As Filed Data efile GRAPHIC print - DO NOT PROCESS DLN: 93492178007239 Short Form OMB No 1545-1150 Form 990EZ Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Open to Do not enter social security numbers on this form as it may be made public. Department of the Public Treasury ▶ Go to www.irs.gov/Form990EZ for the latest information. Inspection Internal Revenue Service A For the 2018 calendar year, or tax year beginning 01-01-2018 and ending 12-31-2018 **B** Check if applicable D Employer identification number C Name of organization ENERGY EDUCATION FOR MICHIGAN INC ☐ Address change 27-1098138 ☐ Name change Number and street (or P O box, if mail is not delivered to street address) Room/suite E Telephone number ☐ Initial return 124 W ALLEGAN STREET SUITE 1610 ☐ Final return/terminated (517) 487-1092 City or town, state or province, country, and ZIP or foreign postal code ☐ Amended return LANSING, MI 48933 F Group Exemption ☐ Application pending Number Check ▶ ☐ If the organization is **not** ☐ Cash ☑ Accrual Other (specify) ▶ **G** Accounting Method required to attach Schedule B (Form 990, 990-EZ, or 990-PF) I Website: ►N/A J Tax-exempt status (check only one) - ☑ 501(c)(3) ☑ ☐ 501(c)() ◀ (insert no) ☐ 4947(a)(1) or ☐ 527 **K** Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Part I Check if the organization used Schedule O to respond to any question in this Part I 1 Contributions, gifts, grants, and similar amounts received 26,910 2 Program service revenue including government fees and contracts 2

Form 990EZ, Part III - Statement of Program Service Accomplishments

| services, as measured by e | s program service accomplishments for each of its three largest program expenses. In a clear and concise manner, describe the services provided, the ed, and other relevant information for each program title. | `(c | Expenses quired for section 501)(3) and 501(c)(4) panizations; optional for others.) |
|----------------------------|---|-----|---|
| POSTSECONDARY STUDENTS | DS FOR THE PURPOSE OF PROVIDING RENEWABLE ANNUAL SCHOLARSHIPS TO ACTIVIELY SEEKING DEGREES IN MICHIGAN SCHOOLS RELATING TO FUTURE R THE OIL AND GAS INDUSTRY 11 SCHOLARSHIPS AWARDED | 28a | 10,500 |
| (Grants \$ 10,500) | If this amount includes foreign grants, check here \ldots . \blacktriangleright | | |

| orm | 990-EZ (2018) | | Page 3 |
|----------------|---|--------------|---------------|
| Pai | rt V Other Information (Note the Schedule A and personal benefit contract statement requirements in t | :he | |
| | instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V | | |
| | | Yes | No |
| 33 | Did the organization engage in any conficent activity not provided to the IDS2 If "Voc." provide a | 103 | 110 |
| 33 | Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O | | No |
| | | ` | 110 |
| 34 | Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy | | |
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| Form | n 990-EZ (2018) | | Page 4 |
|---|--|---------|---------------|
| | | Yes | No |
| 46 | Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to | | |
| | candidates for public office? If "Yes," complete Schedule C, Part I | | No |
| | | | |
| řē | Section 501(c)(3) organizations only All section 501(c)(3) organizations must answer questions 47- 49b and 52, and complete the tables for | ines 50 | and |
| | 51. | | |
| | Check if the organization used Schedule O to respond to any question in this Part VI | | |
| | | Yes | No |
| 47 | Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? | | |
| 47 | If "Yes " complete Schedule (Part II | J | No. |
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Additional Data

Software ID:

Software Version:

EIN: 27-1098138

Name: ENERGY EDUCATION FOR MICHIGAN INC

Form 990EZ, Part III - Statement of Program Service Accomplishments

| services, as measured by expenses | m service accomplishments for each of its three largest program s. In a clear and concise manner, describe the services provided, the other relevant information for each program title. | ` (c | Expenses quired for section 501 ()(3) and 501(c)(4) panizations; optional for others.) |
|-----------------------------------|--|------|--|
| POSTSECONDARY STUDENTS ACTIVIE | THE PURPOSE OF PROVIDING RENEWABLE ANNUAL SCHOLARSHIPS TO LY SEEKING DEGREES IN MICHIGAN SCHOOLS RELATING TO FUTURE L AND GAS INDUSTRY 11 SCHOLARSHIPS AWARDED | 28a | 10,500 |
| (Grants \$ 10,500) | If this amount includes foreign grants, check here \ldots . \blacktriangleright | | |

Form 990EZ, Part III - Statement of Program Service Accomplishments Expenses (Required for section 501 Describe the organization's program service accomplishments for each of its three largest program (c)(3) and 501(c)(4) services as measured by expenses. In a clear and concise manner, describe the services provided the

Expenses (Required for section 501 Describe the organization's program service accomplishments for each of its three largest program (c)(3) and 501(c)(4) corvices as measured by expenses. In a clear and consider manner, describe the corvices provided, the

Form 990EZ, Part III - Statement of Program Service Accomplishments

| number of persons benefited, and other relevant information for each program title. | org | organizations; optional for others.) | | |
|---|-----|---|--|--|
| 30 TO FACILITATE EDUCATIONAL AND SCHOLARSHIP PROGRAMS | 30a | 1,620 | | |

If this amount includes foreign grants, check here . . . • \Box (Grants \$)

DLN: 93492178007239 TY 2018 Transfers Personal Benefits **Contracts Declaration** Name: ENERGY EDUCATION FOR MICHIGAN INC **EIN:** 27-1098138 **Declaration:** THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY, OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT. THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMIUMS, DIRECTLY, OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.

| efil | e GR | APHIC pri | nt - DO NOT PROCESS | As Filed Data - | | DLN: | 93492178007239 |
|----------|----------|--|--|---|--|---|------------------------------|
| | m 99 | OULE A | Complete if the or | ganization is a secti 4947(a)(1) nonexe | s and Public Suppo on 501(c)(3) organization or mpt charitable trust. | | 2018 |
| | | f the Treasury | ► Go to <u>s</u> | | 90 or Form 990-EZ. <u>90</u> for the latest information. | | Open to Public Inspection |
| Nam | e of tl | nie Service he organiza CATION FOR M | I ation MICHIGAN INC | | | Employer identi | |
| | | | | | | 27-1098138 | |
| | rt I | | for Public Charity Statu a private foundation because | | must complete this part.) S | ee instructions. | |
| 1 | | | • | • | lescribed in section 170(b)(1)(| (A)(i). | |
| 2 | | , | • | | edule E (Form 990 or 990-EZ)) | ()(-) | |
| 3 | | | | | bed in section 170(b)(1)(A)(i | iii\ | |
| 4 | | • | · | • | a hospital described in section 1 | - | Enter the hospital's |
| • | Ш | | , and state | ed in conjunction with a | a nospital described in Section 1 | .,,(E)(E)(E)(H)(H). | Enter the hospital's |
| 5 | | (b)(1)(A) | (iv). (Complete Part II) | - | sity owned or operated by a gove | | cribed in section 170 |
| 6 | Ш | , | , | - | scribed in section 170(b)(1)(A | | |
| 7 | ✓ | section 17 | 70(b)(1)(A)(vi). (Complete | Part II) | support from a governmental u | nit or from the gen | eral public described in |
| 8 | | | ity trust described in section | | | | |
| 9 | | | | | (A)(ix) operated in conjunction the name, city, and state of the control of the c | | |
| 10 | | from activition investment 30, 1975 | ties related to its exempt fund t income and unrelated busine See section 509(a)(2). (Cor | ctions—subject to cert ess taxable income (le mplete Part III) | of its support from contribution ain exceptions, and (2) no more as section 511 tax) from busines | than 331/3% of its ses acquired by the | support from gross |
| 11 | | - | | • | public safety See section 509 | | |
| 12 | | more publi | cly supported organizations de | escribed in section 5 0 | nefit of, to perform the functions 09(a)(1) or section 509(a)(2) organization and complete lines | . See section 509 | |
| а | | organizatio | | ppoint or elect a majo | ntrolled by its supported organiz rity of the directors or trustees o | | |
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32 Total program service expenses (add lines 28a through 31a)

