DLN: 93493066002182

OMB No. 1545-0047 **2020**

Department of the Internal Revenue Service

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

▶ Go to $\underline{www.irs.gov/Form990}$ for instructions and the latest information.

A F	or th	e 2020 c	alendar year, or tax year beg	inning 07-01-2020 , and ending 06-3	80-2021			_		
B Che	ck if a	pplicable:	C Name of organization SUSTAINABLE JERSEY				D Employ	er identifi	ication number	
		change					45-3848	3336		
□ Na		-	Doing business as							
		n/terminated			C Talanhan					
		d return	DO BOV 7719	mail is not delivered to street address) Room/s	uite		E Telephon			
□ Ар	plicati	on pending		TID on familiar and all			(609) 7	71-2938		
			EWING, NJ 086280718	ountry, and ZIP or foreign postal code			C Cross ro	cointo # 3	210 E42	
			F Name and address of princi	nal officer:	11/->		G Gross re		210,543	
			GARY SONDERMEYER	par officer.			a group ref inates?	turn for	□Yes ☑ No	
			PO BOX 7718 EWING, NJ 086280718				subordinat	es	Yes No	
I Ta	x-exer	mpt status:		4 6 +) \square (047/3/4) \square (507	┤ ` ´	include	d?			
7 10/	ahait	ha. h. \A/\A	/W.SUSTAINABLEJERSEY.COM	◀ (insert no.)			exemption	•	instructions)	
J VV	ebsii	te:► vvvv	W.SUSTAINABLEJEKSET.COM		(-)	Group .	exemption	number		
K Forr	n of o	rganization:	: 🗹 Corporation 🗌 Trust 🔲 As	ssociation Other >	L Year o	f format	ion: 2011	M State	of legal domicile: NJ	
	11 01 0	rgariizatiori.	. La corporation La mast La A.	Sociation — Other P						
Pa	art I	Sum	mary							
Governance	1 0	SUSTAINA WITH THE INITIATIV COLLECTI FOUNDATI SHOULD D TOWARD	TOOLS, TRAINING, AND FINAN ES. THE ORGANIZATION SUPPO VELY TO BRING ABOUT A SUST, IONS, ACADEMIA AND INDUSTR DO, CREATES DETAILED GUIDAN COMPLETING. THEIR EFFORTS F	OF MOST SIGNIFICANT ACTIVITIES: MPOWER NEW JERSEY COMMUNITIES TO CIAL INCENTIVES NECESSARY TO PURSUE RTS A NETWORK AND MOVEMENT OF MUN AINABLE NEW JERSEY. ACTING WITH STAT LY, SUSTAINABLE JERSEY RESEARCHES BE NCE CALLED "ACTIONS", AND ASSISTS MU RESULT IN A PRESTIGIOUS MUNICIPAL OR HEY HAVE ACCOMPLISHED IN ACCORDANC	E CRITICA NICIPALIT TE AGENC ST PRAC INICIPAL SCHOOL	AL ENVI TIES AN CIES, N TICES I AND SO CERTI	IRONMENT. ID SCHOOL ON-PROFIT FOR WHAT CHOOL GRI FICATION	AL, SOCI DISTRIO ORGAN COMMUN EEN TEAN AWARD N	AL, AND ECONOMIC CTS WORKING IZATIONS, NITIES COULD AND MS AS THEY WORK WHEN THEY HAVE	
1905	:									
	-									
Activities &		ssets.	10							
<u> </u>	l		of voting members of the govern	3	19 19					
Ac	l		•	of the governing body (Part VI, line 1b) .calendar year 2020 (Part V, line 2a) .				5	5	
	l		, ,	recessary)				6	65	
	l			art VIII, column (C), line 12	• •		•	7a	0	
	l			om Form 990-T, line 39		·. ·.		7b	0	
	_	1100 411101	acca basiness accasic income in			Prio	r Year	122	Current Year	
_	8	Contribut	tions and grants (Part VIII, line 1	h)			2,126,7	705	2,100,821	
en Ce	9	Program	service revenue (Part VIII, line 2	g)			160,2	206	102,369	
Raver	l			, lines 3, 4, and 7d)				084	4,189	
ш	11	Other rev	enue (Part VIII, column (A), line	es 5, 6d, 8c, 9c, 10c, and 11e)			-4,6	500	3,164	
	12	Total reve	enue—add lines 8 through 11 (r	nust equal Part VIII, column (A), line 12)		2,286,3	395	2,210,543		
	13	Grants ar	nd similar amounts paid (Part IX	, column (A), lines 1–3)		724,5	597	527,911		
	14	Benefits p	paid to or for members (Part IX,	column (A), line 4)	(A), line 4)					
&	15	Salaries,	other compensation, employee	benefits (Part IX, column (A), lines 5-10)			1,179,6	574	1,329,488	
ens	16a	Professio	onal fundraising fees (Part IX, co	lumn (A), line 11e)				0	0	
Expenses	l		raising expenses (Part IX, column (D	·· · · - · 						
ш	l	-		es 11a-11d, 11f-24e)			434,2	-	482,111	
	l	-	•	qual Part IX, column (A), line 25)			2,338,5	-	2,339,510	
<u>, o</u>	19	Revenue	less expenses. Subtract line 18	from line 12	Posi		-52,1		-128,967 End of Year	
Net Assets or Fund Balances					Begi	ıy 0	f Current Y		Ling Of Teal	
ssel Bala	20	Total ass	ets (Part X, line 16)				2,200,1	135	2,402,461	
Ž Z	21	Total liab	ilities (Part X, line 26)				1,114,0	75	1,445,368	
žZ	22	Net asset	s or fund balances. Subtract lin	e 21 from line 20			1,086,0	060	957,093	
	rt II		ature Block		•					
		and belie	erjury, I declare that I have exa	mined this return, including accompanying						
		edge.	f, it is true, correct, and comple	te. Declaration of preparer (other than offi						
		*****	*	te. Declaration of preparer (other than offi			-03-07			
Sign	nowle	*****	if, it is true, correct, and comple * ure of officer	te. Declaration of preparer (other than only		2022 Date	-03-07			
Sign Here	nowle	***** Signatu	* ure of officer SONDERMEYER CHAIRPERSON	te. Declaration of preparer (other than offi			-03-07			
_	nowle	****** Signatu GARY S Type o	* ure of officer SONDERMEYER CHAIRPERSON r print name and title							
Here	nowle	****** Signatu GARY S Type o	* ure of officer SONDERMEYER CHAIRPERSON	Preparer's signature	Date 2022-03-0	Date		PTIN P01429163	3	
Here ———	e d	Signatu GARY S Type o	* ure of officer SONDERMEYER CHAIRPERSON r print name and title vint/Type preparer's name	Preparer's signature		Date 7 Check self-e	k if Femployed	01429163	3	
Paid Pre	e d pare	***** Signatu GARY S Type o	* ure of officer SONDERMEYER CHAIRPERSON r print name and title	Preparer's signature		Date 7 Check self-e	k □ if F	01429163	3	
Here ———	e d pare	Signatu Signatu GARY S Type o	* ure of officer SONDERMEYER CHAIRPERSON r print name and title vint/Type preparer's name	Preparer's signature		Date 7 Check self-e	k if Femployed	201429163 1430039	3	
Paid Pre	e d pare	Signatu Signatu GARY S Type o	* ure of officer SONDERMEYER CHAIRPERSON r print name and title rint/Type preparer's name irm's name SOBEL & CO LLC CP	Preparer's signature A'S ARKWAY		Date 7 Check self-e	k ☐ if Femployed s EIN ► 22-	201429163 1430039	3	

Form	990 (2020)					Page 2				
Pa	rt III Statement	of Program Servic	e Accomplis	hments						
	Check if Scheo	dule O contains a respo	onse or note to	any line in this Part III		🗹				
1	Briefly describe the or	rganization's mission:								
TOOI ORGA A SU SUST CALL MUN	LS, TRAINING, AND FIN ANIZATION SUPPORTS STAINABLE NEW JERSE TAINABLE JERSEY RESE ED "ACTIONS" THAT M	IANCIAL INCENTIVES I A NETWORK AND MOV A ACTING WITH STA EARCHES BEST PRACTI UNICIPAL AND SCHOO RTIFICATION AWARD	NECESSARY TO /EMENT OF MUN FE AGENCIES, N CES FOR WHAT DL GREEN TEAM: WHEN THEY HAV	PURSUE CRITICAL ENVICEPALITIES AND SCHION-PROFIT ORGANIZE COMMUNITIES COULD SWORK TOWARD COMVED THE	LD A BETTER WORLD FOR FUTUR VIRONMENTAL, SOCIAL, AND EC OOL DISTRICTS WORKING COLE ATIONS, FOUNDATIONS, ACADE DAND SHOULD DO AND CREATE IPLETING. THEIR EFFORTS RESU SPECIFIC ACTIONS THEY HAVE	ONOMIC INITIATIVES. THE LECTIVELY TO BRING ABOUT MIA AND INDUSTRY, S DETAILED GUIDANCE ILT IN A PRESTIGIOUS				
2	Did the organization u	□ Yes ☑ No								
	the prior Form 990 or	∟ Yes ⊻ No								
_	•	se new services on Sch								
3	Did the organization of services?	cease conducting, or m	nake significant	changes in how it cond	ucts, any program	☐ Yes ☑ No				
	If "Yes," describe these changes on Schedule O.									
4	Section 501(c)(3) and		ons are required	to report the amount	largest program services, as monof grants and allocations to othe					
4a	(Code:) (Expenses \$	1,054,389	including grants of \$) (Revenue \$	102,369)				
	See Additional Data				, (,					
4b	(Code:) (Expenses \$	616,221	including grants of \$	527,911) (Revenue \$)				
	See Additional Data									
4c	(Code:) (Expenses \$	228,589	including grants of \$) (Revenue \$)				
	See Additional Data									
4d		es (Describe in Sched	•							
	(Expenses \$	incl	uding grants of	\$) (Revenue \$)				
4e	_Total program serv	ice expenses ►	1,899,1	99						

