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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2017

Open to Public Inspection

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

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

Information about Form 990 and its instructions is at [www.irs.gov/form990](#)

Department of the Treasury
Internal Revenue Service

A For the 2017 calendar year, or tax year beginning 01-01-2017 , and ending 12-31-2017

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

NSF INTERNATIONAL

Doing business as

Number and street (or P.O. box if mail is not delivered to street address)

Room/suite

789 NORTH DIXBORO ROAD TAX DEPT

City or town, state or province, country, and ZIP or foreign postal code

ANN ARBOR, MI 481059723

F Name and address of principal officer

MICHAEL P WALSH

789 NORTH DIXBORO ROAD TAX DEPT

ANN ARBOR, MI 481059723

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

D Employer identification number

38-1428955

E Telephone number

(734) 769-8010

G Gross receipts \$ 171,244,744

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) () ◀(insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW.NSF.ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1952

M State of legal domicile MI

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

NSF INTERNATIONAL IS A GLOBAL, NOT-FOR-PROFIT PUBLIC HEALTH AND SAFETY ORGANIZATION

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)

3

9

4 Number of independent voting members of the governing body (Part VI, line 1b)

4

8

5 Total number of individuals employed in calendar year 2017 (Part V, line 2a)

5

770

6 Total number of volunteers (estimate if necessary)

6

0

7a Total unrelated business revenue from Part VIII, column (C), line 12

7a

0

7b Net unrelated business taxable income from Form 990-T, line 34

7b

0

Revenue

8 Contributions and grants (Part VIII, line 1h)

8

287,836

9 Program service revenue (Part VIII, line 2g)

9

140,798,744

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

10

2,608,868

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

11

-92,869

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

12

143,602,579

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

13

1,998,479

14 Benefits paid to or for members (Part IX, column (A), line 4)

14

0

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

15

60,407,975

16a Professional fundraising fees (Part IX, column (A), line 11e)

16a

0

16b Total fundraising expenses (Part IX, column (D), line 25) ▶0

16b

0

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

17

57,969,396

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

18

120,375,850

19 Revenue less expenses Subtract line 18 from line 12

19

23,226,729

20 Total assets (Part X, line 16)

20

328,238,800

21 Total liabilities (Part X, line 26)

21

73,213,849

22 Net assets or fund balances Subtract line 21 from line 20

22

255,024,951

Expenses

Prior Year

Current Year

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

Signature of officer

2018-11-13

Date

MICHAEL P WALSH CFO/VICE-PRESIDENT

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

LORI BOYCE

Preparer's signature

LORI BOYCE

Date

Check ☐ if self-employed

PTIN

P00121981

Firm's name ▶ DELOITTE TAX LLP

Firm's EIN ▶ 86-1065772

Firm's address ▶ 200 RENAISSANCE CENTER SUITE 3900

Phone no (313) 396-3000

DETROIT, MI 482431300

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2017)

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒**1** Briefly describe the organization's mission

NSF INTERNATIONAL IS DEDICATED TO BEING THE LEADING GLOBAL PROVIDER OF PUBLIC HEALTH AND SAFETY-BASED RISK MANAGEMENT SOLUTIONS, WHILE SERVING THE INTERESTS OF ALL STAKEHOLDERS. THESE STAKEHOLDERS INCLUDE THE PUBLIC, THE BUSINESS COMMUNITY, AND GOVERNMENT AGENCIES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☒ **Yes** ☐ **No**

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ **Yes** ☒ **No**

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured 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

4a	(Code)	(Expenses \$	61,337,875	including grants of \$	(Revenue \$	86,931,092)
	See Additional Data					

4b	(Code)	(Expenses \$	19,256,644	including grants of \$	(Revenue \$	34,886,794)
	See Additional Data					

4c	(Code)	(Expenses \$	12,149,531	including grants of \$	(Revenue \$	20,128,876)
	See Additional Data					

See Additional Data Table

4d	Other program services (Describe in Schedule O)					
	(Expenses \$	13,504,874	including grants of \$	199,921)	(Revenue \$	12,257,818)

4e	Total program service expenses ▶	106,248,924
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Part 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	No
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	No
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, Part V 	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a 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	
b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 	11b Yes	
c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 	11c	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 	11d	No
e 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 	12a	No
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 	12b Yes	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a Yes	
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 Yes	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 	16	No
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? 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
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	No

Part IV Checklist of Required Schedules (continued)

	Yes	No
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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? <i>If "Yes," complete Schedule I, Parts I and II</i>	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? <i>If "Yes," complete Schedule I, Parts I and III</i>		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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	Yes	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		No
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?		No
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		No
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? <i>If "Yes," complete Schedule L, Part I</i>		No
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>		No
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? <i>If "Yes," complete Schedule L, Part II</i>		No
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		No
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	Yes	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	Yes	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		No
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		No
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

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

☒

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	301	
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	770	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note.If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No
b	If "Yes," has it filed a Form 990-T for this year?If "No" to line 3b, provide an explanation in Schedule O	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Yes
b	AS, BE, BR, BU, CA, CI, CO, CS, EC, FR, GM, IN, IT, KS, MX, NZ, PE, RO, SA, SF, SP, SZ, TH, TS, AE, UK, VM If "Yes," enter the name of the foreign country		
5a	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7 Organizations that may receive deductible contributions under section 170(c).			
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8	
9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11 Section 501(c)(12) organizations. Enter			
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a	Is the organization licensed to issue qualified health plans in more than one state?Note. See the instructions for additional information the organization must report on Schedule O	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a	No
b	If "Yes," has it filed a Form 720 to report these payments?If "No," provide an explanation in Schedule O	14b	

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	9	
	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	8	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization'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 power to elect or appoint one or more members of the governing body?	7a	No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	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, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	No

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes
13	Did the organization have a written whistleblower policy?	13	Yes
14	Did the organization have a written document retention and destruction policy?	14	Yes
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	15a	Yes
b	Other officers or key employees of the organization	15b	Yes
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	Yes
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	Yes

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed: MI, CA

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.
☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 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.

20 State the name, address, and telephone number of the person who possesses the organization's books and records:
 ▶MICHAEL P WALSH 789 NORTH DIXBORO ROAD ANN ARBOR, MI 481059723 (734) 769-8010

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

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

Form **990** (2017)

[illegible]

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)	8,709,077	1,606,395	2,488,954

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3 Yes	
4	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? <i>If "Yes," complete Schedule J for such individual</i>	4 Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
SPENCE BROTHERS 4130 VARSITY DR STE A ANN ARBOR, MI 48108	CONSTRUCTION	2,295,935
HTC GLOBAL SERVICES INC 3855 SOLUTIONS CENTER CHICAGO, IL 60677	INFORMATION TECHNOLOGY AND SERVICES	1,605,862
PRIMESTAFF INTERNATIONAL LLC 324 E MAIN ST 2 NORTHVILLE, MI 48167	STAFFING SERVICES	972,860
ORACLE AMERICA INC 777 E EISENHOWER PARKWAY ANN ARBOR, MI 48108	FINANCIAL SOFTWARE	673,660
UNIVERSITY OF MARYLAND CENTER PO BOX 775 CAMBRIDGE, MD 21316	TESTING SERVICES	669,843

Form **990** (2017)

Part VIII **Statement of Revenue**

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

**Contributions, Gifts, Grants
and Other Similar Amounts**

	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a Federated campaigns . . .	1a			
b Membership dues . . .	1b			
c Fundraising events . . .	1c			
d Related organizations	1d			
e Government grants (contributions)	1e			
f All other contributions, gifts, grants, and similar amounts not included above	1f			
g Noncash contributions included in lines 1a-1f \$ _____				
h Total. Add lines 1a-1f ▶				

Program Service Revenue

	Business Code				
2a WATER SYSTEM	541380	86,931,092	86,931,092		
b FOOD EQUIPMENT	541380	34,886,794	34,886,794		
c HEALTH SCIENCES	541380	20,128,876	20,128,876		
d AUTOCERT	541900	6,034,420	6,034,420		
e SUSTAINABILITY	541900	4,344,902	4,344,902		
f All other program service revenue		2,066,375	2,066,375		
g Total. Add lines 2a-2f ▶		154,392,459			