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| Section A. Public Sup Calendar year | | | | 1 | Т | ı | |
|---|---------------|------------|-----------------|----------|----------|--|-----------|
| (or fiscal year beginni | ing in) ▶ | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
| Gifts, grants, contribution membership fees receive | ns, and | 13,500 | 11,000 | 61,000 | 41,000 | 26,910 | 153,4 |
| include any "unusual grai | nt ") | 13,300 | 11,000 | 01,000 | 41,000 | 20,310 | 155,4 |
| Tax revenues levied for t | :he | | | | | | |
| organization's benefit and | | | | | | | |
| to or expended on its believe to a services or f | | | | | | | |
| furnished by a governme | | | | | | | |
| the organization without | charge | | | | | | |
| Total. Add lines 1 throug | | 13,500 | 11,000 | 61,000 | 41,000 | 26,910 | 153,4 |
| The portion of total contr | | | | | | | |
| each person (other than governmental unit or pub | | | | | | | |
| supported organization) i | | | | | | | 126,4 |
| line 1 that exceeds 2% o | | | | | | | |
| shown on line 11, column | n (f) | | | | | | |
| Public support. Subtract | t line 5 from | | | | | | 26, |
| line 4 ection B. Total Supp | ort | | _ | | | | <u> </u> |
| Calendar year | ř | (a)2014 | (b) 2015 | (c)2016 | (d)2017 | (e)2018 | (f)Total |
| (or fiscal year beginn | ing in) ▶ | · · | | | | | |
| Amounts from line 4 | | 13,500 | 11,000 | 61,000 | 41,000 | 26,910 | 153,4 |
| Gross income from inte | rest, | | | | | | |
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| Р | art IIII Support Schedule for | Organization | s Described in | Section 509(a | a)(2) | | |
|---------|--|------------------------|----------------------------|----------------------|--------------------|-------------------|----------------|
| | (Complete only if you c | hecked the box | on line 10 of Pa | art I or if the or | ganization failed | | er Part II. If |
| | the organization fails to | qualify under | the tests listed b | pelow, please co | omplete Part II.) |) | |
| Se | ection A. Public Support | | T | Г | | | 1 |
| | Calendar year (or fiscal year beginning in) ▶ | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (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 | | | | | | |
| 4 | under section 513 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 72 | Total. Add lines 1 through 5 Amounts included on lines 1, 2, and | | | | | | |
| / a | 3 received from disqualified persons | | | | | | |
| Ь | 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) | | | | | | |
| Se | ection B. Total Support | | | | | | |
| | Calendar year | (a) 2014 | (b) 2015 | (c) 2016 | (d) 2017 | (e) 2018 | (f) Total |
| 0 | (or fiscal year beginning in) ► Amounts from line 6 | | | . , | | | |
| L0a | Gross income from interest, | | | | | | |
| LUa | dividends, payments received on | | | | | | |
| | securities loans, rents, royalties and | | | | | | |
| | income from similar sources | | | | | | |
| Ь | 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 | | | | | | | |
| | 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 fo | r the organization | ı ı's fırst, second. th | urd, fourth, or fift | h tax vear as a se | ction 501(c)(3) o | rganization. |
| | check this box and stop here | . | , | ,,, | , | | ▶ □ |
| Se | ection C. Computation of Public | Support Perce | ntage | | | | |
| 15 | Public support percentage for 2018 (lin | e 8, column (f) d | ıvıded by line 13, | column (f)) | | 15 | |
| 16 | Public support percentage from 2017 S | ichedule A, Part I | II, line 15 | | | 16 | |
| Se | ection D. Computation of Investi | ment Income | Percentage | | | | |
| 17 | Investment income percentage for 201 | | | lıne 13, column (f |)) | 17 | |
| 18 | Investment income percentage from 2 | 017 Schedule A, | Part III, line 17 | | | 18 | |
| | 331/3% support tests—2018. If the | | • | on line 14, and lir | ne 15 is more than | | e 17 ıs not |
| | more than 33 1/3%, check this box and | | | | | | ▶□ |
| | 33 1/3% support tests—2017. If the | | | | | | |
| J | not more than 33 1/3%, check this box | - | | | • | | ▶ □ |
| 20 | Private foundation. If the organization | - | - | | | | ▶□ |