15

16

17

18

19

14b

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16

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18

19

20a

20b

21

Yes

Form **990** (2020)

Nο

Nο

Nο

Nο

Nο

Nο

Nο

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Pa	Checklist of Required Schedules			,
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 😼	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</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? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule D, Part I</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? <i>If "Yes," complete Schedule D,</i> 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? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a		No
	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 3	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	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		No
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	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
		-	$\overline{}$	

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

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

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Par	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior 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>	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III	27		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):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		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>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		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>	32		No
	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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)? If "Yes," complete Schedule R, Part V, line 2	35b		_
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		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? If "Yes," complete Schedule R, Part VI	37		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	38	Yes	
Pai	Statements Regarding Other IRS Filings and Tax Compliance	<u> </u>		
	Check if Schedule O contains a response or note to any line in this Part V	· ;		
1 -	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 19		Yes	No
	Enter the number reported in Box 3 of Form 1996. Enter -0- if not applicable			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Yes	

Par	tV Statements Regarding Other IRS Filings and Tax Compliance (continued)			rage 3			
	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						
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				
За	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					
	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)? If "Yes," enter the name of the foreign country:	4a		No			
	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 ———			
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c					
	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			
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b					
	Organizations that may receive deductible contributions under section 170(c).						
	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?			No 			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b					
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7 c		No			
d	If "Yes," indicate the number of Forms 8282 filed during the year						
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	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?						
8	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?						
9	Sponsoring organizations maintaining donor advised funds.						
а	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?	9 b					
10	Section 501(c)(7) organizations. Enter:						
а	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 b	Gross income from members or shareholders						
D	against amounts due or received from them.)						
	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.						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	Is the organization licensed to issue qualified health plans in more than one state?	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						
c	Enter the amount of reserves on hand						
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? <i>If "No," provide an explanation in Schedule O</i>						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No			

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Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "N 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		onse to i	ines
Se	ction A. Governing Body and Management			
_		$\overline{}$	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 19	-		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 19			
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?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
_Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	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		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	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?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
	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		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	166		
	ection C. Disclosure	16b		
17	List the states with which a copy of this Form 990 is required to be filed▶			
	NJ NJ			
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A 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.			
19	Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest			
20	policy, and financial statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: THE ORGANIZATION PO BOX 7718 EWING, NJ 086280718 (609) 771-2938			
				. /

Part VII

TRUSTEE

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII $\,$. Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

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

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

 List all of the organization's former officers, of reportable compensation from the organization 						sated	em	ployees who receiv	ed more than \$100	,000	
 List all of the organization's former directo organization, more than \$10,000 of reportable co 	mpensation fro	m the									
See instructions for the order in which to list the	persons above.										
\square Check this box if neither the organization no	r any related or	ganizat	ion c	omp	ens	ated a	any	current officer, dire	ctor, or trustee.		
(A) Name and title	(B) Average hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the organization and	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	(W-2/1099- MISC)	related organizations	
(1) ANNE-MARIE PERACCHIO	1.00	X		х				0	0	0	
CHAIRPERSON											
(2) CAROLINE EHRLICH SECRETARY	1.00	Х		х				0	0	0	
(3) GARY SONDERMEYER	1.00										
VICE CHAIRPERSON		Х		X				0	0	0	
(4) EDWARD MAHANEY EDD TREASURER	1.00	X		х				0	0	0	
(5) CLINTON ANDREWS PHD TRUSTEE	1.00	Х						0	0	0	
(6) ANTHONY CANCRO TRUSTEE	1.00	Х						0	0	0	
(7) MICHELE CRITELLI TRUSTEE	1.00	Х						0	0	0	
(8) PAM MOUNT TRUSTEE	1.00	Х						0	0	0	
(9) RICHARD DOVEY TRUSTEE	1.00	Х						0	0	0	
(10) MARC CITRON ESQ TRUSTEE	1.00	Х						О	0	0	
(11) WANDA MONAHAN ESQ TRUSTEE	1.00	Х						0	0	0	
(12) WILLIAM PIKOLYCKY TRUSTEE	1.00	Х						0	0	0	
(13) MICHAEL SCHMID TRUSTEE	1.00	Х						О	0	0	
(14) SARAH WEIDEL TRUSTEE	1.00	Х						О	0	0	
(15) EDWARD POTOSNAK TRUSTEE	1.00	Х						0	0	0	
(16) LESTER TAYLOR III ESQ TRUSTEE	1.00	Х						0	0	0	
(17) CAROLYN BROWN-DANCY	1.00	X						0	0	0	

Part VII

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

(A)

(B)

(C)

(D)

(E)

(F)

Average Position (do not check more Reportable Position (do not check more Reportable Position (do not check more Reportable Repor

Page 8

	(A) Name and title	(B) Average hours per week (list any hours for related	than c	ne b	ox, u n of tor/t	t che unles ficer rust		son	(D) Reportable compensation from the organization (W-2/1099-	(E) Reportable compensation from related organizations (W-2/1099-		Estima amount of compen from	ated of other sation the
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099 MISC)	-	organizat relat organiza	:ed
	KENDRA MCQUILTON	1.00	Х						o		0		0
TRUS	TEE PAUL WILLIAMS												
TRUS		1.00	×						0		0		0
(20)	RENEE HAIDER	35.00			,,				447.404				20.407
DEPU	TY DIRECTOR				X				117,101		0		28,107
(21)	RANDALL SOLOMON	35.00			х				134,685		0		31,939
EXEC	UTIVE DIRECTOR												
1h 9	Sub-Total						<u> </u>				\top		
	Total from continuation sheets to Part \					•	-						
d 7	Total (add lines 1b and 1c)				•	•	•		251,786		0		60,046
2	Total number of individuals (including but of reportable compensation from the organization)		those lis	sted	abov	/e) v	vho re	ceive	ed more than \$100	,000			
	——————————————————————————————————————											1 1	
	Did the organization list any former offic			l		1		. :				Yes	No
3	line 1a? If "Yes," complete Schedule J for			key (,	e, or r	nigne	est compensated er	nployee on	3		No
4	For any individual listed on line 1a, is the	sum of reporta	ble com							ne			
	organization and related organizations gr	eater than \$150	0,000? 1	If "Ye	s," c	comp	olete S	Sche	dule J for such		_		
_					•			• ച		lual fam	4	Yes	
5	Did any person listed on line 1a receive o services rendered to the organization? If '								ganization or individ	• •	5		No
Se	ection B. Independent Contractors	}											_
1	Complete this table for your five highest of from the organization. Report compensat	compensated in	depend ndar ye	ent c ar en	ontr dina	acto wit	rs tha h or w	t rec	ceived more than \$3 the organization's	100,000 of cor tax year.	npen	sation	
	, ,	(A) ousiness address	•						T	(B)		(C Compen	
	name und i								2 codript			231115011	
									1			l	

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

compensation from the organization ▶ 0

		(2020) Statement	of F	Payanua						Page 9
Part	VIII				respo	onse or note to any	/ line in this Part VIII			🗆
		3.1331(1) 33.13		3 50 110 110 1	, <u>, , , , , , , , , , , , , , , , , , </u>		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
5 X	1a	Federated campai	gns	1	.a			revenue		1 312 311
s, Grants Amounts	b	Membership dues		. 1	.b					
Su de	С	Fundraising events	s .	. 1	lc					
ifts,		Related organizati			.d					
s, G imil		Government grants (.е	27,805				
lion r Si	t	All other contribution and similar amounts above	not ir	schidod	Lf	2,073,016				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contribution lines 1a - 1f:\$	s incl							
Contributions, Gift and Other Similar	L	Total. Add lines 1a	. 16		.g	•				
<u>ة ت</u>	_"	Total. Add lines 1	d-11		•	Business Code	2,100,821			
) 2a	PROGRAM SERVICE F	EES				102,369	102,369		
ë						900099				
ven	ь	•								
Program Service Revenue	_									
ar vic	C									
š	d	I								
grar	e									
ď										
		All other program								
	—	Total. Add lines 2 Investment income				102,369	1	T		
	s	similar amounts) .				,	/ 18	9		4,189
		Income from invest			npt b		•			
	3	Royalties	·	(i) Real	•	(ii) Personal	•			
	_			(1)		(,				
		Gross rents Less: rental	6a							
		expenses	6b							
	С	Rental income or (loss)	6c							
	c	Net rental income	e or ((loss)			 			
				(i) Securit	ies	(ii) Other				
	7a	Gross amount from sales of	7a							
		assets other than inventory								
	b	Less: cost or other basis and	7b							
		sales expenses								
	c	Gain or (loss)	7с							
		Net gain or (loss)				· · · •				
ne	oa			of						
Ve⊓ P		contributions reporte See Part IV, line 18			8a					
Other Revenue	l b	Less: direct expen	ses		8b					
ther	۰	Net income or (los	ss) fr	om fundraisii	ng ev	ents	_			
	9a	Gross income from	gami	ing activities.						
		See Part IV, line 19			9a					
	l	Less: direct expen			9b	inc				
	`	: Net income or (los	5) 11	om gaming a	Ctivit	les >				
	10	aGross sales of inve returns and allowa	ento	ry, less						
	l b	Less: cost of good			10a 10b					
		Net income or (los								
		Miscellaneo	us R	evenue		Business Code				
	11	-aMISCELLANEOUS	INC	OME		90009	3,16	4		3,164
	E	,								
	ا (
	`									
	6	All other revenue								
	•	Total. Add lines 1	1a-1	l1d		•	3,16	4		
	12	! Total revenue. S	ee ir	nstructions .			2,210,54			0 7,353
							2,210,34	102,30	· I	Form 000 (2020)

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must co	mnlete all columns	All other organization	ns must complete colu	ımn (A)
Check if Schedule O contains a response or note to an		_	ns must complete colu	🗹
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
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	527,911	527,911		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
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	921,880	685,007	159,862	77,011
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits	310,551	230,077	69,269	11,205
10 Payroll taxes	97,057	79,291	11,990	5,776
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	283,707	219,416	59,407	4,884
12 Advertising and promotion				
13 Office expenses	445	115	330	
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel	88	88		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	3,302		3,302	
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 INDIRECT COSTS	158,551	124,450	34,101	
b PLAQUES & PROMOTIONAL I	21,704	21,704		
c SUPPLIES & SUBSCRIPTION	11,687	9,513	2,174	
d PAYROLL FEES	2,455	1,627		828
e All other expenses	172		130	42
25 Total functional expenses. Add lines 1 through 24e	2,339,510	1,899,199	340,565	99,746
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).				

