constituted substantially all of its activities Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	20		
IJ	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.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported example tions? If "Vos." describe in Part VI the role played by the organization in this regard	3b	l	1

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifyin	g trus	t on Nov. 20, 1970 (expla	ıın ın Part VI) See
instructions. All other Type III non-functionally integrated supporting organ	nizatio	ns must complete Section	ns A through E
Section A - Adjusted Net Income		(A) Pnor Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recovenes of pnor-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 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		
7 Other expenses (see instructions)	7		
8 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)
1 Aggregate fair market value of all non-exempt-use assets (see		,	
instructions for short tax year or assets held for part of year)			
Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other		7	
factors (explain in detail in Part VI)		*	
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6		
7 Recoveries of prior-year distributions	7		
8 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	* 10 2447 1	
2 Enter 85% of line 1	2	39 · · · · · · · · · · · · · · · · · · ·	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4	^	
5 Income tax imposed in prior year	5	150 8.36	
6 Distributable Amount. Subtract line 5 from line 4, unless subject to		A STATE OF THE STA	
emergency temporary reduction (see instructions)	6	A COUNTY OF THE PARTY OF THE PA	
7 Check here if the current year is the organization's first as a non-functional	lly inte	grated Type III supporting	g organization (see
instructions)			

Page 7

Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	<u>izations (continued)</u>	
Section	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exempt	pt purposes of supported	t contract to the contract to	
	organizations, in excess of income from activity			L
3	Administrative expenses paid to accomplish exempt purpos	es of supported organiz	ations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6_	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6			ļ
8	Distributions to attentive supported organizations to which the	he organization is respo	nsive	
	(provide details in Part VI) See instructions			
9	Distributable amount for 2016 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			0 000
		(i)	(ii)	(iii)
S	ection E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
			Pre-2016	Amount for 2016
1	Distributable amount for 2016 from Section C, line 6	SE STATE OF	"你说我们的是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个	4 107
	Underdistributions, if any, for years prior to 2016			
2	(reasonable cause required—explain in Part VI) See			
	instructions		The Mark Mark Selection of the Selection	San Carried March 1985
3	Excess distributions carryover, if any, to 2016			6.
a			TANK TO THE STATE OF THE STATE	Kerry Constitution of the
b	了了那些,等是这个一种,是是我们的一种,不是是一种的一种,	AND THE PROPERTY OF THE PARTY O		April 1 State Stat
С_	From 2013	THE PARTY OF THE P	A CONTRACTOR OF THE CONTRACTOR	
d	From 2014			
<u>e</u>	From 2015	the way the state of the state of the	The state of the s	F. 1872 - 3884
f	Total of lines 3a through e	Live Care At 12845 Way . 15 Not always	SULF MEDICAL SUCCESSION	
<u>g</u>	Applied to underdistributions of prior years	PARTICIPAL EL PROPERTIE DE	李教 智明 (1964年)	一致シーの発表の手間
<u>h</u>	Applied to 2016 distributable amount	THE RESIDENCE OF THE PARTY OF T	THE STREET PROPERTY.	NOTE OF SEAL O
<u>-</u>	Carryover from 2011 not applied (see instructions)	以高·音音·音音·音音·音音·音音·音音·音音·音音·音音·音音·音音·音音·音音	Secretary and second responsibility	The state of the state of
	Remainder Subtract lines 3g, 3h, and 3i from 3f Distributions for 2016 from	AFACE TO THE PROPERTY OF THE PARTY OF THE PA	THE REPORT OF THE PARTY OF THE	Comment of the Comment
4	Section D line 7 \$			The same of the sa
a	Applied to underdistributions of prior years	TO THE PROPERTY OF THE PARTY OF	TALL YOU THE WASTE THE STATE OF THE PARTY OF	
<u>_a</u> b	Applied to underdistributions of prior years Applied to 2016 distributable amount	ALCOHOLD THE STATE OF THE STATE	で、4世界心を重かれる事をです。 で、4世界心を重かれる事をです。	A A REPORT - CHARLES
<u>c</u>	Remainder Subtract lines 4a and 4b from 4	Diegan and a best may a street washing	AL PROPERTY.	第三八年第四十四日
	Remaining underdistributions for years prior to 2016, if	AND THE STATE OF	T LOST THUMBONS WAS THE ST. C.	
Ū	any Subtract lines 3g and 4a from line 2 For result			
	greater than zero, explain in Part VI See instructions)	
6	Remaining underdistributions for 2016 Subtract lines 3h	是为2年9年5年4人的工		
•	and 4b from line 1 For result greater than zero, explain in			
	Part VI See instructions			
7	Excess distributions carryover to 2017. Add lines 3		A PROPERTY OF	江地 中華成立了。銀門
-	and 4c			[The state of th
8	Breakdown of line 7	特别学说到第一个	说了为国家的特别。	少。
a	FLEW 1000年1000年1000年1000年1000年100日	特别的特别的	2、「器」型器型器以下。	1、 企业的企业
b	Excess from 2013	沙域是四种种种种	が歴史の開発的でき	THE THE WAR
c	Excess from 2014	划在湖北市的东西地域	"加州河北京大约第	·
d	Excess from 2015	いかな物質を充分的を対		於認為的理論
	Evenes from 2016	いまして、大人となどはいないので	经10年中华的政治的公司	The same of the sa