Schedule A (Form 990 or 990-EZ) 2018 Page 4 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? If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2) 2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below 3a Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination 3b Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below 4a Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations that does not have an IRS determination under sections 4b

| С | 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support | | | |
|----|---|----|---|--|
| | to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes | | | |
| 5a | Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document) | 5a | | |
| | · · · · · · · · · · · · · · · · · · · | | | |
| b | Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? | 5b | | |
| c | Substitutions only. Was the substitution the result of an event beyond the organization's control? | 5с | | |
| 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? If "Yes," provide detail in Part VI . | 6 | | |
| 7 | Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) | | | |
| | Sabstantial Continuation 1. (Co.) Complete variation Schedule 2 (Vollm 550 Gr. 550 L2) | 7 | | |
| R | Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 72 If "Yes " | | 1 | |

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes, complete Part I of Schedule L (Form 990 or 990-EZ)

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9a

Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as

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|------------------|--|
| /I) See | |
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| (B) Current Year | |
| (optional) | |

(B) Current Year

(optional)

Current Year

Schedule A (Form 990 or 990-F7) 2018

Page 6

| | Check here if the organization satisfied the Integral Part Test as a qualifying trust on instructions. All other Type III non-functionally integrated supporting organizations in | | |
|----------|---|----------------|--|
| ~ | | (A) Prior Year | |

| | 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) C (o | | | |
| 1 | Net short-term capital gain | 1 | | | | | |
| 2 | Recoveries of prior-year distributions | 2 | | | | | |
| 3 | Other gross income (see instructions) | 3 | | | | | |

4 5

Add lines 1 through 3

Depreciation and depletion 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) Other expenses (see instructions)

1

5

7

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)

Section B - Minimum Asset Amount

Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)

a Average monthly value of securities **b** Average monthly cash balances c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c)

e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 Acquisition indebtedness applicable to non-exempt use assets Subtract line 2 from line 1d

Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)

5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 035 6

7 Recoveries of prior-year distributions Minimum Asset Amount (add line 7 to line 6)

Section C - Distributable Amount

8

Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1

2

4

Enter greater of line 2 or line 3

5 Income tax imposed in prior year

temporary reduction (see instructions)

instructions)

Minimum asset amount for prior year (from Section B, line 8, Column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

5

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

2 3 4

6

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1

1a

1b

1c 1d

2

3

4

5

6

7

8

1

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(A) Prior Year

b Applied to 2018 distributable amount

c Remainder Subtract lines 4a and 4b from 4

5 Remaining underdistributions for years prior to 2018, 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 2018 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 2019. Add lines 31 and 4c 8 Breakdown of line 7

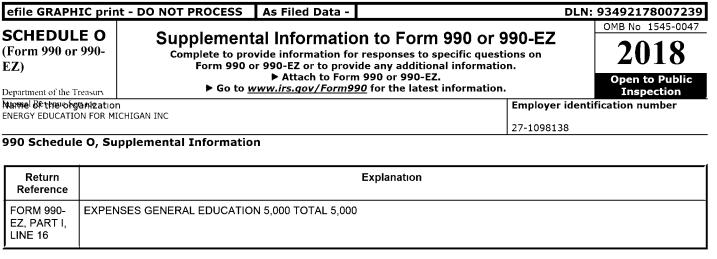
a Excess from 2014. **b** Excess from 2015. c Excess from 2016.