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11

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18 19

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32

33

Liabilities 22

Fund Balances

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Assets 30 10c

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12 13

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17

18

19

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21

22

23

24 25

26

27

28

29

30

31

32

33

44,538

2,200,135

257,345

828.925

27.805

1.114.075

672,470

413,590

1,086,060

2,200,135

Page 11

2,313,580 01 262

184

2,402,461

1.042.211

1.445.368

663,477

293,616

957,093

2,402,461

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368,205

34,952

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

10a Land, buildings, and equipment: cost or other

Investments—publicly traded securities .

Investments—other securities. See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 33)

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

Secured mortgages and notes payable to unrelated third parties

Unsecured notes and loans payable to unrelated third parties .

Organizations that follow FASB ASC 958, check here ▶

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

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

Organizations that do not follow FASB ASC 958, check here ightharpoonup and

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

Retained earnings, endowment, accumulated income, or other funds

Investments-program-related. See Part IV, line 11

basis. Complete Part VI of Schedule D

Other assets. See Part IV, line 11 .

Accounts payable and accrued expenses

b Less: accumulated depreciation

Intangible assets .

Grants payable .

Deferred revenue . .

Tax-exempt bond liabilities .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

	Beginning of year		End of year
Cash-non-interest-bearing	430	1	
Savings and temporary cash investments	1,848,495	2	2,

1	Cash-non-interest-bearing	430	1	
2	Savings and temporary cash investments	1,848,495	2	
3	Pledges and grants receivable, net	278,411	3	
4	Accounts receivable, net	2,315	4	
5	Loans and other pavables to any current or former officer, director, trustee,			

10a

10b

3	Pleages and grants receivable, net	270,411	- 3	61,203
4	Accounts receivable, net	2,315	4	2,245
5	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
6	Loans and other receivables from other disqualified persons (as defined under section $4958(f)(1)$), and persons described in section $4958(c)(3)(B)$.		6	

		entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
S	7	Notes and loans receivable, net		7	
set	8	Inventories for sale or use		8	
Ass	9	Prepaid expenses and deferred charges	25,946	9	5,189

3h

Form 990 (2020)

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Additional Data

Software ID:

Software Version:

EIN: 45-3848336

Name: SUSTAINABLE JERSEY

Form 990 (2020)

Form 990, Part III, Line 4a:

MUNICIPAL CERTIFICATION PROGRAM: SUSTAINABLE JERSEY BEGAN IN 2009 AS A FREE MUNICIPAL CERTIFICATION PROGRAM FOR SUSTAINABLE DEVELOPMENT THAT IDENTIFIES SPECIFIC ACTIONS COMMUNITIES CAN TAKE TO GO GREEN, SAVE MONEY, AND SUSTAIN THEIR OUALITY OF LIFE OVER THE LONG TERM, MUNICIPALITIES CAN IMPLEMENT THE ACTIONS AND DOCUMENT THEIR PROGRESS TO RECEIVE POINTS TOWARD CERTIFICATION. THE STANDARDS ARE ACCOMPANIED BY A ROBUST PROGRAM OF TRAINING AND SUPPORT, AND A SUITE OF FINANCIAL INCENTIVES PROVIDED BY BOTH PUBLIC AND PRIVATE SOURCES, BY THE END OF CY2021, 461 NEW JERSEY MUNICIPALITIES (81% OF THE STATE) WERE REGISTERED TO PARTICIPATE IN THE PROGRAM AND WERE WORKING TO IMPLEMENT SUSTAINABILITY MEASURES WITH 225 CERTIFIED, COLLECTIVELY, CERTIFIED COMMUNITIES HAVE DOCUMENTED 14.000 ACTIONS ADDRESSING THE MOST PRESSING ISSUES SUCH AS CLIMATE CHANGE, UNSUSTAINABLE LAND USE, DECLINING LOCAL ECONOMIES, EXPOSURE TO ENVIRONMENTAL HAZARDS, NATURAL RESOURCE PROTECTION, DIVERSITY AND EQUITY, POPULATION HEALTH, AND MANY OTHERS. IN ADDITION, THESE COMMUNITIES HAVE FORMED HUNDREDS OF GREEN TEAMS OR SUSTAINABILITY COMMISSIONS THAT ARE FORMAL BODIES OF LOCAL GOVERNMENT CHARGED WITH IMPLEMENTING SUSTAINABLE JERSEY ACTIONS. SUSTAINABLE JERSEY ACTIONS ARE RESEARCHED AND DEVELOPED BY ISSUE-BASED TASK FORCES COMPRISED OF REPRESENTATIVES FROM ACADEMIA. THE NON-PROFIT SECTOR, THE BUSINESS COMMUNITY, AND FEDERAL, STATE, COUNTY, AND LOCAL GOVERNMENTS. SUSTAINABLE JERSEY LEADS THESE GROUPS AS THEY RESEARCH AND DISSEMINATE BEST PRACTICES. TRANSLATE GLOBAL AND STATE IMPERATIVES INTO LOCAL ACTIONS, TEST SUSTAINABILITY PLANNING MODELS AND DEVELOP COMMUNITY RESOURCES FOR THE PROGRAM, IN FY2021, SUSTAINABLE JERSEY EXPANDED THE PROGRAM TO ENCOURAGE CERTIFIED TOWNS TO ACHIEVE HIGHER LEVELS OF PERFORMANCE IN KEY DIMENSIONS OF SUSTAINABILITY. GOLD STARS ARE AWARDED ONE DIMENSION OF SUSTAINABILITY AT A TIME. MUNICIPALITIES CAN CURRENTLY EARN GOLD STARS IN ENERGY, WATER AND HEALTH. SCHOOL CERTIFICATION PROGRAM: IN 2014, SUSTAINABLE JERSEY AND LEADING NEW JERSEY SCHOOL-FOCUSED ORGANIZATIONS SUCH AS THE NEW JERSEY SCHOOL BOARDS ASSOCIATION AND THE NEW JERSEY EDUCATION ASSOCIATION LAUNCHED SUSTAINABLE JERSEY FOR SCHOOLS. MODELED OFF THE SUSTAINABLE JERSEY MUNICIPAL PROGRAM, SUSTAINABLE JERSEY FOR SCHOOLS IS A FREE, VOLUNTARY CERTIFICATION PROGRAM FOR NEW JERSEY PRE-KINDERGARTEN THROUGH TWELFTH-GRADE PUBLIC SCHOOLS. THE PROGRAM PROVIDES GUIDANCE, SUPPORT, AND RECOGNITION TO SCHOOLS THAT IMPLEMENT STEPS TO BE MORE SUSTAINABLE IN THEIR OPERATIONS AND PROACTIVE IN PREPARING STUDENTS FOR THE CHALLENGES THEY WILL FACE IN THE FUTURE. ISSUES SUCH AS WATER SCARCITY, CLIMATE CHANGE, RACISM AND ENVIRONMENTAL DEGRADATION REQUIRE BROAD-BASED SUSTAINABILITY LITERACY TO ENSURE THAT YOUNG PEOPLE ARE EQUIPPED TO RECOGNIZE AND RESPOND TO CRITICAL ISSUES NOW AND IN THEIR CHOSEN CAREERS. SUSTAINABLE JERSEY PARTICIPATING SCHOOLS SERVE AS LEARNING LABS FOR THESE ISSUES AND THE CERTIFICATION PROGRAM SUPPORTS EDUCATORS BY IDENTIFYING AUTHENTIC LEARNING OPPORTUNITIES FOR STUDENTS AND STAFF. TO SUPPORT SCHOOLS IN MEETING THE CHALLENGES OF DIGITAL LEARNING TWELVE DIGITAL SCHOOLS ACTIONS WERE ADDED TO THE SUSTAINABLE JERSEY FOR SCHOOLS CERTIFICATION PROGRAM ACROSS THREE NEW ACTION CATEGORIES, AND THE EXISTING STUDENT LEARNING AND SCHOOL CULTURE AND CLIMATE ACTIONS WERE UPDATED TO ADDRESS REMOTE AND DIGITAL LEARNING. IN ADDITION, A DIGITAL SCHOOLS STAR RECOGNITION PROGRAM WAS CREATED FOR SCHOOLS THAT EXCEL IN THIS AREA. THIS INITIATIVE UNDERTAKEN IN PARTNERSHIP WITH THE NEW JERSEY DEPARTMENT OF EDUCATION AND THE NEW JERSEY SCHOOL BOARDS ASSOCIATION AND ENDORSED BY NEW JERSEY LEADERSHIP FOR EDUCATIONAL EXCELLENCE. AS OF THE END OF CY2021, OVER 64% ON NEW JERSEY PUBLIC SCHOOL DISTRICT ARE PARTICIPATING IN SUSTAINABLE JERSEY FOR SCHOOLS, 335 SCHOOLS ARE CURRENTLY CERTIFIED, AND 37 SCHOOLS RECEIVED DIGITAL

SCHOOLS STAR RECOGNITION. COLLECTIVELY, THESE SCHOOLS HAVE SUCCESSFULLY DOCUMENTED OVER 7,000 ACTIONS FROM OUR LIST OF BEST PRACTICES.