Other Revenue

3 Investment income (including dividends, interest, and other similar amounts) ▶		1,392,604			1,392,604
4 Income from investment of tax-exempt bond proceeds ▶					
5 Royalties ▶					
6a Gross rents	(i) Real	(ii) Personal			
b Less rental expenses					
c Rental income or (loss)					
d Net rental income or (loss) ▶					
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
	11,471,026	3,988,655			
b Less cost or other basis and sales expenses	10,628,375	22,430			
c Gain or (loss)	842,651	3,966,225			
d Net gain or (loss) ▶		4,808,876	3,966,225		842,651
8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 a					
b Less direct expenses b					
c Net income or (loss) from fundraising events ▶					
9a Gross income from gaming activities See Part IV, line 19 a					
b Less direct expenses b					
c Net income or (loss) from gaming activities ▶					
10a Gross sales of inventory, less returns and allowances a					
b Less cost of goods sold b					
c Net income or (loss) from sales of inventory ▶					
Miscellaneous Revenue	Business Code				
11a					
b					
c					
d All other revenue					
e Total. Add lines 11a-11d ▶					
12 Total revenue. See Instructions ▶		160,593,939	158,358,684	0	2,235,255

Part IX Statement of Functional Expenses

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

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

**Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.**

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	199,921	199,921		
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, line 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	7,505,646	6,549,412	956,234	
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.	44,675,098	38,983,402	5,691,696	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	3,748,648	2,040,108	1,708,540	
9 Other employee benefits.	6,025,279	4,690,714	1,334,565	
10 Payroll taxes.	4,505,447	3,343,680	1,161,767	
11 Fees for services (non-employees):				
a Management.				
b Legal.	968,945		968,945	
c Accounting.	1,093,715		1,093,715	
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.	102,223		102,223	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	30,641,765	30,641,765		
12 Advertising and promotion.	2,103,369	1,445,274	658,095	
13 Office expenses.	2,524,310	1,709,817	814,493	
14 Information technology.	271,745	271,745		
15 Royalties.				
16 Occupancy.	3,881,786	675,286	3,206,500	
17 Travel.	6,629,640	5,843,217	786,423	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	658,297	453,092	205,205	
20 Interest.	1,586,948		1,586,948	
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	8,129,318	2,871,660	5,257,658	
23 Insurance.	939,119	88,640	850,479	
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):				
a SUPPLIES	5,047,573	4,719,802	327,771	
b TAXES AND FEES	1,811,474	91,338	1,720,136	0
c REPAIR AND MAINTENANCE	1,182,488	461,028	721,460	0
d MEMBERSHIPS AND SUBSCRIPTIONS	664,210		664,210	
e All other expenses	1,806,404	1,169,023	637,381	
25 Total functional expenses. Add lines 1 through 24e.	136,703,368	106,248,924	30,454,444	0
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).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part IX ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing		7,059,328	1	9,589,700
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net		11,132,404	4	12,452,898
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		0	5	0
	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	
	7	Notes and loans receivable, net			7	80,778,614
	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges		3,880,893	9	5,453,636
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a	138,248,647		
	b	Less: accumulated depreciation	10b	63,372,674		
				69,382,932	10c	74,875,973
	11	Investments—publicly traded securities		45,198,837	11	38,950,422
	12	Investments—other securities. See Part IV, line 11		169,871,270	12	156,534,584
	13	Investments—program-related. See Part IV, line 11			13	
	14	Intangible assets		11,313,814	14	11,668,334
15	Other assets. See Part IV, line 11		10,399,322	15	6,699,475	
16	Total assets. Add lines 1 through 15 (must equal line 34)		328,238,800	16	397,003,636	
Liabilities	17	Accounts payable and accrued expenses		4,793,749	17	9,296,856
	18	Grants payable		0	18	1,377,519
	19	Deferred revenue		5,317,069	19	6,218,766
	20	Tax-exempt bond liabilities		16,223,953	20	14,369,786
	21	Escrow or custodial account liability. Complete Part IV of Schedule D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	63,000,000
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		46,879,078	25	35,343,143
	26	Total liabilities. Add lines 17 through 25		73,213,849	26	129,606,070
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.					
	27	Unrestricted net assets		255,024,951	27	267,397,566
	28	Temporarily restricted net assets			28	
	29	Permanently restricted net assets			29	
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
33	Total net assets or fund balances		255,024,951	33	267,397,566	
34	Total liabilities and net assets/fund balances		328,238,800	34	397,003,636	

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	160,593,939
2	Total expenses (must equal Part IX, column (A), line 25)	2	136,703,368
3	Revenue less expenses Subtract line 2 from line 1	3	23,890,571
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	255,024,951
5	Net unrealized gains (losses) on investments	5	1,481,972
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	-13,501,539
9	Other changes in net assets or fund balances (explain in Schedule O)	9	501,611
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	267,397,566

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

	Yes	No
1 Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? 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 ☐ Both consolidated and separate basis		No
b Were the organization's financial statements audited by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis	Yes	
c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
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		

Additional Data

Software ID:
Software Version:
EIN: 38-1428955
Name: NSF INTERNATIONAL

Form 990 (2017)

Form 990, Part III, Line 4a:

THE NSF WATER DIVISION CERTIFIES PRODUCTS THAT COME INTO CONTACT WITH DRINKING WATER, SUCH PRODUCTS INCLUDE PLUMBING COMPONENTS, WATER TREATMENT CHEMICALS, DRINKING WATER FILTERS, AND POOL & SPA EQUIPMENT NSF PIONEERED THE DEVELOPMENT OF THE AMERICAN NATIONAL STANDARDS FOR ALL MATERIALS AND PRODUCTS WHICH TREAT (OR COME IN CONTACT WITH) DRINKING WATER, TO HELP PROTECT PUBLIC HEALTH AND THE ENVIRONMENT, AND MINIMIZE ADVERSE HEALTH EFFECTS IN 1990, THE U S EPA REPLACED ITS OWN DRINKING WATER PRODUCT ADVISORY PROGRAM WITH THESE NSF STANDARDS TODAY, MOST PLUMBING CODES REQUIRE CERTIFICATION TO NSF STANDARDS FORPIPES AND PLUMBING COMPONENTS IN COMMERCIAL AND RESIDENTIAL BUILDINGS

Form 990, Part III, Line 4b:

THE NSF FOOD SAFETY DIVISION OF THE NOT-FOR-PROFIT NSF INTERNATIONAL INCLUDES BOTH FOOD EQUIPMENT AND NONFOOD COMPOUNDS CERTIFICATION. THE FOOD EQUIPMENT PROGRAM TESTS AND CERTIFIES FOOD EQUIPMENT PRODUCTS FOR ACCEPTANCE ACROSS THE US, EUROPE AND OTHER GLOBAL MARKETS. THE NONFOODCOMPOUNDS PROGRAM OFFERS RISK MANAGEMENT SOLUTIONS FOR NONFOOD COMPOUNDS AND PROPRIETARY SUBSTANCES (I.E. LUBRICANTS, CLEANERS AND WATER TREATMENT CHEMICALS USED IN FOOD AND BEVERAGE PROCESSING).

Form 990, Part III, Line 4c:

THE NSF HEALTH SCIENCES DIVISION OFFERS REFERENCE STANDARDS, CERTIFICATION, TRAINING, CONSULTING, RESEARCH/DEVELOPMENT, AND AUDITING SERVICES
FOR THE PHARMACEUTICAL AND DIETARY SUPPLEMENT INDUSTRIES

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

(Code) (Expenses \$ 4,143,939 including grants of \$ 199,921) (Revenue \$ 4,344,902)

THE NSF SUSTAINABILITY DIVISION SUPPORTS ECO-FRIENDLY STRATEGIC SOLUTIONS THROUGH ITS GROWING BODY OF STANDARDS AND PROTOCOLS, IN ADDITION TO SERVICES IN TESTING, AUDITING, CERTIFICATION AND VALID

(Code) (Expenses \$ 9,360,935 including grants of \$) (Revenue \$ 7,912,916)