Schedule A (F	Form 990 or 990-EZ) 2016	Vermonters For A Clean Environment, Inc	03-0362871	Page 8
Part VI	Supplemental Info	rmation. Provide the explanations required by Part II, line 10; Part II, lin		
٠,		Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c		
		art IV, Section C, line 1; Part IV, Section D, lines 2 and 3, Part IV, Section		
		line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8; an		
		so complete this part for any additional information (See instructions.)		
	<u> </u>	to to include the part for any additional information (550 information)		
			•	
	•	•	· · · · · · · · · · · · · · · · · · ·	
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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

2016

Open to Public

Department of the Treasury Internal Revenue Service

► 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.

Inspection

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

- Section 501(c)(3) organizations. Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations Complete Part I-A only.

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

• 5	 Section 501(c)(4), (5), or (6) organizations. Complete Part III. 										
	Name of organization Employer identification number										
Ven	monters For A Clean Enviro					03-03628					
Pa		the organization is exempt und					n.				
1		the organization's direct and indirect p	political campaign	activities in Part IV	. (see ins	tructions for					
2	definition of "political car	npaign activities") y expenditures (see instructions)									
3	Volunteer hours	y expenditures (see instructions)			. • \$						
		the organization is exempt unc	ler section 501	(c)(3)	•						
1	Enter the amount of any	excise tax incurred by the organization	on under section 49	955	S						
2		excise tax incurred by organization m			. • • • • • • • • • • • • • • • • • • •						
3		ed a section 4955 tax, did it file Form	_		•		es [No			
4a	Was a correction made?			, , , ,	•		es [≓ No			
	If "Yes," describe in Part	IV	• •			<u></u>					
		the organization is exempt und	er section 501	(c), except sect	ion 501	(c)(3).					
1		expended by the filing organization t				X-4X-L					
	activities				. ▶ \$						
2	Enter the amount of the f	filing organization's funds contributed	to other organizati	ons for section							
	527 exempt function activities										
3	The state of the s										
4	line 17b ▶ \$										
4 5	The state of the s										
9		ses and employer identification numb ents For each organization listed, en									
		intributions received that were prompt									
		fund or a political action committee									
	(a) Name	(b) Address	(c) EIN	(d) Amount paid	from	(e) Amou	nt of pol	ıtıcal			
	.,		(-,	filing organizati funds If none, en	on's	contribution promptly	s receiv	ed and			
				idilas il lione, en	.61 -0-	delivered	to a sep	arate			
						political or none,	rganızatı enter -0				
(1)											
											
(2)											
(3)											
(4)											
(5)											
(0)	-										
(6)			1	!							