Schedule A (Form 990 or 990-EZ) (2018)

d Excess from 2017. e Excess from 2018.

Schedule A (Form 990 or 990-EZ) 2018 Page 8 Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Part VI 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 THE ORGANIZATION (EEM) IS RECEIVING IN TOTAL, MULTIPLE DONATIONS FOR GENERAL EDUCATION AND SCHOLARSHIP FUNDING FROM PRIVATE FOUNDATIONS AND PUBLIC COMPANIES AND THIS IS NORMAL. THE PERCENTAGE OF SUPPORT IS SUBSTANTIAL AND IS OVER 10% OF THE TOTAL SUPPORT RECEIVED BY SUCH ORGANIZATION. FEM HAS BEEN ORGANIZED OPERATED TO GAIN. PUBLIC/GOVERNMENTAL SUPPORT ON A CONTINUOUS BASIS GENERAL EDUCATION AWARENESS AND SCHOLARSHIP AWARDS ARE BONA FIDE PROGRAMS TO SOLICIT FUNDS. A HIGH PERCENTAGE OF CONTRIBUTIONS IS RECEIVED FROM THE GENERAL PUBLIC. NOT FAMILIES OR INDIVIDUAL MEMEBERS EEM DOES NOT ISSUE DUES BUT THE ORGANIZATION AND ITS GOVERNING BODY HAS THE INTEREST OF APPEALING TO A BROAD AMOUNT OF PEOPLE AND PROVIDE EDUCATIONAL ACTIVITIES 990 Schedule A, Supplemental Information Return Reference Explanation PART II, LINE 17A THE ORGANIZATION (EEM) IS RECEIVING IN TOTAL, MULTIPLE DONATIONS FOR GENERAL EDUCATION AND SCHOLARSHIP FUNDING FROM PRIVATE FOUNDATIONS AND PUBLIC COMPANIES AND THIS IS NORMAL. THE PERCENTAGE OF SUPPORT IS SUBSTANTIAL AND IS OVER 10% OF THE TOTAL SUPPORT RECEIVED BY SUC H ORGANIZATION EEM HAS BEEN ORGANIZED OPERATED TO GAIN PUBLIC/GOVERNMENTAL SUPPORT ON A C ONTINUOUS BASIS GENERAL EDUCATION AWARENESS AND SCHOLARSHIP AWARDS ARE BONA FIDE **PROGRAMS** TO SOLICIT FUNDS A HIGH PERCENTAGE OF CONTRIBUTIONS IS RECEIVED FROM THE GENERAL PUBLIC. NOT FAMILIES OR INDIVIDUAL MEMEBERS FEM DOES NOT ISSUE DUES BUT THE ORGANIZATION AND ITS GOVERNING BODY HAS THE INTEREST OF APPEALING TO A BROAD AMOUNT OF PEOPLE AND PROVIDE FDUC.

ATIONAL ACTIVITIES



Return Explanation

990 Schedule O, Supplemental Information

| Reference | |
|-----------|---|
| FORM 990- | TO FACILITATE EDUCATIONAL PROGRAMS IN MICHIGAN RELATING TO ENERGY AND SOURCES OF ENERGY |

EZ, PART III

Explanation Return

| Reference | |
|---------------|--|
| FORM 990- | SPONSOR SCHOLARSHIP FUNDS FOR THE PURPOSE OF PROVIDING RENEWABLE ANNUAL SCHOLARSHIPS TO PO |
| EZ, PART III, | STSECONDARY STUDENTS ACTIVIELY SEEKING DEGREES IN MICHIGAN SCHOOLS RELATING TO FUTURE CARE |

LINE 28 ERS IN SCIENCE AND/OR THE OIL AND GAS INDUSTRY 11 SCHOLARSHIPS AWARDED

990 Schedule O, Supplemental Information