OTHER PROGRAMS

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHARLES F BONSER BOARD MEMBER	2 00 0 00	X						75,508	0	5,640
PEER FL DAAMEN BOARD MEMBER	2 00 0 00	X						74,000	0	5,640
MARY JANE ENGLAND BOARD MEMBER	2 00 0 00	X						77,146	0	5,640
THOMAS W GLASGOW JR BOARD MEMBER	2 00 0 00	X						81,871	0	5,640
JOHN D GRAHAM BOARD MEMBER	2 00 0 00	X						74,777	0	5,640
JOAN MENKE-SCHAENZER BOARD MEMBER	2 00 0 00	X						76,279	0	5,640
RICHARD E RABBIDEAU CHAIRMAN	7 00 3 00	X						91,421	0	5,640
RICHARD K RIEDERER BOARD MEMBER	7 00 3 00	X						80,968	0	5,640
KEVAN P LAWLOR PRESIDENT, CEO	38 00 12 00	X		X				2,204,838	0	686,112
NANCY E BAUER EXEC ASSISTANT, CORP SECRETARY	38 00 12 00			X				113,820	0	18,483

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LISA A BELL VP, HUMAN RESOURCES (END 11/17)	38 00 12 00			X				374,001	0	35,908
LORELLE BESTERVELT EXECUTIVE VP, CTO	38 00 12 00			X				870,125	0	455,368
THOMAS CHESTNUT SR VP, GLOBAL FOOD DIVISION	38 00 12 00			X				0	713,253	214,767
ELIZABETH JONES VP, MARKETING	38 00 12 00			X				565,186	0	182,177
CHANDANA KATHURIA SR VP, CIO	38 00 12 00			X				626,697	0	287,871
KURTIS KNEEN VP, GLOBAL LABS	38 00 12 00			X				424,486	0	229,273
CLIFTON MCLELLAN VP, WATER SYSTEMS (END 5/17)	38 00 12 00			X				1,067,800	0	8,144
ROBERT PIETROWSKI VP, GLOBAL HEALTH SCI DIV END 5/17	38 00 12 00			X				0	462,885	0
MICHAEL P WALSH VP, CFO	38 00 12 00			X				546,291	0	219,734
ELIAS SALEMBIER SENIOR DIRECTOR - FINANCE	50 00 0 00					X		193,123	0	23,632

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHERYL A LUTHER GM - DIETARY SUPPLEMENTS	50 00 0 00					X		204,162	0	15,580
GREGORY V BROWN GLOB MANAG DIR, SEAFOOD (END 6/17)	50 00 0 00					X		331,270	0	5,536
IAN M HAYNES M D GLOBAL BUSINESS DEVELOPMENT	50 00 0 00					X		233,036	0	22,428
STANLEY S HAZAN SR DIRECTOR, REGULAR AFFAIRS	50 00 0 00					X		195,503	0	38,821
JAMES LEWIS FORMER OFFICER	0 00 0 00						X	126,769	0	0
DAVID G RICHARDSON FORMER OFFICER	0 00 0 00						X	0	430,257	0

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization
NSF INTERNATIONAL

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 www.irs.gov/form990.

OMB No 1545-0047
2017
Open to Public Inspection

Employer identification number
38-1428955

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

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

- 1

☐

A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2

☐

A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ))
- 3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4

☐

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 _____
- 5

☐

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)
- 6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7

☐

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)
- 8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)
- 9

☐

An agricultural research organization described in **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

☒

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
- 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 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.**
- 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.**
- d

☐

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.**
- e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization
- f

Enter the number of supported organizations _____
- g

Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170(b)(1)(A)(ix)

(Complete only if you checked the box on line 5, 7, 8, or 9 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.)

Section A. Public Support

	Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4						

Section B. Total Support

	Calendar year (or fiscal year beginning in) ►	(a)2013	(b)2014	(c)2015	(d)2016	(e)2017	(f)Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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.)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (see instructions)					12	

13 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	Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f))	14	
15	Public support percentage for 2016 Schedule A, Part II, line 14	15	

16a 33 1/3% support test—2017. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐**b 33 1/3% support test—2016.** 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—2017.** 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—2016.** 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 ☐**18 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 10 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an 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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts 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						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 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

15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2016 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2016 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

b 33 1/3% support tests—2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

20 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 on line 12 of 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.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>	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)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>	2	
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>	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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>	3b	
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>	3c	
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>	4a	
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>	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)? <i>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.</i>	4c	
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>	5a	
b Type I or Type II only. Was any added or substituted supported organization part of a class already 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 benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6	
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 regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	7	
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>	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))? <i>If "Yes," provide detail in Part VI.</i>	9a	
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? <i>If "Yes," provide detail in Part VI.</i>	9b	
c 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? <i>If "Yes," provide detail in Part VI.</i>	9c	
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>	10a	
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>	10b	

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
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?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI</i>		
	11a	
	11b	
	11c	

Section 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? <i>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.</i>		
	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? <i>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.</i>		
	2	

Section 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)? <i>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).</i>		
	1	

Section 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
	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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
	3	

Section 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 instructions**)
- 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.
- c** ☐ The organization supported a governmental entity. Describe in **Part VI** how you supported a government entity (see instructions).

2 Activities Test Answer (a) and (b) below.

	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? <i>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.</i>		
	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? <i>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.</i>		
	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? <i>Provide details in Part VI.</i>		
	3a	
b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
	3b	

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-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)	1		
a 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 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
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
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		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)			

Part V

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
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	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013.			
c From 2014.			
d From 2015.			
e From 2016.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2018. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013.			
b Excess from 2014.			
c Excess from 2015.			
d Excess from 2016.			
e Excess from 2017.			

Additional Data

Software ID:

Software Version:

EIN: 38-1428955

Name: NSF INTERNATIONAL

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions)

Facts And Circumstances Test

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
NSF INTERNATIONAL

Employer identification number
38-1428955

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
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 advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)

☐ Preservation of an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ►

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

☐ Yes ☐ No

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

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

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

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1

► \$

(ii) Assets included in Form 990, Part X

► \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1

► \$

b Assets included in Form 990, Part X

► \$

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☐ Public exhibition

b

☐ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

Provide a description of the organization's 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?

☐ Yes

☐ No

Part IV

Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

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" on Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
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

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

(ii) related organizations

b

If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4

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" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	3,520,000	1,430,450		4,950,450
b Buildings		62,969,467	19,738,406	43,231,061
c Leasehold improvements		5,050,957	1,169,888	3,881,069
d Equipment		58,091,545	40,423,274	17,668,271
e Other		7,186,228	2,041,106	5,145,122
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))				74,875,973

Part VII

Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b.
See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) INVESTMENT IN SUBSIDIARIES	156,534,584	C
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶	156,534,584	

Part VIII

Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) ▶	

Part X

Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f.
See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
See Additional Data Table	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶	35,343,143

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

☒

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	162,075,911
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	1,481,972
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	1,481,972
3	Subtract line 2e from line 1	3	160,593,939
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	160,593,939

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	1	136,703,368
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	136,703,368
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	0
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	136,703,368

Part XIII 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 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
See Additional Data Table	

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 38-1428955
Name: NSF INTERNATIONAL

Form 990, Schedule D, Part X, - Other Liabilities

1	(a) Description of Liability	(b) Book Value
	FEDERAL INCOME TAXES	443,769
	INTEREST PAYABLE	291,113
	ACCRUED EMPLOYEE BENEFITS	9,218,848
	ACCRUED PENSION	10,848,981
	OTHER LONG-TERM LIABILITIES	37,050
	ACCRUED INCENTIVE PLANS	12,199,450
	ACCRUED MISCELLANEOUS EXPENSES	466,394
	ACCRUED PLASTICS REBATES	359,282
	ACCRUED OTHER TAXES	160,864
	MINORITY INTEREST	1,317,392

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	PER CONSOLIDATED AUDITED FINANCIAL STATEMENTS OF NSF INTERNATIONAL AND SUBSIDIARIES (WHICH ALSO INCLUDES THE ACTIVITY OF NSF INTERNATIONAL) THE ORGANIZATION HAS DETERMINED IT HAS NO MATERIAL UNRECOGNIZED TAX BENEFITS THE ORGANIZATION IS SUBJECT TO TAXATION IN THE UNITED STATES, AND VARIOUS STATES AND FOREIGN JURISDICTIONS AS OF DECEMBER 31, 2017, THE ORGANIZATION'S TAX YEARS FOR 2014, 2015, 2016 AND 2017 ARE SUBJECT TO EXAMINATION BY VARIOUS TAX AUTHORITIES

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	OTHER

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization
NSF INTERNATIONAL

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

► Attach to Form 990.