SUSTAINABLE JERSEY GRANTS PROGRAM: SUSTAINABLE JERSEY IS COMMITTED TO IDENTIFYING RESOURCES TO HELP MUNICIPALITIES AND SCHOOLS SUCCESSFULLY ADDRESS LOCAL SUSTAINABILITY CHALLENGES. A CORNERSTONE OF THIS EFFORT IS THE GRANTS PROGRAM. SINCE 2009, 6.7 MILLION IN GRANTS HAVE BEEN

AWARDED TO PROGRAM PARTICIPANTS TO PURSUE LOCAL INITIATIVES. RECOGNIZING DEPTH AND BREATHE OF SUSTAINABLE JERSEY'S RELATIONSHIPS WITH NEW JERSEY MUNICIPALITIES AND SCHOOL DISTRICTS, THE GRANTS ARE FUNDED BY CORPORATIONS, FOUNDATIONS, AND OTHER NON-PROFIT ORGANIZATIONS. SUSTAINABLE JERSEY COMPLETED FIVE GRANT CYCLES. SUSTAINABLE JERSEY STAFF SYSTEMATICALLY MANAGE THE GRANTS ADMINISTRATION PROCESS THROUGH THE

INITIAL SOLICITATION, AN INDEPENDENT SELECTION COMMITTEE PROCESS, AND APPROVAL OF A RECIPIENT'S FINAL TECHNICAL AND FINANCIAL REPORT. NEARLY 60% OF SUSTAINABLE JERSEY PARTICIPATING MUNICIPALITIES AND 40% OF PARTICIPATING SCHOOLS HAVE RECEIVED AT LEAST ONE SUSTAINABLE JERSEY GRANT RANGING

Form 990, Part III, Line 4b:

IN SIZE FROM \$2,000 TO \$35,000.

OTHER PROGRAMS: WITH FUNDING FROM THE ROBERT WOOD JOHNSON FOUNDATION AND THE NEW JERSEY DEPARTMENT OF HEALTH SUSTAINABLE JERSEY LAUNCHED
THE MUNICIPAL GOLD STAR STANDARD IN HEALTH. THE STANDARD IS BASED ON A COMPREHENSIVE ASSESSMENT OF THE AUTHORITY AND LEVERS OF INFLUENCE
AVAILABLE TO MUNICIPALITIES TO IMPLEMENT SPECIFIC EVIDENCE-BASED ACTIONS THAT ARE PREDICTED TO IMPROVE THE UPSTREAM DETERMINANTS OF HEALTH AND
HEALTH EOUITY. TECHNICAL ASSISTANCE WAS PROVIDED TO MUNICIPALITIES ON COMPLETE STREETS IMPLEMENTATION AND TO MUNICIPALITIES AND SCHOOLS ON

ENERGY MANAGEMENT. THE NEW JERSEY STUDENT CLIMATE CHALLENGE WAS LAUNCHED IN COLLABORATION WITH THE DRUMTHWACKET FOUNDATION TO INSPIRE YOUTH ACTION TO ADDRESS CLIMATE CHANGE AND SUPPORT TEACHERS AS THEY WORK TO INTEGRATE CLIMATE CHANGE EDUCATION ACROSS THE CURRICULUM.

YOUTH ACTION TO ADDRESS CLIMATE CHANGE AND SUPPORT TEACHERS AS THEY WORK TO INTEGRATE CLIMATE CHANGE EDUCATION ACROSS THE CURRICULUM.
THROUGH THE FUND FOR NEW JERSEY. SUSTAINABLE JERSEY PARTICIPATED WITH OTHER NON-PROFITS IN STATEWIDE 2020 CENSUS COMPLETE COUNT EFFORTS.

Form 990, Part III, Line 4c:

efil	e GR/	APHIC prii	nt - DO NOT PROCESS	As Filed Data -			DLN: 9	3493066002182
SCI	HED	ULE A	Public (Charity Statu	s and Bul	alic Supp	ort	OMB No. 1545-0047
	m 99			ganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) empt charitable	organization or trust.		2020
		the Treasury	► Go to <u>www.irs</u>	.gov/Form990 for i			ormation.	Open to Public Inspection
Nam	e of th	nie Service he organiza E JERSEY	tion				Employer identific	
							45-3848336	
	rt I		for Public Charity State				See instructions.	
1 ne c	rganiz		a private foundation because	•	•		(A)(:)	
		·	onvention of churches, or as					
2			scribed in section 170(b)(`	, ,		
3		·	or a cooperative hospital serv	-			-	
4		A medical r name, city,	esearch organization operate and state:	ed in conjunction with	a hospital descri	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's
5		-	ation operated for the benefit (iv). (Complete Part II.)	t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6		A federal, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).	
7	✓		ation that normally receives at (0(b)(1)(A)(vi). (Complete		s support from a	governmental u	init or from the genera	al public described in
8		A communi	ty trust described in section	170(b)(1)(A)(vi).	(Complete Part I	I.)		
9			ural research organization de rant college of agriculture. So					ege or university or a
10		from activit investment	ation that normally receives: lies related to its exempt fun income and unrelated busin See section 509(a)(2). (Co	ctions—subject to cer ess taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross
11		An organiza	ation organized and operated	exclusively to test fo	r public safety. S	See section 509	(a)(4).	
12		more public	ation organized and operated ly supported organizations of through 12d that describes	lescribed in section 5	09(a)(1) or se	ction 509(a)(2). See section 509(a	
а		organizatio	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B.	ppoint or elect a majo				
b		manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A a	ation vested in the sar				
c		Type III f	unctionally integrated. A sorganization(s) (see instructi	supporting organizatio				ted with, its
d		Type III n functionally	on-functionally integrated integrated integrated. The organization (s). You must complete Par	d. A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar	
e		Check this	box if the organization received or Type III non-functionally	ved a written determir	nation from the I		pe I, Type II, Type II	I functionally
f	Enter	the number	of supported organizations				<u> </u>	
g			ing information about the su	······································	т'		<u> </u>	
	(i) N	Name of supp organizatior		(iii) Type of organization (described on lines 1- 10 above (see instructions))	nization in your governing document? monetary support (see instructions)		(vi) Amount of other support (see instructions)	
					Yes	No		
Tota		l. B. '	tion Act Notice, see the Ir		Cat. No. 11285		 	 90 or 990-EZ) 2020

	Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and	2.046.044	4 770 700	2 204 024	2 426 705	2 400 024	10 207 10
	membership fees received. (Do not include any "unusual grant.")	2,016,841	1,778,790	2,284,024	2,126,705	2,100,821	10,307,18
2	Tax revenues levied for the						
	organization's benefit and either paid						
2	to or expended on its behalf The value of services or facilities						
•	furnished by a governmental unit to	956,502	628,355	655,140	602,405	699,002	3,541,40
	the organization without charge						
4	Total. Add lines 1 through 3	2,973,343	2,407,145	2,939,164	2,729,110	2,799,823	13,848,58
5	The portion of total contributions by each person (other than a						
	governmental unit or publicly						
	supported organization) included on						5,781,22
	line 1 that exceeds 2% of the						
	amount shown on line 11, column (f)						
5	Public support. Subtract line 5						
•	from line 4.						8,067,35
5	Section B. Total Support		•				
	Calendar year	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	(or fiscal year beginning in) ► Amounts from line 4	2,973,343	2,407,145	2,939,164	2,729,110	2,799,823	13,848,58
8	Gross income from interest,	2,973,343	2,407,143	2,939,104	2,729,110	2,799,023	13,040,30
0	dividends, payments received on securities loans, rents, royalties and income from similar sources.	2,153	2,329	3,336	4,084	4,189	16,09
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.).			3,400	3,973	3,164	10,53
11	Total support. Add lines 7 through 10						13,875,213
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	322,75
L3	First 5 years. If the Form 990 is for t	the organization's f	irst, second, third	, fourth, or fifth ta	x year as a sectio	n 501(c)(3) organi	zation, check

15

Schedule A (Form 990 or 990-EZ) 2020

58.140 %

60.930 %

Section C. Computation of Public Support Percentage Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f))

17a 10%-facts-and-circumstances test—2020. 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

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

h 10%-facts-and-circumstances test-2019. 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

15 Public support percentage for 2019 Schedule A, Part II, line 14 16a 33 1/3% support test-2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box

b 33 1/3% support test-2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

P	Support Schedule for									
	(Complete only if you c						er Part II. If			
	the organization fails to	qualify under	the tests listed	oelow, please co	omplete Part II.)				
Se	Section A. Public Support									
	Calendar year	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total			
	(or fiscal year beginning in) ► Gifts, grants, contributions, and		` '	``		, ,				
1	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									
/a	Amounts included on lines 1, 2, and 3 received from disqualified persons									
h	Amounts included on lines 2 and 3									
	received from other than disqualified									
	persons that exceed the greater of									
	\$5,000 or 1% of the amount on line									
	13 for the year.									
	Add lines 7a and 7b.									
8	Public support. (Subtract line 7c									
	from line 6.)									
36	ection B. Total Support		1	1	1	T	Τ			
	Calendar year	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total			
9	(or fiscal year beginning in) ► Amounts from line 6									
	Gross income from interest,									
L0a	dividends, payments received on									
	securities loans, rents, royalties and									
	income from similar sources									
b	Unrelated business taxable income									
	(less section 511 taxes) from									
	businesses acquired after June 30, 1975.									
_	Add lines 10a and 10b.									
с 11	Net income from unrelated business									
11	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 5 years. If the Form 990 is for the	ne organization's	first, second, third	l, fourth, or fifth t	ax vear as a secti	on 501(c)(3) orga	nization.			
	check this box and stop here	-			•	() ()	· —			
-				<u> </u>			· · · · • · · ·			
	ection C. Computation of Public S Public support percentage for 2020 (lin			column (f))		1 4 = 1				
15						15				
16	Public support percentage from 2019 S					16				
Se	ection D. Computation of Invest									
17	Investment income percentage for 202	-		-		17				
18	Investment income percentage from 2	019 Schedule A,	Part III, line 17 .			18	<u> </u>			
	331/3% support tests—2020. If the	organization did r	not check the box	on line 14, and lir	ne 15 is more than	33 1/3%, and lin	e 17 is not			
	more than 33 1/3%, check this box and									
	33 1/3% support tests—2019. If the									
U	not more than 33 1/3%, check this box	-			·					
20	· · · · · ·	-	-							
20	Private foundation. If the organization	on did not check a	a box on line 14, 1	.9a, or 19b, check	this box and see	instructions	. ▶ ⊔			

Page 4

5a

5b 5c

6

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

amendment to the organizing document).

complete Part I of Schedule L (Form 990 or 990-EZ).

the organization had excess business holdings).

organization had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

provide detail in Part VI.

answer line 10b below.