-	1edule C (Form 990 of 990-EZ) 2016					Page 2		
P	art II-A Complete if the organization under section 501(h)).	ı is exemp	t under section 5	01(c)(3) and file	d Form 5768 (elec			
A	Check ▶ if the filing organization be	_	•		-	ıp member's		
В	name, address, EIN, expe Check ▶ if the filing organization ch							
	Limits on Lobb (The term "expenditures" me)	(a) Filing organization's totals	(b) Affiliated group totals		
1a	Total lobbying expenditures to influence pub	obbying expenditures to influence public opinion (grass roots lobbying)						
þ	Total lobbying expenditures to influence a leg							
C	Total lobbying expenditures (add lines 1a an	d 1b)						
d	Other exempt purpose expenditures							
e	Total exempt purpose expenditures (add line	•						
f		unt from the	following table in bo	th				
	columns	-T						
	If the amount on line 1e, column (a) or (b) is:		ing nontaxable amo	unt is:	* ** * * *	:::		
	Not over \$500,000	+	amount on line 1e			ا مُعْدِد ا		
	Over \$500,000 but not over \$1,000,000		lus 15% of the excess			* * * * * * * * * * * * * * * * * * *		
	Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$17,000,000		lus 10% of the excess					
	Over \$17,000,000	\$1,000,000		And the state of t				
g	 	assroots nontaxable amount (enter 25% of line 1f)						
h	Subtract line 1g from line 1a If zero or less,	,						
i	Subtract line 1f from line 1c If zero or less, e							
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		
		_	g Period Under se	• •	of the five columns			
	(Some organizations that made a se See the		structions for lines	-	or tite five columns	delow.		
	Lobbyin	g Expenditu	res During 4-Year A	veraging Period				
	Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total		
2a	Lobbying nontaxable amount							
b	Lobbying ceiling amount (150% of line 2a, column(e))		*		F-9 50 1			
С	Total lobbying expenditures							
d	Grassroots nontaxable amount							
е	Grassroots ceiling amount (150% of line 2d, column (e))		5 (4) 6 (4) 7	AND THE PERSON OF THE PERSON O				
f	Grassroots lobbying expenditures							

Par	Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	T filed	Form	า 5768
For	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a)		(b)
	cription of the lobbying activity.	Yes	No	Amount
1 a	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 Volunteers?	No service of		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
۲ C	Media advertisements?		-+	
d e	Mailings to members, legislators, or the public?			
f	Grants to other organizations for lobbying purposes?	\vdash	\dashv	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X		3,725
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total Add lines 1c through 1i			3,725
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		_X	
b	If "Yes," enter the amount of any tax incurred under section 4912	. Aller		
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912	*		
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<u>. </u>		
Par	Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5),	or se	ection
				Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?			1
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior ye	ear?		3
Part	Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes."			
1	Dues, assessments and similar amounts from members		1	
2	Section 162(e) nondeductible tobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			
а	Current year		2a	
b	Carryover from last year		2b	
С	Total		2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		_3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible		ŀ	
	lobbying and political expenditure next year?		4	
5	Taxable amount of lobbying and political expenditures (see instructions)		5	
Part				
	de the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group	list), F	art II-A	A, lines 1 and
	e instructions), and Part II-B, line 1. Also, complete this part for any additional information.	-		
				
			-	
				
		_		

Ve Sahadula C	ermonters For A Clean Environment, Inc (Form 990 or 990-EZ) 2016			03-0362871
Part IV		tinued)	 	Page 4
	ouppionional mioritation (oon	<u>imaouy</u>		

		**		
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SCHEDULE O (Form 990 or 990-EZ)

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

2016

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Name of the organization	Employer identification number						
Vermonters For A Clean Environment, Inc	03-0362871						
Part I - Line 16 Other Expenses							
0.15							
Office expenses - \$1,370							
Advantage #2 500							
Advertising - \$3,500							
Website - \$1,300							

Travel & Meals - \$1,381							
Education - \$878							
Other - \$1,755							
······································							