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

OMB No 1545-0047

2017

**Open to Public
Inspection**

Employer identification number

38-1428955

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☐ **Yes** ☐ **No**

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) See Add'l Data					
(2)					
(3)					
(4)					
(5)					
3a Sub-total	31	170			29,668,765
b Total from continuation sheets to Part I					133,559
c Totals (add lines 3a and 3b)	40	178			29,802,324

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter  _____
- 3 Enter total number of other organizations or entities  _____

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)* ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* ☒ Yes ☐ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)* ☐ Yes ☒ No

Part V **Supplemental Information**

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

Return Reference	Explanation
PART I, LINE 3	ACCRUAL

Additional Data

Software ID:

Software Version:

EIN: 38-1428955

Name: NSF INTERNATIONAL

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA & THE CARIBBEAN	1	2	PROGRAM SERVICES	WATER TREATMENT DEVICES AND PLUMBING COMPONENTS TESTING	27,397
EAST ASIA AND THE PACIFIC	10	35	PROGRAM SERVICES	WATER TREATMENT DEVICES AND PLUMBING COMPONENTS TESTING	4,175,961

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC			INVESTMENTS IN FOREIGN SUBSIDIARIES		6,300,000
EUROPE (INCLUDING ICELAND AND GREENLAND)	13	80	PROGRAM SERVICES	WATER TREATMENT DEVICES, PLUMBING COMPONENTS AND FOOD EQUIPMENT TESTING	6,438,575

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE (INCLUDING ICELAND AND GREENLAND)			INVESTMENTS IN FOREIGN SUBSIDIARIES		5,077,754
MIDDLE EAST AND NORTH AFRICA	4	3	PROGRAM SERVICES	WATER TREATMENT DEVICES, PLUMBING COMPONENTS AND FOOD EQUIPMENT TESTING	516,936

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA	3	50	PROGRAM SERVICES	WATER TREATMENT DEVICES, PLUMBING COMPONENTS AND FOOD EQUIPMENT TESTING	846,002
NORTH AMERICA			INVESTMENTS IN FOREIGN SUBSIDIARIES		6,286,140

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
RUSSIA AND NEIGHBORING STATES	0	1	PROGRAM SERVICES	WATER TREATMENT DEVICES, PLUMBING COMPONENTS AND FOOD EQUIPMENT TESTING	2,105
SOUTH AMERICA	8	5	PROGRAM SERVICES	WATER TREATMENT DEVICES, PLUMBING COMPONENTS AND FOOD EQUIPMENT TESTING	125,553

Form 990 Schedule F Part I - Activities Outside The United States					
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH ASIA	1	2	PROGRAM SERVICES	WATER TREATMENT DEVICES, PLUMBING COMPONENTS AND FOOD EQUIPMENT TESTING	5,901

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493318049758

Schedule I
(Form 990)

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States
Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047
2017
Open to Public
Inspection

Department of the
Treasury
Internal Revenue Service

Name of the organization
NSF INTERNATIONAL

Employer identification number
38-1428955

Part I

General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

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 that received more than \$5,000. Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 5

3 Enter total number of other organizations listed in the line 1 table 1

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
------------------	-------------

Additional Data

Software ID:
Software Version:
EIN: 38-1428955
Name: NSF INTERNATIONAL

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANN ARBOR SPARK 201 S DIVISION ST STE 430 ANN ARBOR, MI 48104	38-2436899	501(C)(6)	10,000	0			GENERAL SUPPORT
ANSI - AMERICAN NATIONAL STANDARDS INSTITUTE 1899 L STREET NW 11TH FLOOR WASHINGTON, DC 20036	18-1635253	501(C)(3)	50,000	0			GENERAL SUPPORT

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOOD GATHERERS 1 CARROT WAY ANN ARBOR, MI 48105	38-2853858	501(C)(3)	12,419				GENERAL SUPPORT
UNITED WAY OF WASHTENAW COUNTY 2305 PLATT ROAD ANN ARBOR, MI 48104	38-1951024	501(C)(3)	77,502				GENERAL SUPPORT

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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE WOMEN'S CENTER OF SOUTHEASTERN MICHIGAN 501 S MAPLE ROAD ANN ARBOR, MI 48103	36-4338567	501(C)(3)	10,000				GENERAL SUPPORT
CLEARY UNIVERSITY 3750 CLEARLY DRIVE HOWELL, MI 48883	38-1393811	501(C)(3)	25,000				GENERAL SUPPORT

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

2017

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

Employer identification number

38-1428955

Name of the organization
NSF INTERNATIONAL

Part I Questions Regarding Compensation

	Yes	No									
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <table border="0"> <tr> <td>☐ First-class or charter travel</td> <td>☒ Housing allowance or residence for personal use</td> </tr> <tr> <td>☒ Travel for companions</td> <td>☐ Payments for business use of personal residence</td> </tr> <tr> <td>☒ Tax indemnification and gross-up payments</td> <td>☐ Health or social club dues or initiation fees</td> </tr> <tr> <td>☐ Discretionary spending account</td> <td>☒ Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	☐ First-class or charter travel	☒ Housing allowance or residence for personal use	☒ Travel for companions	☐ Payments for business use of personal residence	☒ Tax indemnification and gross-up payments	☐ Health or social club dues or initiation fees	☐ Discretionary spending account	☒ Personal services (e.g., maid, chauffeur, chef)			
☐ First-class or charter travel	☒ Housing allowance or residence for personal use										
☒ Travel for companions	☐ Payments for business use of personal residence										
☒ Tax indemnification and gross-up payments	☐ Health or social club dues or initiation fees										
☐ Discretionary spending account	☒ Personal services (e.g., maid, chauffeur, chef)										
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain.	1b Yes										
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2 Yes										
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <table border="0"> <tr> <td>☐ Compensation committee</td> <td>☐ Written employment contract</td> </tr> <tr> <td>☐ Independent compensation consultant</td> <td>☐ Compensation survey or study</td> </tr> <tr> <td>☐ Form 990 of other organizations</td> <td>☒ Approval by the board or compensation committee</td> </tr> </table>	☐ Compensation committee	☐ Written employment contract	☐ Independent compensation consultant	☐ Compensation survey or study	☐ Form 990 of other organizations	☒ Approval by the board or compensation committee					
☐ Compensation committee	☐ Written employment contract										
☐ Independent compensation consultant	☐ Compensation survey or study										
☐ Form 990 of other organizations	☒ Approval by the board or compensation committee										
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization: <table border="0"> <tr> <td>a Receive a severance payment or change-of-control payment?</td> <td>4a Yes</td> <td></td> </tr> <tr> <td>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</td> <td>4b Yes</td> <td></td> </tr> <tr> <td>c Participate in, or receive payment from, an equity-based compensation arrangement?</td> <td>4c</td> <td>No</td> </tr> </table> If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	a Receive a severance payment or change-of-control payment?	4a Yes		b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b Yes		c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No		
a Receive a severance payment or change-of-control payment?	4a Yes										
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b Yes										
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No									
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.											
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: <table border="0"> <tr> <td>a The organization?</td> <td>5a</td> <td>No</td> </tr> <tr> <td>b Any related organization?</td> <td>5b</td> <td>No</td> </tr> </table> If "Yes," on line 5a or 5b, describe in Part III.	a The organization?	5a	No	b Any related organization?	5b	No					
a The organization?	5a	No									
b Any related organization?	5b	No									
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: <table border="0"> <tr> <td>a The organization?</td> <td>6a</td> <td>No</td> </tr> <tr> <td>b Any related organization?</td> <td>6b</td> <td>No</td> </tr> </table> If "Yes," on line 6a or 6b, describe in Part III.	a The organization?	6a	No	b Any related organization?	6b	No					
a The organization?	6a	No									
b Any related organization?	6b	No									
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7 Yes										
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	No									
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9										

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

See Additional Data Table

[illegible]