6

7

8

10a

box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 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				
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).					
	III section 309(a)(1) or (2).	2				
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and					
	3c below.	3a	ı			
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the					
	determination.	3b				
c	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes?					

	m section ses (a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and			
	3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.			

	the public support tests under section 509(a)(2)? If res, describe in Part VI when and now the organization made the					
	determination.	3b				
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?					
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you					
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.					
b	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.					
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support					
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c				
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported					

С	re 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				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you					
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.					
b	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.					
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support					
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c				
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b					

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

Substitutions only. Was the substitution the result of an event beyond the organization's control?

organization's supported organizations? If "Yes," provide detail in Part VI.

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

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

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

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

Was the organization controlled directly or indirectly at any time during the tax year by one or more disgualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Pā	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?	11a		
h	A family member of a person described in 11a above?	11a		
	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in Part	11c		
	VI.			
5	ection B. Type I Supporting Organizations		Yes	No
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	163	140
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	-		
	operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.	2		
_	ection C. Type II Supporting Organizations			
	ection c. Type 11 Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing			
_	documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant	2		
,	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.			
S	ection 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 instruct	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b The organization is the parent of each of its supported organizations. Complete line 3 below.			
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer lines 2a and 2b 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? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in line 2a constitute activities that, but for the organization's involvement, one or more of the			
	organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b 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? If "Yes" or "No" provide details in Part VI .	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard.	3b		

Schedule A (Form 990 or 990-EZ) 2020 Page 6 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. (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 Add lines 1 through 3 4 4 5 Depreciation and depletion 5 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) 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year): a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) **1**d e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt use assets 2 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see 4 instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035 6 6 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) 8 Current Year Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4 4 5 5 Income tax imposed in prior year

6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) Schedule A (Form 990 or 990-F7) 2020

1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions	8	
9	Distributable amount for 2020 from Section C, line 6	9	

7 Total annual distributions. Add lines 1 through 6.			7	
8 Distributions to attentive supported organizations to windetails in Part VI). See instructions	8			
9 Distributable amount for 2020 from Section C, line 6				
10 Line 8 amount divided by Line 9 amount	10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2020	ons	(iii) Distributable Amount for 2020
4 Distributable assessment from 2020 forms Continue Colline C				

7 Total annual distributions. Add lines 1 thro	7		
8 Distributions to attentive supported organiza details in Part VI). See instructions	sive (<i>provide</i>		
9 Distributable amount for 2020 from Section (9		
10 Line 8 amount divided by Line 9 amount	1	0	
Section E - Distribution Allocatio (see instructions)	ens (i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) s Distributable Amount for 2020
1 Distributable amount for 2020 from Section C	, line 6		
2 Underdistributions, if any, for years prior to 2 (reasonable cause required explain in Part See instructions.			
3 Excess distributions carryover, if any, to 2020):		
a From 2015			
b From 2016			

9 Distributable amount for 2020 from Section C, line 6	9			
10 Line 8 amount divided by Line 9 amount			10	
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2020	ns	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6				
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required explain in Part VI). See instructions.				
3 Excess distributions carryover, if any, to 2020:				
a From 2015				
b From 2016				
c From 2017				
d From 2018			•	
e From 2019				

f Total of lines 3a through e

instructions)

3j and 4c. 8 Breakdown of line 7:

d Excess from 2019. e Excess from 2020.

a Excess from 2016. **b** Excess from 2017. . . . c Excess from 2018.

g Applied to underdistributions of prior years h Applied to 2020 distributable amount i Carryover from 2015 not applied (see

4 Distributions for 2020 from Section D, line 7:

j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.

\$		
Applied to underdistributions of prior years		
b Applied to 2020 distributable amount		
c Remainder. Subtract lines 4a and 4b from line 4.		
5 Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.		
7 Excess distributions carryover to 2021. Add lines		

Schedule A (Form 990 or 990-EZ) (2020)

Schedule A (Form 990 or 99	edule A (Form 990 or 990-EZ) 2020 Page 8					
Section A, line Part IV, Sectio	al Information. Provide the explanations required by Part II, line 10; Part II, line 17a o es 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 a on D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V es 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any ac	and 2; Part IV, Section C, line 1; , Section B, line 1e; Part V				
	Facts And Circumstances Test					
990 Schedule A, Supp	lemental Information					
Return Reference	Explanation					
SCHEDULE A, PART II, LIN EXPLANATION OF OTHER	E 10, MISCELLANEOUS INCOME - 2018 AMOUNT: \$ 3,400. 2019 AMOUNT: \$ 3,973.	2020 AMOUNT: \$ 3,164.				

INCOME:

efile GRAPHIC print - DO NOT PROCESS
SCHEDULE D

As Filed Data -

DLN: 93493066002182

OMB No. 1545-0047

2020

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.

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990)

► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

	me of the organization			Employe	er identification	number
505	STAINABLE JERSEY			45-38483	336	
Pa	Organizations Maintaining Donor Advi			r Accoun	its.	
	Complete if the organization answered "Ye	(a) Donor advise	· .	(b)	Funds and other	accounts
1	Total number at end of year	(a) Bellet davis	od rando	(5)	Tarras aria sarier	44444
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 adviso				are the	
	organization's property, subject to the organization's ex	clusive legal control?		• •		Yes 🗌 No
6	Did the organization inform all grantees, donors, and do charitable purposes and not for the benefit of the donor					
	private benefit?					Yes 🗌 No
Pa	rt II Conservation Easements.					
_	Complete if the organization answered "Ye					
1	Purpose(s) of conservation easements held by the organ	` _ ''	,,			
	☐ Preservation of land for public use (e.g., recreation	· —	Preservation of an			area
	Protection of natural habitat	Ш	Preservation of a d	certified his	toric structure	
	Preservation of open space					
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year.	qualified conservation con	tribution in the for		servation eld at the End o	of the Vear
а	Total number of conservation easements			2a	eld at the Lild t	or the real
b	Total acreage restricted by conservation easements			2b		
c	Number of conservation easements on a certified histori			2c		
d	Number of conservation easements included in (c) acqui	, ,		2d		
3	structure listed in the National Register Number of conservation easements modified, transferre	d released extinguished	or torminated by	the erganiz	ration during the	
3	tax year >	u, released, extiliguished,	or terminated by	the organiz	ation during the	
4	Number of states where property subject to conservation	n easement is located 🛌				
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds	ne periodic monitoring, ins s?	pection, handling	of violations	s,	□ No
6	Staff and volunteer hours devoted to monitoring, inspec	ting, handling of violation	s, and enforcing co	onservation	easements durir	ng the year
7	Amount of expenses incurred in monitoring, inspecting, \$ \\$	handling of violations, and	d enforcing conser	vation ease	ments during the	e year
8	Does each conservation easement reported on line 2(d)	above satisfy the require	ments of section 1	70(h)(4)(B`)(i)	
-	and section 170(h)(4)(B)(ii)?				☐ Y es	□ No
9	In Part XIII, describe how the organization reports cons balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the organizati				
Par	Organizations Maintaining Collections Complete if the organization answered "Ye	of Art, Historical Tre		er Simila	r Assets.	
1a	If the organization elected, as permitted under FASB AS historical treasures, or other similar assets held for publ Part XIII, the text of the footnote to its financial statem.	SC 958, not to report in its lic exhibition, education, o	revenue statemer r research in furth			
b	If the organization elected, as permitted under FASB AS historical treasures, or other similar assets held for publically following amounts relating to these items:					
((i) Revenue included on Form 990, Part VIII, line 1			•	\$	
(i	ii)Assets included in Form 990, Part X			🕨	\$	
2	If the organization received or held works of art, historic following amounts required to be reported under FASB A	cal treasures, or other sim	ilar assets for fina			
а	Revenue included on Form 990, Part VIII, line 1			•	\$	
b	Assets included in Form 990, Part X				· \$	_