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
PART I, LINE 1A	SPOUSE AIRFARE BENEFIT WAS PROVIDED TO THREE BOARD MEMBERS. THE AMOUNTS WERE INCLUDED IN TAXABLE COMPENSATION ON FORM 1099-MISC. HOUSING ALLOWANCE, PERSONAL SERVICE AND GROSS-UP BENEFITS WERE PROVIDED TO ONE HIGHLY COMPENSATED EMPLOYEE WORKING ABROAD. THE AMOUNTS WERE INCLUDED IN TAXABLE COMPENSATION ON FORM W-2.
PART I, LINES 4A-B	CLIFTON J. MCLELLAN RECEIVED SEVERANCE COMPENSATION IN THE AMOUNT OF \$157,675. GREGORY BROWN RECEIVED SEVERANCE COMPENSATION IN THE AMOUNT OF \$39,410.
PART I, LINES 4A-B	CERTAIN SENIOR MANAGEMENT EMPLOYEES ARE PROVIDED WITH THE OPPORTUNITY TO PARTICIPATE IN A NON-QUALIFIED DEFERRED COMPENSATION PLAN ORGANIZED UNDER IRC SECTION 457(F). THE FOLLOWING EMPLOYEES RECEIVED PAYMENTS DURING 2017: KEVAN LAWLOR - \$453,701; CLIFTON MCLELLAN - \$277,182.
PART I, LINE 7	CERTAIN EXECUTIVES AND EMPLOYEES ARE ELIGIBLE FOR PARTICIPATION IN THE ANNUAL BONUS PLAN. THE PLAN PROVIDES PARTICIPANTS WITH THE OPPORTUNITY TO RECEIVE A BONUS BASED ON ATTAINMENT OF THE PREVIOUSLY ESTABLISHED INDIVIDUAL, BUSINESS UNIT AND CORPORATE GOALS. THE COMPANY HAS A LONG-TERM INCENTIVE PLAN (LTIP) WHEREBY CERTAIN MANAGEMENT IS AWARDED DEFERRED COMPENSATION BASED ON SEVERAL CRITERIA. THE AMOUNTS AWARDED EACH YEAR ARE REPORTED ON FORM 990 AS "RETIREMENT AND DEFERRED COMPENSATION." BEGINNING YEAR ONE (TWO YEARS PRIOR TO 1/1/2018) AFTER THE AMOUNTS ARE AWARDED EFFECTIVE JANUARY 1ST IN THE YEAR AFTER A PLAN YEAR, THEY ARE HELD FOR A PARTICIPANT AND BEGIN TO VEST OVER A THREE-YEAR PERIOD. THE VESTED AMOUNTS ARE INCLUDED IN THE "BONUS AND INCENTIVE COMPENSATION" ON SCHEDULE J, FORM 990. UNDER THE TERMS OF THE PLAN, SUCH LONG-TERM INCENTIVE COMPENSATION WILL BE CONSISTENTLY REPORTED FOR FORM 990 PURPOSES TWICE WHEN AWARDED AND WHEN VESTED.

Additional Data

Software ID:
Software Version:
EIN: 38-1428955
Name: NSF INTERNATIONAL

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1KEVAN P LAWLOR PRESIDENT, CEO	(i)	625,718	1,579,120	0	665,474	20,638	2,890,950	704,868
	(ii)	0	0	0	0	0	0	0
1LISA A BELL VP, HUMAN RESOURCES (END 11/17)	(i)	216,439	157,562	0	18,972	16,936	409,909	0
	(ii)	0	0	0	0	0	0	0
2LORELLE BESTERVELT EXECUTIVE VP, CTO	(i)	452,628	417,497	0	442,646	12,722	1,325,493	117,033
	(ii)	0	0	0	0	0	0	0
3THOMAS CHESTNUT SR VP, GLOBAL FOOD DIVISION	(i)	0	0	0	0	0	0	0
	(ii)	358,799	354,454	0	197,213	17,554	928,020	89,867
4ELIZABETH JONES VP, MARKETING	(i)	304,700	260,486	0	171,070	11,107	747,363	83,600
	(ii)	0	0	0	0	0	0	0
5CHANDANA KATHURIA SR VP, CIO	(i)	311,710	314,987	0	267,901	19,970	914,568	83,967
	(ii)	0	0	0	0	0	0	0
6KURTIS KNEEN VP, GLOBAL LABS	(i)	262,582	161,904	0	214,041	15,232	653,759	38,200
	(ii)	0	0	0	0	0	0	0
7CLIFTON MCLELLAN VP, WATER SYSTEMS (END 5/17)	(i)	116,151	793,974	157,675	4,106	4,038	1,075,944	299,489
	(ii)	0	0	0	0	0	0	0
8ROBERT PIETROWSKI VP, GLOBAL HEALTH SCI DIV END 5/17	(i)	0	0	0	0	0	0	0
	(ii)	56,238	388,503	18,144	0	0	462,885	201,151
9MICHAEL P WALSH VP, CFO	(i)	301,794	244,497	0	200,812	18,922	766,025	69,600
	(ii)	0	0	0	0	0	0	0
10ELIAS SALEMBIER SENIOR DIRECTOR - FINANCE	(i)	160,803	32,320	0	5,736	17,896	216,755	0
	(ii)	0	0	0	0	0	0	0
11CHERYL A LUTHER GM - DIETARY SUPPLEMENTS	(i)	173,562	30,600	0	4,964	10,616	219,742	0
	(ii)	0	0	0	0	0	0	0
12GREGORY V BROWN GLOB MANAG DIR, SEAFOOD (END 6/17)	(i)	246,710	45,150	39,410	3,974	1,562	336,806	0
	(ii)	0	0	0	0	0	0	0
13IAN M HAYNES M D GLOBAL BUSINESS DEVELOPMENT	(i)	195,166	37,870	0	6,855	15,573	255,464	0
	(ii)	0	0	0	0	0	0	0
14STANLEY S HAZAN SR DIRICTOR, REGULAR AFFAIRS	(i)	148,753	46,750	0	4,955	33,866	234,324	0
	(ii)	0	0	0	0	0	0	0
15JAMES LEWIS FORMER OFFICER	(i)	0	0	126,769	0	0	126,769	0
	(ii)	0	0	0	0	0	0	0
16DAVID G RICHARDSON FORMER OFFICER	(i)	0	0	0	0	0	0	0
	(ii)	0	430,257	0	0	0	430,257	140,746

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service
Name of the organization
NSF INTERNATIONAL

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.
▶ Attach to Form 990.
▶ Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number
38-1428955

Part I Bond Issues											
(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A MICHIGAN STRATEGIC FUND	52-1417332	NONEXXXXX	09-06-2013	22,250,000	REFUND BONDS ISSUED 2/26/04 & 12/31/07, LAND PURCHASE FOR FUTURE EXPANSION		X		X		X

Part II		Proceeds							
		A		B		C		D	
1	Amount of bonds retired	7,880,214							
2	Amount of bonds legally defeased								
3	Total proceeds of issue	22,250,000							
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds	117,942							
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	3,520,000							
11	Other spent proceeds	18,612,059							
12	Other unspent proceeds								
13	Year of substantial completion	2013							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue?	X							
15	Were the bonds issued as part of an advance refunding issue?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use									
		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X						

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?	X							
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X							
c Are there any research agreements that may result in private business use of bond-financed property?		X						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶	0 %							
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶	0 %							
6 Total of lines 4 and 5	0 %							
7 Does the bond issue meet the private security or payment test? . . .		X						
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of . .								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		X						

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate? . . .		X						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?	X							
b Exception to rebate?		X						
c No rebate due?		X						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?	X							
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	X							
b Name of provider	WELLS FARGO NA							
c Term of hedge	1200 0000000000 %							
d Was the hedge superintegrated?		X						
e Was the hedge terminated?		X						

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the requirements of section 148?		X						

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?		X						

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization
NSF INTERNATIONAL

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2017

Open to Public Inspection

Employer identification number

38-1428955

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 2	NSF INTERNATIONAL COMMENCED ON 1/1/2017 A NEW CERTIFICATION PROGRAM OF AUTO PARTS SOLD TO CONSUMERS IN THE AFTER-MARKET THE PROGRAM REVENUE IS INSIGNIFICANT IN COMPARISON TO THE TOTAL REVENUE AND NOT EXPECTED TO BE A SIGNIFICANT PORTION OF OUR BUSINESS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	PRIOR TO THE FILING WITH THE IRS, A COMPLETED COPY OF THE CURRENT YEAR FORM 990 IS POSTED ON THE BOARD OF DIRECTOR'S WEBSITE ALL BOARD MEMBERS HAVE ACCESS TO THE FORM 990 AND CAN DOWNLOAD AND REVIEW THE DOCUMENT THE AUDIT/FINANCE COMMITTEE (COMPRISED OF MEMBERS OF THE BOARD OF DIRECTORS) IS RESPONSIBLE FOR MONITORING THIS PROCESS AND FOR CONFIRMING THAT FORM 990 IS POSTED TO THE WEBSITE IN A TIMELY MANNER

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	EACH YEAR, ALL OFFICERS AND DIRECTORS MUST STATE IN WRITING ANY POTENTIAL CONFLICTS OF INTEREST THAT THEY MIGHT HAVE. THESE DOCUMENTS ARE KEPT AS A PART OF THE PERMANENT RECORDS AND ALL POTENTIAL CONFLICTS ARE REVIEWED BY THE HUMAN RESOURCES TEAM. IN ADDITION, ALL EMPLOYEES ARE REQUIRED TO UNDERGO AN ONLINE TRAINING COURSE ANNUALLY. AS PART OF THIS TRAINING COURSE, ALL EMPLOYEES ARE REMINDED OF THE CONFLICT OF INTEREST POLICY, AND ARE REQUIRED TO REPORT ANY CONFLICTS OF INTEREST TO THE HUMAN RESOURCES DEPARTMENT.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	EACH YEAR DURING THE JANUARY BOARD MEETING AND AFTER THE PUBLICATION OF THE PRIOR YEAR FINANCIAL RESULTS, THE COMPENSATION COMMITTEE (COMPRISED OF MEMBERS OF THE BOARD OF DIRECTORS) REVIEWS THE COMPENSATION OF ALL CORPORATE OFFICERS AND BOARD MEMBERS AND RECOMMENDS ADJUSTMENTS TO COMPENSATION AS NECESSARY THE FULL BOARD OF DIRECTORS REVIEWS THE RECOMMENDATIONS OF THE COMPENSATION COMMITTEE AND APPROVES ADJUSTMENTS TO COMPENSATION, IF DEEMED APPROPRIATE THIS COMPENSATION REVIEW/RECOMMENDATION/APPROVAL PROCESS WAS LAST DONE IN JANUARY 2017 IN ADDITION, COMPENSATION STUDIES ARE PERFORMED PERIODICALLY BY AN OUTSIDE FIRM TO ASSIST THE COMPENSATION COMMITTEE IN THE REVIEW OF OFFICER'S COMPENSATION THE LAST COMPENSATION STUDY WAS PERFORMED IN JUNE 2016

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNANCE DOCUMENTATION, THE CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE ALL AVAILABLE TO THE PUBLIC UPON REQUEST

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	SUBCONTRACT LABOR FEES PROGRAM SERVICE EXPENSES 15,689,415 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 15,689,415 PURCHASED SERVICES PROGRAM SERVICE EXPENSES 14,952,350 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 14,952,350

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	GAAP ADJUSTMENTS FOR FOREIGN SUBS 501,611

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 8	DURING THE PREPARATION OF THE 2017 FORM 990, IT WAS DISCOVERED THAT THE FOLLOWING AMOUNTS WERE ERRONEOUSLY OMITTED FROM THE 2016 FORM 990 FOREIGN CURRENCY TRANSACTIONS \$1,339,184 FOREIGN CURRENCY TRANSLATION \$237,134 ASSET IMPAIRMENT \$5,784,204 SEVERANCE AND SERP EXPENSE \$2,745,538 CORPORATE INCOME TAX \$680,472 WITHHOLDING TAX \$668,259 STATE INCOME TAX \$2 2 95 GAAP ADJUSTMENTS \$2,044,453 TOTAL \$13,501,539

efile GRAPHIC print - DO NOT PROCESS		As Filed Data -		DLN: 93493318049758	
SCHEDULE R (Form 990)	Related Organizations and Unrelated Partnerships				OMB No 1545-0047
					2017
	▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ▶ Attach to Form 990. ▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990 .				Open to Public Inspection
Department of the Treasury Internal Revenue Service Name of the organization NSF INTERNATIONAL				Employer identification number 38-1428955	

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.							
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

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

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii)annuities, (iii) royalties, or(iv) rent from a controlled entity

1a

No

b Gift, grant, or capital contribution to related organization(s)

1b

No

c Gift, grant, or capital contribution from related organization(s)

1c

No

d Loans or loan guarantees to or for related organization(s)

1d

Yes

e Loans or loan guarantees by related organization(s)

1e

No

f Dividends from related organization(s)

1f

Yes

g Sale of assets to related organization(s)

1g

No

h Purchase of assets from related organization(s)

1h

No

i Exchange of assets with related organization(s)

1i

No

j Lease of facilities, equipment, or other assets to related organization(s)

1j

No

k Lease of facilities, equipment, or other assets from related organization(s)

1k

No

l Performance of services or membership or fundraising solicitations for related organization(s)

1l

Yes

m Performance of services or membership or fundraising solicitations by related organization(s)

1m

No

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

1n

No

o Sharing of paid employees with related organization(s)

1o

No

p Reimbursement paid to related organization(s) for expenses

1p

No

q Reimbursement paid by related organization(s) for expenses

1q

No

r Other transfer of cash or property to related organization(s)

1r

No

s Other transfer of cash or property from related organization(s)

1s

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds
See Additional Data Table

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Schedule R (Form 990) 2017

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

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Additional Data

Software ID:
Software Version:
EIN: 38-1428955
Name: NSF INTERNATIONAL

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
NSF EURO CONSULTANTS SA AVENUE PASTEUR 21 WAVRE 1300 BE	FOOD SAFETY AUDITS AND CONSULTING	BE	NSF INTERNATIONAL UK LTD	C		13,165,920	100 000 %		No
FIELD QUALITY CONTROL BVBA OUDAAN 15 ANTWERPEN 2000 BE	FOOD SAFETY AUDITS AND CONSULTING	BE	THIRD PARTY	C		64,376	80 000 %		No
QUALITY MARKETING SOLUTIONS BVBA SINT-LAUREISSTRAAT 83 ANTWERPEN 2018 BE	FOOD SAFETY AUDITS AND CONSULTING	BE	NSF EURO CONSULTANTS SA	C		76,258	61 570 %		No
QURRENT CONSULTING BVBA SINT-LAUREISSTRAAT 83 ANTWERPEN 2018 BE	FOOD SAFETY AUDITS AND CONSULTING	BE	NSF EURO CONSULTANTS SA	C			100 000 %		No
NSF BIOENSAIOS - PRESTAO DE SERVIOS DE ANLISES E CERTIFICAO LTDA PALERMO STREET 257 VIAMAO VILA SANTA ISABEL RS BR	ISO 9000/1400 AND REGISTRATION SERVICES	BR	NSF INTERNATIONAL STRATEGIC REGISTRATIONS LTD	C		5,695,058	100 000 %		No
EC BUL LTD 87 KNIAZ ALEKSANDAR DONDUKOV BLVD SOFIA 1527 BU	FOOD SAFETY AUDITS AND CONSULTING	BU	NSF EURO CONSULTANTS SA	C		542,716	80 000 %		No
AGROEXPERT INC 1 PLACE VILLE MARIE SUITE 2001 MONTREAL, QC H3B 2C4 CA	FOOD SAFETY AUDITS AND CONSULTING	CA	NSF EURO CONSULTANTS SA	C			100 000 %		No
AQA CANADA INC 125 CHANCELLORS WAY GUELPH, ONTARIO CA	ISO 9000/14000 SERVICES	CA	AQA INTERNATIONAL LLC	C			100 000 %		No
NORTH SHORE MANAGEMENT SYSTEMS INC 125 CHANCELLORS WAY GUELPH, ONTARIO CA	ISO 9000/14000 SERVICES	CA	NS WINDSOR HOLDCO INC	C			100 000 %		No
NS WINDSOR HOLDCO INC 125 CHANCELLORS WAY GUELPH, ONTARIO CA	FOOD SAFETY AND ISO 9000/14000	CA	AQA HOLDINGS LLC	C			100 000 %		No
NSF CANADA 125 CHANCELLORS WAY GUELPH, ONTARIO CA	EDUCATION AND TRAINING	CA	NSF INTERNATIONAL	C		69,023,008	100 000 %		No
NSF CANADA AGRICULTURAL CERTIFICATION COMPANY 125 CHANCELLORS WAY GUELPH, ONTARIO CA	EDUCATION AND TRAINING	CA	NSF INTERNATIONAL	C			100 000 %		No
NSF INTERNATIONAL STRATEGIC REGISTRATIONS CANADA COMPANY 125 CHANCELLORS WAY GUELPH, ONTARIO CA	EDUCATION AND TRAINING	CA	NSF INTERNATIONAL STRATEGIC REGISTRATIONS LTD	C			100 000 %		No
NSF SHANGHAI CO LTD NO 258 WUYI ROAD 4TH FLOOR BLDG SHANGHAI CH	PRODUCT CERTIFICATION FOR WATER AND FOOD	CH	NSF INTERNATIONAL	C		6,682,186	80 000 %		No
NSF SHANGHAI TESTING TECHNOLOGY CO LTD 1188 LIAN HANG ROAD INTELLIGENCE V SHANGHAI CH	LAB TESTING	CH	NSF INTERNATIONAL	C		2,454,923	100 000 %		No