Cat. No. 52283D

Schedule D (Form 990) 2020

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

.:e∏i		Organizations Maintaining Co	llections of Art, H	listori	cai ir	reasu	res, or	Other	Similar As	ssets (con	tinued)	
3		the organization's acquisition, accessic (check all that apply):	on, and other records,	check a	any of	the foll	owing t	hat are a	significant u	use of its co	llection	
а		Public exhibition		d		Loan	or excha	ange prog	rams			
b		Scholarly research		е		Other						
С		Preservation for future generations										
4	Provid Part X	e a description of the organization's co	llections and explain h	now the	y furth	ner the	organiz	ation's ex	kempt purpo	se in		
5	During	g the year, did the organization solicit o to be sold to raise funds rather than t								☐ Yes	□No	•
Par	t IV	Escrow and Custodial Arrange Complete if the organization ans X, line 21.		m 990,	, Part	IV, lin	ne 9, or	reporte	ed an amou	ınt on For	m 990, F	art'
1a		organization an agent, trustee, custod ed on Form 990, Part X?								Yes	□ No)
b	If "Ye:	s," explain the arrangement in Part XII	I and complete the fol	llowina	table:		Γ		Α	mount		•
c		ning balance		_			ŀ	1c				•
d	_	ons during the year					Ī	1d				
e		putions during the year					T I	1e				
f		g balance					h	1f				
									1:1:1-2			
2a		e organization include an amount on F							•		∐ No	1
b		s," explain the arrangement in Part XII	I. Check here if the ex	(planati	on has	been	provided	d in Part)	ΚΙΙΙ			
Pa	rt V	Endowment Funds.	word "Voc" on For	m 000	Dort	T\/ lie	o 10					
		Complete if the organization ans	(a) Current year	(b) Pi	rior yea	r (ears back	(d) Three year	ars back (e)) Four vears	back
La	Beginni	ng of year balance	(a) surrous you	(-)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-		(4) 111 00) 0		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	_	utions										
		estment earnings, gains, and losses										
		or scholarships										
е	Other e	xpenditures for facilities										
f	Adminis	strative expenses										
g	End of	year balance										
2	Provid	le the estimated percentage of the curr	ent vear end balance	(line 1c	ı. colur	mn (a)) held as	s:		•		
a		designated or guasi-endowment ▶		(5	,,	(-).	,					
b		nent endowment ►										
С		endowment 🟲										
		ercentages on lines 2a, 2h, and 2c show	ild equal 100%									
3a	The pe	ercentages on lines 2a, 2b, and 2c shown are endowment funds not in the posse ization by:	•	ion that	are he	eld and	l admini	stered fo	r the		Yes	No
3a	The pe Are th organi	ercentages on lines 2a, 2b, and 2c shower ere endowment funds not in the posse	ssion of the organizati	ion that	are he	eld and	admini	stered fo	r the	3a(i)		No
Ba	The period Are the organic (i) United	ercentages on lines 2a, 2b, and 2c shot ere endowment funds not in the posse ization by:	ssion of the organizati					stered fo	r the	3a(i) 3a(ii		No
	The perfect Are the organic (i) Unit (ii) Ref	ercentages on lines 2a, 2b, and 2c shot ere endowment funds not in the posse ization by: trelated organizations	ssion of the organizati	 on Sche	 dule R				r the			No
b I	The person or and (i) Un (ii) Regular The	ercentages on lines 2a, 2b, and 2c shot ere endowment funds not in the posse ization by: trelated organizations	ssion of the organizati ns listed as required o e organization's endow	 on Sche	 dule R				r the	3a(ii		No
ь 1	The perfect Are the organic (i) Unit (ii) Ref	ercentages on lines 2a, 2b, and 2c shown are endowment funds not in the posse ization by: I related organizations	ssion of the organizati ns listed as required of organization's endow nt.	on Schewment f	dule Runds.	 ? .	· ·			3a(ii 3b)	No
4	The pe Are th organi (i) Un (ii) Re If "Yes Descri	ercentages on lines 2a, 2b, and 2c shot ere endowment funds not in the posse ization by: trelated organizations	ns listed as required of eorganization's endownt. wered "Yes" on Formulation (b) Cost	on Schewment f	dule R unds. , Part	 ? . IV, lin	 			3a(ii 3b rt X, line)	
b 4 Par	The po Are th organi (i) Un (ii) Ro If "Yes Descri t VI	ercentages on lines 2a, 2b, and 2c shown are endowment funds not in the posse ization by: Included organizations	ns listed as required of eorganization's endownt. wered "Yes" on Formulation (b) Cost	on Schewment f	dule R unds. , Part	 ? . IV, lin	 			3a(ii 3b rt X, line	10.	
b 4 Par	The po Are the organi (i) Un (ii) Ro If "Yes Descrit t VI	ercentages on lines 2a, 2b, and 2c shot ere endowment funds not in the posse ization by: crelated organizations elated organizations c'' on 3a(ii), are the related organization be in Part XIII the intended uses of the Land, Buildings, and Equipme Complete if the organization anso- otion of property (a) Cost or ot (investment)	ns listed as required of eorganization's endownt. wered "Yes" on Formulation (b) Cost	on Schewment f	dule R unds. , Part	 ? . IV, lin	 			3a(ii 3b rt X, line	10.	
b 4 Par 1a b	The per Are the organic (i) Under (ii) Under (iii) Regular The Secrit VI Descript Land Are Building	ercentages on lines 2a, 2b, and 2c shown are endowment funds not in the posse ization by: I related organizations	ns listed as required of eorganization's endownt. wered "Yes" on Formulation (b) Cost	on Schewment f	dule R unds. , Part	 ? . IV, lin	 			3a(ii 3b rt X, line	10.	
b 4 Par 1a b	The per Are the organic (i) Undition (ii) Re If "Yes Descript VI Descript Land Building Leaseholder (iii) Are the per Are the	ercentages on lines 2a, 2b, and 2c shown are endowment funds not in the posse ization by: I related organizations	ns listed as required of eorganization's endownt. wered "Yes" on Formulation (b) Cost	on Schewment f	dule R unds. , Part	 ? . IV, lin	 			3a(ii 3b rt X, line	10.	
b 4 Par 1a b c	The po Are th organi (i) Un (ii) Re If "Yes Descript t VI Descript Land Building Leaseho	ercentages on lines 2a, 2b, and 2c shown are endowment funds not in the posse ization by: I related organizations	ns listed as required of eorganization's endownt. wered "Yes" on Formulation (b) Cost	on Schewment f	dule R unds. , Part	 ? . IV, lin	 			3a(ii 3b rt X, line	10.	

Part VII	Complete if the organization answered "Yes" on Form 990,	Part IV	ine 11h	See Form 990 I	Part X line	12
	(a) Description of security or category (including name of security)	(b) Book value			d of valuatio	n:
	Il derivatives					
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
(I)						
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 12.)	>				
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Form 990,	Part IV, l	ine 110	. See Form 990,	Part X, line	13.
	(a) Description of investment	·		(b) Book value	(c) Meth	od of valuation: d-of-year market value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
Total. (Colum Part IX	on (b) must equal Form 990, Part X, col.(B) line 13.) Other Assets.		•		<u> </u>	
	Complete if the organization answered 'Yes' on Form 990, (a) Description	Part IV, li	ne 11d	. See Form 990, Par		b) Book value
(1)	(-)					.,
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
Total. (Colu					>	
	Complete if the organization answered 'Yes' on Form 990, (a) Description of liability		ne 11e	or 11f.See Form	990, Part >	(, line 25.
1. (1) Federal	income taxes					(B) Book value
(2)						1
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col.(B) line 25.)	te to the o	rganizal	tion's financial state	ments that r	eports the
	or uncertain tax positions. In Part XIII, provide the text of the footnor's liability for uncertain tax positions under FIN 48 (ASC 740). Check		_	the footnote has be	en provided	

1

2

а

b

c

4

b

C 5

1

2

C

d

е

b

Part XIII

See Additional Data Table

5

3 4

Part XII

Schedule D (Form 990) 2020

Page 4

2.909.545

699,002

0

2,210,543

2,210,543

3,038,512

699,002

Add lines **4a** and **4b**

Donated services and use of facilities . . .

Prior year adjustments

Subtract line 2e from line 1

Other (Describe in Part XIII.) . .

Add lines 2a through 2d .

Return Reference

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Total expenses and losses per audited financial statements

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Other (Describe in Part XIII.) Add lines **4a** and **4b**

Supplemental Information

Net unrealized gains (losses) on investments

Donated services and use of facilities 2b Recoveries of prior year grants Amounts included on Form 990, Part VIII, line 12, but not on line 1:

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

2c Investment expenses not included on Form 990, Part VIII, line 7b .

2d 4a 4b

2a

2a

2b

2c

2d

4a

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

4c 5 1 699,002

2e

3

2e

3

699.002

2,339,510 2.339.510

Schedule D (Form 990) 2020

4b 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 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. Explanation

Page 5		chedule D (Form 990) 2020	
	ormation (continued)	Part XIII Supplemental Info	
	Explanation	Return Reference	

Schedule D (Form 990) 2020

Additional Data

Software ID: Software Version:

EIN: 45-3848336

Name: SUSTAINABLE JERSEY

ITS IN INCOME TAX EXPENSE. NO INTEREST AND PENALTIES WERE RECORDED DURING THE FISCAL YEARS ENDED JUNE 30, 2021 AND 2020. AT JUNE 30, 2021 AND 2020, THERE ARE NO SIGNIFICANT INCOME

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	THE ORGANIZATION FOLLOWS STANDARDS THAT PROVIDE CLARIFICATION ON ACCOUNTING FOR UNCERTAINT Y IN INCOME TAXES RECOGNIZED IN THE ORGANIZATION'S FINANCIAL STATEMENTS. THE GUIDANCE PRES CRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTE FOR THE RECOGNITION AND MEASUREME NT OF A TAX POSITION TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, AND ALSO PROVIDES GUID
	ANCE ON DERECOGNITION, CLASSIFICATION, INTEREST AND PENALTIES, DISCLOSURE AND TRANSITION. THE ORGANIZATION'S POLICY IS TO RECOGNIZE INTEREST AND PENALTIES, ON LINESCOGNIZED TAY BENEF

TAX UNCERTAINTIES.

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	SPECIAL EVENT EXPENSES

DLN: 93493066002182 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I OMB No. 1545-0047 **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ► Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization **Employer identification number** SUSTAINABLE JERSEY 45-3848336 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

✓ Yes 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 (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization cash (book, FMV, appraisal, noncash assistance or assistance grant or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50055P Schedule I (Form 990) 2020

Return Reference Explanation

PART I, LINE 2: ONCE A TOWNSHIP OR SCHOOL RECEIVES ITS CERTIFICATION, THE TOWNSHIP OR SCHOOL MUST PROVIDE WRITTEN GRANT SUMMARIES DESCRIBING THE

PROGRESS EACH TOWNSHIP OR SCHOOL HAS MADE AND MUST MEET CERTAIN REQUIREMENTS IN ORDER TO RECEIVE CONTINUED FUNDING AND SUPPORT. Schedule I (Form 990) 2020

Additional Data

435 MANSFIELD STREET HIGHLAND PARK, NJ 08904 BELLEVILLE TOWNSHIP

BELLEVILLE, NJ 07109

AVENUE

1ST FLOOR 152 WASHINGTON

Software ID:
Software Version:
EIN: 45
Name: St

22-6001645

EIN: 45-3848336

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

115

Name: SUSTAINABLE JERSEY

(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
BARTLE ELEMENTARY SCHOOL	22-6001980	115	5,000				2020 NJEA SMALL

5,000

GRANT AWARD

PSEG 2021 - SMALL

GRANTS AWARD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 22-6002074 115 5.000 CAMPBELL ELEMENTARY 12020 NJEA SMALL SCHOOL IGRANT AWARD 16 SIMPSON PLACE

ACE SMALL GRANT

IAWARD

5.000

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

115

16 SIMPSON PLACE
METUCHEN, NJ 08840

CAPE MAY CITY 21-6000429

643 WASHINGTON AVENUE

CAPE MAY, NJ 082042397

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 22-6001728 115 5.000 IPSEG 2018 SMALL CHRISTOPHER COLUMBUS MIDDLE SCHOOL IGRANT AWARD

2020 NJFA SMALL

IGRANT AWARD

745 CLIFTON AVENUE CLIFTON, NJ 07013 COLONIA HIGH SCHOOL 22-6002417 115 5.000

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

428 SCHOOL STREET

WOODBRIDGE, NJ 07095

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 22-6002268 115 5.000 2020 NJEA SMALL

IGRANTS AWARD

COPELAND MIDDLE SCHOOL PO BOX 500 16 SCHOOL ROAD HIBERNIA, NJ 07842

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

159 DEMOCRAT ROAD MICKLETON, NJ 08056

IGRANT AWARD EAST GREENWICH TOWNSHIP 21-6000543 115 5.000 IPSEG 2021 - SMALL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) EGG HARBOR CITY 21-6000546 115 5.000 ACE SMALL GRANT 500 LONDON AVENUE laward EGG HARBOR CITY, NJ 08215 ESSEX COUNTY - WEST 22-6002441 115 5.000 2016 NJFA SMALL IGRANTS AWARD

CALDWELL TECHNICAL SC TECHNICAL SCHOOL 60

NELSON PLACE 1 NEWARK, NJ 07102

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) 22-6002441 115 5.000 2020 NJEA SMALL ESSEX COUNTY - WEST CALDWELL TECHNICAL SC GRANT AWARD

TECHNICAL SCHOOL 60 NELSON PLACE 1 NEWARK, NJ 07102					GIV III / IW/III
GEORGE L CATRAMBONE ELEMENTARY SCHOOL	21-6000229	115	5,000		2020 NJEA SMALL GRANT AWARD

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

540 BROADWAY LONG BRANCH, NJ 07740

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government GLEN RIDGE BORO 22-6001834 115 5,000 PSEG 2021 - SMALL WARD

825 BLOOMFIELD AVENUE GLEN RIDGE, NJ 07028					GRANTS AWARD
HIGH BRIDGE BOROUGH SCHOOL DIST (2)	22-6001979	115	5,000		2020 GARDINER SMALL GRANTS AWARD

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

40 FAIR VIEW AVENUE HIGH BRIDGE, NJ 08829

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 21-6000749 115 5.000 HOWELL TOWNSHIP IPSEG 2021 - SMALL PO BOX 580 IGRANTS AWARD HOWELL, NJ 07731

2020 NJEA SMALL

IGRANT AWARD

5.000

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

115

22-6002242

JAMES MADISON

312 PIERSON AVENUE EDISON, NJ 08837

INTERMEDIATE FLEM SCHOOL

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government

IGRANT AWARD

JERSEY CITY 22-6002013 115 5.000 12020 GARDINER SMALL 280 GROVE STREET ROOM 2081 JERSEY CITY, NJ 07302

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

1740 MAIN STREET LAKE COMO, NJ 07719

IGRANTS AWARD

LAKE COMO BOROUGH 21-6001198 115 5.000 2018 GARDINIER SMALL

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government DINIER SMALL

15 PARK AVE MAYWOOD, NJ 07607					SIGNITIO AWARD
MAYWOOD ADMINISTRATIVE BUILDING	22-6002067	115	5,000		2020 GARDINIER S GRANTS AWARD

ACE SMALL GRANT MEDFORD TOWNSHIP 21-6000852 1151 5.0001 17 NORTH MAIN STREET IAWARD

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

MEDFORD, NJ 08055

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 22-1915868 115 5.000 MOUNT LAUREL TOWNSHIP IPSEG 2021 - SMALL 100 MOUNT LAUREL ROAD IGRANTS AWARD MOUNT LAUREL, NJ 08054

MOUNT LAUREL, NJ 08054

NEWARK PUBLIC SCHOOL 22-6002140 115 5,000 PSEG 2018 SMALL GRANT AWARD

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

765 BROAD STREET NEWARK, NJ 07102

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 22-6002140 115 5.000 NEWARK PUBLIC SCHOOL 12020 GARDINIER SMALL DISTRICT IGRANTS AWARD

IGRANTS AWARD

DISTRICT
765 BROAD STREET
NEWARK, NJ 07102

OCEAN TOWNSHIP SCHOOL 21-6000113 115 5,000 2020 GARDINER SMALL

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

DISTRICT

163 MONMOUTH ROAD OAKHURST, NJ 07755

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 22-6002188 115 5.000 PARK RIDGE BOROUGH 12018 GARDINIER SMALL

53 PARK AVENUE IGRANT AWARD PARK RIDGE, NJ 07656 PATERSON CITY 22-6002200 115 5.000

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

PATERSON, NJ 07505

IPSEG 2021 - SMALL 155 MARKET STREET 2ND IGRANTS AWARD FLOOR

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 21-6000282 115 5.000 PENNS GROVE-CARNEYS 12020 NJEA SMALL POINT REG SCH DIST IGRANT AWARD

IGRANT AWARD

100 IONA AVENUE PENNS GROVE, NJ 08069

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

641 PLAINSBORO ROAD

PLAINSBORO, NJ 08536

PLAINSBORO TOWNSHIP 22-6016682 115 5.000 2019 GARDINIER

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 22-6002227 115 5.000 PSEG 2021 - SMALL POMPTON LAKES BOROUGH 25 LENOX AVENUE IGRANTS AWARD

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

PRINCETON, NJ 08540

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) PRINCETON 30-0746654 115 5 0001 12018 GARDINIER SMALL /ARD

IPSEG 2019 MUNICIPAL

IGRANT AWARD

TRINCETON	30 07 70037	113	3,000		I ZOTO GANDI
WITHERSPOON HALL 400					GRANT AWA
WITHERSPOON ST					
ST					
PRINCETON, NJ 08540					

5.000

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

115

ROSELLE PARK BOROUGH

110 E WESTFIELD AVENUE

ROSELLE PARK, NJ 07204

22-6002275

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government

2018 GARDINIER SMALL IGRANT AWARD

22-6002288 115 5.000 PSEG 2021 - SMALL SAYREVILLE BOROUGH 167 MAIN STREET IGRANTS AWARD SAYREVILLE, NJ 08872

5.000

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

115

SPARTA TOWNSHIP

65 MAIN STREET SPARTA, NJ 07871 22-6002317

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) TAUNTON ELEMENTARY 21-6000185 115 5.000 12020 NJEA SMALL

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

1144 HOOPER AVENUE TOMS RIVER, NJ 08753

SCHOOL ADMINISTRATION BUILDING PO BOX 579 HOWELL, NJ 07731					GRANT AWARD
TOMS RIVER - HIGH SCHOOL SOUTH	21-6000322	115	5,000		NJEA 2017 GRANT AWARD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government TOMS RIVER - HIGH SCHOOL 21-6000322 115 5.000 12020 NJEA SMALL SOUTH IGRANT AWARD

1144 HOOPER AVENUE TOMS RIVER, NJ 08753 ACE SMALL GRANT

TOWNSHIP OF HAMILTON 21-6000690 115 5.000 6101 THIRTEENTH STREET IAWARD

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

MAYS LANDING, NJ 08330

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) WARREN TOWNSHIP 22-6002374 115 5.000 2018 GARDINIER SMALL

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

VALLEY ROAD MONTCLAIR, NJ 07042

46 MOUNTAIN BOULEVARD WARREN, NJ 07059	12 000207	110	3,000		GRANT AWARD
WATCHUNG ELEMENTARY SCHOOL MONTCLAIR BOARD OF EDUCATION 22	22-6002096	115	5,000		2020 NJEA SMALL GRANT AWARD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government WEST ORANGE HIGH SCHOOL 22-6002398 115 5 0001 2020 NIFA SMALL

179 EAGLE ROCK AVENUE WEST ORANGE, NJ 07052			5,555		GRANT AWARD
WHITING ELEMENTARY	21-6000343	115	5,000		PSEG 2018 SMALL

SCHOOL IGRANT AWARD 121 ROUTE 539 PO BOX 4100

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

WHITING, NJ 08759

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 21-6000136 115 5.000 2017 GARDINIER WINSLOW TOWNSHIP SCHOOL IGRANT

IGRANT AWARD

DISTRICT 40 COOPER FOLLY ROAD ATCO. NJ 08004 WINSLOW TOWNSHIP SCHOOL 21-6000136 115 5.000 2020 NJEA SMALL

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

NO 2 ELEM SCHOOL

40 COOPER FOLLY ROAD ATCO, NJ 08004

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government

2020 GARDINIER SMALL

IGRANTS AWARD

WINSLOW TOWNSHIP SCHOOL NO 4 ELEM SCHOOL 40 COOPER FOLLY ROAD ATCO, NJ 08004	21-6000136	115	5,000		2020 NJEA SMALL GRANT AWARD

5.000

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

115

WOODBRIDGE TOWNSHIP (V)

1 MAIN STREET 3RD FLOOR

WOODBRIDGE, NJ 07095

22-6002416

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance organization if applicable grant cash or assistance or government assistance other) 10.000 CAMDEN CITY PUBLIC 21-6000154 115 12020 GARDINIER SMALL IGRANTS AWARD

SCHOOLS 1033 CAMBRIDGE STREET CAMDEN. NJ 08105

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

21-6000484 115 10.000 COLLINGSWOOD BOROUGH IPSEG 2020 MUNICIPAL

ISMALL GRANTS AWARD

BOROUGH HALL 678 HADDON

COLLINGSWOOD, NJ 08108 - REPLACEMENT FOR LOST CHECK#2244

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 019 MUNICIPAL

IGRANTS AWARD

ELIZABETH CITY 50 WINFIELD SCOTT PLAZA ELIZABETH, NJ 07201	22-6001779	115	10,000			PSEG 2019 MUNI GRANT AWARD
		l l		l	I	1