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust									
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h)	(i)	
							Percentage ownership	Section 512 (b)(13) controlled entity?	Yes
NSF INTERNATIONAL CHILE SA AV IV CENTENARIO 92 757-0015 LAS CONDES SANTIAGO CI	FOOD SAFETY AUDITS AND CONSULTING	CI	NSF INTERNATIONAL FOOD SAFETY LLC	C		1,851,539	100 000 %		No
NSF COSTA RICA SA EDIFICIO TERAL II TERCER PISO AVEN SAN JOSE CS	FOOD SAFETY AUDITS AND CONSULTING	CS	NSF AGRICULTURE LLC	C		928,397	100 000 %		No
NSF ECUADOR SA KM 15 VA SAMBORONDON SAMBORONDON EC	FOOD SAFETY AUDITS AND CONSULTING	EC	NSF AGRICULTURE LLC	C		254,488	99 000 %		No
NSF FRANCE AVENUE DU PRESIDENT KENNEDY 65 LILLE 59000 BE	FOOD SAFETY AUDITS AND CONSULTING	FR	NSF EURO CONSULTANTS SA	C		760,680	100 000 %		No
NSF CERTIFICATION GERMANY GMBH AMSELWEG 5 RHEDAWIDENBRUCK GM	FOOD SAFETY AND ISO 9000/14000	GM	NSF ERDMANN ANALYTICS GMBH	C		189,892	100 000 %		No
NSF DEUTSCHLAND GMBH AMSELWEG 5 RHEDAWIDENBRUCK GM	FOOD SAFETY AND ISO 9000/14000	GM	NSF INTERNATIONAL STRATEGIC REGISTRATIONS LTD	C		61,177,725	100 000 %		No
NSF ERDMANN ANALYTICS GMBH AMSELWEG 5 RHEDAWIDENBRUCK GM	FOOD SAFETY AND ISO 9000/14000	GM	NSF DEUTSCHLAND GMBH	C		25,930,405	100 000 %		No
INGENIERIE CONSEIL AUDIT FORMATION ET DIVERS (ICAF) SARL RESIDENCE FODIO 25 BOX 898 ABIDJA ANGRE EME TRANCHE IC	FOOD SAFETY AUDITS AND CONSULTING	IC	NSF EURO CONSULTANTS SA	C		100,316	60 000 %		No
NSF ITALY SRL CORSO ROMA 45 BORGOMANERO NOVARA IT	FOOD SAFETY AND ISO 9000/14000	IT	NSF SAFETY & QUALITY UK LTD	C			50 000 %		No
NSF KOREA LLC 82-13 SUSAN BUILDING 5TH FLOOR NO SEOUL KS	FOOD SAFETY AUDITS AND CONSULTING	KS	NSF INTERNATIONAL FOOD SAFETY LLC	C		1,074,461	100 000 %		No
EURO CONSULTANTS SARLAU ZONE VILLA 1065 GROUP HOCINE SALE EL JADIDA MC	FOOD SAFETY AUDITS AND CONSULTING	MC	NSF EURO CONSULTANTS SA	C			100 000 %		No
SHOPPERS ANON LTD 12 QUEEN STREET BRITOMART AUCKLAND 1010 NZ	FOOD SAFETY AUDITS AND CONSULTING	NZ	NSF INTERNATIONAL FOOD SAFETY LLC	C		172,055	100 000 %		No
THE FOOD AUDITOR LTD 12 QUEEN STREET BRITOMART AUCKLAND 1010 NZ	FOOD SAFETY AUDITS AND CONSULTING	NZ	NSF INTERNATIONAL FOOD SAFETY LLC	C		78,135	100 000 %		No
THE NEW ZEALAND SCHOOL OF FOOD HYGIENE LTD 12 QUEEN STREET BRITOMART AUCKLAND 1010 NZ	FOOD SAFETY AUDITS AND CONSULTING	NZ	NSF INTERNATIONAL FOOD SAFETY LLC	C		1,277,791	100 000 %		No
NSF ENVIROLAB SAC AV LA MARINA NO 3035 SAN MIGUEL PE	FOOD SAFETY AUDITS AND CONSULTING	PE	NSF AGRICULTURE LLC	C		9,089,659	100 000 %		No

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust									
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
NSF INASSA SAC AV LA MARINA NO 3035 SAN MIGUEL PE	FOOD SAFETY AUDITS AND CONSULTING	PE	NSF AGRICULTURE LLC	C		6,692,467	100 000 %		No
NSF PERU SAC AV LA MARINA NO 3035 SAN MIGUEL PE	FOOD SAFETY AUDITS AND CONSULTING	PE	NSF AGRICULTURE LLC	C		109,575	100 000 %		No
NSF SERVISANEA SAC AV LA MARINA NO 3035 SAN MIGUEL PE	FOOD SAFETY AUDITS AND CONSULTING	PE	NSF AGRICULTURE LLC	C		616,791	99 780 %		No
EURO CONSULTANTS POLSKA SP Z OO LONDYNSKA 16 M 1 WARSAW 03-921 PO	FOOD SAFETY AUDITS AND CONSULTING	PO	NSF EURO CONSULTANTS SA	C		14,693	70 000 %		No
SC QUALITY RESPONSIBLE R SRL STREET COMPASULUI 8 ETAGE 1 BUCAREST 061471 RO	FOOD SAFETY AUDITS AND CONSULTING	RO	EC BUL LTD	C		172,318	100 000 %		No
NSF - AFRICA (PROPRIETARY) LTD 21 ELECTRON AVE TECHNOPARK UNIT F4 NORTHERN CAPE SF	FOOD SAFETY AUDITS AND CONSULTING	SF	NSF SAFETY & QUALITY UK LTD	C		806,474	100 000 %		No
NSF-DBA (PTY) LTD PO BOX 2440 FAERIE GLEN SF	FOOD SAFETY AUDITS AND CONSULTING	SF	NSF HEALTH SCIENCES UK LTD	C			100 000 %		No
NSF HEALTH AND SAFETY SPAIN SA AVDA CARLOS III 1 EL PARADOR ALMERIA SP	FOOD SAFETY AUDITS AND CONSULTING	SP	NSF SAFETY & QUALITY UK LTD	C		634,351	100 000 %		No
EURO CONSULTANTS IT-ECIT SARL IMEUBLE TAMAYOUZ BUR H1 CENTRE URBA TUNIS 1082 TS	FOOD SAFETY AUDITS AND CONSULTING	TS	NSF EURO CONSULTANTS SA	C		208,217	100 000 %		No
EUROLAB SARL RUE SAAD ZAGHLOUL 14 ARIANA 2080 TS	FOOD SAFETY AUDITS AND CONSULTING	TS	NSF EURO CONSULTANTS SA	C			100 000 %		No
QUASAR CONSULTING SA RUE SAAD ZAGHLOUL 14 ARIANA 2080 TS	FOOD SAFETY AUDITS AND CONSULTING	TS	NSF EURO CONSULTANTS SA	C		103,206	99 990 %		No
BUILDCERT LTD 30 FERN CLOSE PEN-Y-FAN INDUSTRIAL OAKDALE GWENT WALES UK	WATER SAFETY CERTIFICATION AND CONSULTING	UK	NSF INTERNATIONAL	C		591,343	100 000 %		No
CMI (ISSUE PREDICTION) LTD 23 HANBOROUGH PARK LONG HANBOROUGH OXFORD UK	FOOD SAFETY AUDITS AND CONSULTING	UK	NSF SAFETY & QUALITY UK LTD	C			100 000 %		No
FOOD HYGIENE BUREAU LIMITED 23 HANBOROUGH PARK LONG HANBOROUGH OXFORD UK	FOOD SAFETY AUDITS AND CONSULTING	UK	NSF SAFETY & QUALITY UK LTD	C			100 000 %		No
INTEGRA FOOD SECURE LIMITED 23 HANBOROUGH PARK LONG HANBOROUGH OXFORD UK	FOOD SAFETY AUDITS AND CONSULTING	UK	NSF AGRICULTURE UK LTD	C		211,743	100 000 %		No

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust									
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h)	(i)	
							Percentage ownership	Section 512 (b)(13) controlled entity?	Yes
NSF AGRICULTURE UK LTD 23 HANBOROUGH PARK LONG HANBOROUGH OXFORD UK	FOOD SAFETY AUDITS AND CONSULTING	UK	NSF SAFETY & QUALITY UK LTD	C		7,134,609	100 000 %		No
NSF CERTIFICATION UK LTD 23 HANBOROUGH PARK LONG HANBOROUGH OXFORD UK	FOOD SAFETY AUDITS AND CONSULTING	UK	NSF SAFETY & QUALITY UK LTD	C		1,176,696	100 000 %		No
NSF HEALTH SCIENCES UK LTD 23 HANBOROUGH PARK LONG HANBOROUGH OXFORD UK	FOOD SAFETY AUDITS AND CONSULTING	UK	NSF INTERNATIONAL UK LTD	C		4,835,154	100 000 %		No
NSF INTERNATIONAL UK LIMITED 23 HANBOROUGH PARK LONG HANBOROUGH OXFORD UK	FOOD SAFETY AUDITS AND CONSULTING	UK	NSF INTERNATIONAL FOOD SAFETY LLC	C		47,266,052	100 000 %		No
NSF KNIGHT LTD 23 HANBOROUGH PARK LONG HANBOROUGH OXFORD UK	FOOD SAFETY AUDITS AND CONSULTING	UK	NSF SAFETY & QUALITY UK LTD	C		469,404	100 000 %		No
NSF SAFETY AND QUALITY UK LTD 23 HANBOROUGH PARK LONG HANBOROUGH OXFORD UK	FOOD SAFETY AUDITS AND CONSULTING	UK	NSF INTERNATIONAL UK LTD	C		15,548,752	100 000 %		No
NSF WALES LTD 30 FERN CLOSE PEN-Y-FAN INDUSTRIAL OAKDALE GWENT WALES UK	WATER SAFETY CERTIFICATION AND CONSULTING	UK	NSF INTERNATIONAL	C		15,687,824	100 000 %		No
NSF HEALTH SCIENCES LLC 789 N DIXBORO ROAD ANN ARBOR, MI 48105 26-2838494	FOOD SAFETY AUDITS AND CONSULTING	MI	NSF INTERNATIONAL HOLDINGS	C		105,791,827	100 000 %		No
NSF INTERNATIONAL FOOD SAFETY LLC 789 N DIXBORO ROAD ANN ARBOR, MI 48105 20-2009916	FOOD SAFETY AUDITS AND CONSULTING	MI	NSF INTERNATIONAL HOLDINGS	C	1,579,933	219,895,764	100 000 %		No
NSF INTERNATIONAL HOLDINGS 789 N DIXBORO ROAD ANN ARBOR, MI 48105 20-2031751	HOLDING COMPANY	MI	NSF INTERNATIONAL	C		156,534,584	100 000 %		No
NSF INTERNATIONAL STRATEGIC REGISTRATIONS CANADA LTD 789 N DIXBORO ROAD ANN ARBOR, MI 48105 20-0014596	TESTING AND CERTIFICATION SERVICES	MI	NSF INTERNATIONAL STRATEGIC REGISTRATION LTD	C	1,979,208	70,765,334	100 000 %		No
NSF INTERNATIONAL STRATEGIC REGISTRATIONS LTD 789 N DIXBORO ROAD ANN ARBOR, MI 48105 38-3278080	ISO 9000/14000 REGISTRATION SERVICES	MI	NSF INTERNATIONAL HOLDINGS	C	503,530	122,482,655	100 000 %		No
NSF SEAFOOD INC (FKA SUREFISH INC) 3900 W 15TH PL BLDG C-10 SEATTLE, WA 981191628 91-1561182	FOOD SAFETY AUDITS AND CONSULTING	WA	NSF INTERNATIONAL FOOD SAFETY LLC	C		9,715,463	100 000 %		No
QAI INC 9191 TOWNE CENTER DRIVE SUITE 200 SAN DIEGO, CA 92122 33-0615965	ORGANIC FOOD CERTIFICATION	CA	NSF ACQUISITION 2 LLC	C	1,619,399	27,700,022	100 000 %		No
NSF COLOMBIA SAS CALLE 26 NO 68C 61 OFICINA 527 BOGOTA CO	AUDITING AND TRAINING FOOD SAFETY SERVICES	CO	NSF INTERNATIONAL FOOD SAFETY LLC	C		151,377	100 000 %		No

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								Yes	No
NSF SAUDI ARABIA OFFICE NO 203 SADA BUSINESS CENTRE RIYADH SA	INSPECTION AND TESTING OF FOOD AND WATER	SA	NSF SAFETY & QUALITY UK LTD	C		133,318	100 000 %		No
NSF CERTIFICATION IRELAND 62 PLASSEY VILLAGE NEWCASTLE CAST LIMERICK V94KF6Y EI	CERTIFICATION FOR MEDICAL DEVICES IN- VITRO DIAGNOSTICS	EI	NSF INTERNATIONAL UK LTD	C		120	100 000 %		No
NSF VIETNAM LTD CO 220 LE THANH TON STREET DISTRICT 1 HO CHI MINH CITY VM	AUDIT, INSPECTION, CONSUTING AND TRAINING	VM	NSF ASIA PACIFIC CO LTD	C		105,446	100 000 %		No
NSF AUSTRALIA LEVEL 33 264 GEORGE STREET SYDNEY NSW 2000 AU	FOOD SAFETY AUDITING AND CONSULTING	AU	THE NEW ZEALAND SCHOOL OF FOOD HYGIENE LTD	C		161,756	100 000 %		No
PROSYSTEM DO BRASIL LTDA AV RIO BRANCO 01 SL 1201 20090-00 RIO DE JANEIRO BR	CONSULTING AND SERVICE COMPANY IN MEDICAL DEVICES	BR	NSF PROSYSTEM GMBH	C		3,737	100 000 %		No
PROSYSTEM CONSULTING SCHWEIZ AG WENGER PLATTNER SEESTRASSE 398700 KSNACHT SZ	CONSULTING AND SERVICE COMPANY IN MEDICAL DEVICES	SZ	NSF PROSYSTEM GMBH	C		216,820	100 000 %		No
FWM LABOR GMBH AMSELWEG 5 RHEDAWIDENBRUCK 33378 GM	TESTING AND CERTIFICATION SERVICES	GM	NSF ERDMANN ANALYTICS GMBH	C		405	100 000 %		No
CIBUS BIOTECH GMBH AMSELWEG 5 RHEDAWIDENBRUCK 33378 GM	TESTING AND CERTIFICATION SERVICES	GM	NSF ERDMANN ANALYTICS GMBH	C		311,642	100 000 %		No
NSF PROSYSTEM AG BEIM STROHHAUSE 17 HAMBURG 20097 GM	TESTING AND CERTIFICATION SERVICES	GM	NSF ERDMANN ANALYTICS GMBH	C		15,791,039	100 000 %		No

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
NSF DEUTSCHLAND GMBH	D	34,878,487	
NSF SHANGHAI CO LTD	F	1,162,929	COST
NSF HEALTH SCIENCES LLC	L	5,886,000	COST
NSF INTERNATIONAL STRATEGIC REGISTRATIONS LTD	L	4,594,800	COST
NSF INTERNATIONAL FOOD SAFETY LLC	L	5,832,000	COST
NSF SEAFOOD INC (FKA SUREFISH INC)	L	332,400	COST
QAI INC	L	1,690,800	COST