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

97 WEST MAIN STREET HIGH BRIDGE, NJ 08829

115 10.000 IPSEG 2021 - SMALL HIGH BRIDGE BOROUGH 22-6001978

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 21-6000806 115 10.000 PSEG 2021 - SMALL LONG BRANCH CITY CITY HALL 344 BROADWAY IGRANTS AWARD

CITY HALL 344 BROADWAY LONG BRANCH, NJ 07740

MONTGOMERY TOWNSHIP 22-6002099 115 10,000 PSEG 2021 - SMALL GRANTS AWARD BELLE MEADE, NJ 08502

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

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other)

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

PARSIPPANY-TROY HILLS TOWNSHIP 1001 PARSIPPANY BOULEVARD PARSIPPPANY TROY HILLS, NJ 07054	22-6002190	115	10,000		2020 GARDINIER SMALL GRANT AWARD
SOMERVILLE BOROUGH	22-6002297	115	10,000		PSEG 2018 MUNICIPAL

IGRANT AWARD

SOMERVILLE BOROUGH BOROUGH HALL 25 WEST END

SOMERVILLE, NJ 08876

AVENUE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other)

CAMDEN CITY PUBLIC SCHOOLS 1033 CAMBRIDGE STREET CAMDEN, NJ 08105	21-6000154	115	15,000		2018 GARDINIER SMALL GRANT AWARD
HOLLAND TOWNSHIP TOWNSHIP OF HOLLAND 61	22-6001997	115	15,000		2017 GARDINIER GRANT

CHURCH STREET MILFORD, NJ 08848

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

efil	e GRAPHIC pi	rint - DO NOT PROCESS	As Filed Data	a -	DLN: 934	9306	6002	182
Sch	nedule J	C	ompensati	on Information	ОМ	B No. :	1545-0	047
(Fori	m 990)		Compensa ganization answ	rustees, Key Employees, and Highest ted Employees ered "Yes" on Form 990, Part IV, line to Form 990.	e 23.	20	20	<u> </u>
•	tment of the Treasury al Revenue Service	➤ Go to <u>www.irs.go</u>	ov/Form990 for	instructions and the latest information	on. O	pen t Insp		
Nar	me of the organiz	ı ation		Emį	ployer identificati			
SUS	STAINABLE JERSEY			45-3	3848336			
Pa	rt I Questi	ons Regarding Compensa	ation	-				
	•				Г		Yes	No
1a				the following to or for a person listed on y relevant information regarding these ite				
		s or charter travel		Housing allowance or residence for person				
		companions	님	Payments for business use of personal re				
		nification and gross-up payment	ts 📙	Health or social club dues or initiation fe				
	□ Discretion	nary spending account		Personal services (e.g., maid, chauffeur,	, cner)			
b				follow a written policy regarding payment ve? If "No," complete Part III to explain	t or	1b		
2				or allowing expenses incurred by all r, regarding the items checked on Line 1a		2		
	unectors, truste	es, officers, including the CEO/	Executive Director	, regarding the items checked on time 1a				
3				d to establish the compensation of the				
				iot check any boxes for methods CEO/Executive Director, but explain in Pai	rt III.			
	П с		✓	Muithous amount as the section of				
		ation committee ent compensation consultant		Written employment contract Compensation survey or study				
		of other organizations		Approval by the board or compensation	committee			
4		, did any person listed on Form	990, Part VII, Sec	ction A, line 1a, with respect to the filing				
а	Receive a sever	ance payment or change-of-cor	ntrol payment?			4a		No
b				fied retirement plan?		4b		No
С	•		•	sation arrangement?	[4c		No
	If "Yes" to any	of lines 4a-c, list the persons an	d provide the app	licable amounts for each item in Part III.				
	0	\ F04(-\(\4\) F04(-\(\20\)	.	t. complete lines 5.0				
5), 501(c)(4), and 501(c)(29	, ,	the organization pay or accrue any				
5	compensation c	ontingent on the revenues of:	on A, ilile Ta, did t	the organization pay or accrue any				
а	The organization	n?				5a		No
b	=					5b		No
		5a or 5b, describe in Part III.						
6		ed on Form 990, Part VII, Section Ontingent on the net earnings o		the organization pay or accrue any				
а	The organization	n?				6a		No
b	, -				. [6b		No
	· ·	6a or 6b, describe in Part III.						
7				the organization provide any nonfixed rt III		7		No
8	subject to the ir	nitial contract exception describe	ed in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," descrit · · · · · · · · · · · · · · · · · · ·		8		No
9	If "Yes" on line	8, did the organization also follo	ow the rebuttable	presumption procedure described in Regu	ulations section	9		No_
For F	Panerwork Redu	iction Act Notice, see the Ins	structions for Fo	rm 990. Cat. No. 5005	3T Schedule J		990)	2020

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

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

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

Note. The sum of colum	Do no	ot list any individuals that)(i)-(iii) for each listed in	t are not listed on Form 9' dividual must equal the to	90, Part VII. otal amount of Form 990,	Part VII, Section A, line	1a, applicable column (D)	and (E) amounts for tha	t individual.
(A) Name and Title		(i) Base	of W-2 and/or 1099-MIS	(iii) Other	(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
		compensation	compensation	reportable compensation	compensation			Form 990
1 RANDALL SOLOMON EXECUTIVE DIRECTOR	(i)	134,685	0	0	11,560	20,379	166,624	0
	(ii)	0	0	0	0	0	0	0
	+							
	+							
	1						Schedule	J (Form 990) 2020



efile GRAPH	C print - DO NOT PROCESS As I	Filed Data -		DLN:	93493066002182			
SCHEDUL (Form 990 or EZ)	990- Complete to provide in Form 990 or 990	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. Go to www.irs.gov/Form990 for the latest information.						
Namel Bethavofg SUSTAINABLE JER: 990 Schedule				Employer identi 45-3848336	fication number			
Return Reference			Explanation					
FORM 990, PART VI, SECTION B, LINE 11B	THE BYLAWS CALL FOR THE FINANCE COMMITTEE TO ENSURE THE PREPARATION OF AN INDEPENDENT FINA NCIAL AUDIT. THE BOARD OF TRUSTEES APPOINTED AN AUDIT SUBCOMMITTEE OF THE FINANCE COMMITTE E TO OVERSEE AND DIRECT THE PREPARATION OF AN AUDIT AND ASSOCIATED TAX FORMS. ONCE FINALIZ ED, THE AUDIT AND FOR 990 WERE SENT VIA EMAIL TO THE MEMBERS OF THE AUDIT SUBCOMMITTEE. TH E AUDIT SUBCOMMITTEE REVIEWED THE AUDIT AND 990 AND RECOMMENDED TO THE EXECUTIVE COMMITTEE TO APPROVED THE SUBMISSION OF THESES DOCUMENTS. THE EXECUTIVE COMMITTEE APPROVED THE SUBMISSION OF THEIR MONTHLY MEETING.							

Return Explanation
Reference

FORM 990, PART VI, SECTION B, LINE 12C

Return Explanation
Reference

FORM 990,	SINCE THE ORGANIZATION'S EMPLOYEES ARE PAID BY THE COLLEGE OF NEW JERSEY. THE COLLEGE'S HR
PART VI,	DEPARTMENT REVIEWS AND APPROVES ALL SALARY OFFERS AND ADJUSTMENTS AND THE EXECUTIVE DIREC
SECTION B,	TOR'S ANNUAL REVIEW IS SHARED WITH THE BOARD.
LINE 15A	

Return Explanation
Reference
FORM 990, FORM 990 IS AVAILABLE UPON REQUEST.

LINE 18

FORM 990, PART VI, SECTION C,

Return Explanation
Reference

FORM 990, PART VI, SECTION C.

990 Schedule O, Supplemental Information

LINE 19

Return Explanation

Reference	
FORM 990,	CONTRACTED SERVICES: PROGRAM SERVICE EXPENSES 219,416. MANAGEMENT AND GENERAL EXPENSES 59,
PART IX,	407. FUNDRAISING EXPENSES 4,884. TOTAL EXPENSES 283,707.
LINE 11G	

Return Explanation Reference

FORM 990. THE FINANCIAL OVERSIGHT PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR. PART XI.

LINE 2C:

990 Schedule O, Supplemental Information

SCHEDULE R

(Form 990)

Related

Department of the Treasury

Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

► Attach to Form 990.

► Go to <u>www.irs.gov/Form990</u> for instructions and the latest information.

2020

DLN: 93493066002182

Open to Public Inspection

Name of the organization SUSTAINABLE JERSEY								identificatio	n number		
Part I Identification of Disregarded Entities. Complete if	f the organi	zation answer	ed "Yes	s" on Form	990, Part	IV, line 3	45-384833 3.	0			
(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary activity		ty Legal domicile (st or foreign countr		(d) Total inco	me End-o	(e) ıf-year assets	(f) Direct control entity		
Part II Identification of Related Tax-Exempt Organization	ns. Complet	te if the orgar	ization	answered '	'Yes" on F	orm 990,	Part IV, line	e 34 becaus	e it had one or	more	
related tax-exempt organizations during the tax year. (a) Name, address, and EIN of related organization	Primar	(b) Primary activity		(c) domicile (state eign country)		l) de section	(e) Public charity (if section 501		(f) Direct controlling entity	ent	ity?
(1)THE COLLEGE OF NEW JERSEY 2000 PENNINGTON ROAD EWING, NJ 08618 22-2797393	SUPPORT ORGANIZATION WITH OFFICE SPACE, MANAGEMENT AND PERSONNEL SERIVCES		NJ		501(C)3		170(B)(1)(A)(V	/I)		Yes	No No
For Paperwork Reduction Act Notice, see the Instructions for Form S	990.		Ca	t. No. 50135				Sch	nedule R (Form	990) 20	020

		(b)	1		1	1				1			
(a) Name, address, and EIN of related organization			(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related unrelated, excluded from tax under sections 512- 514)			(h) Disproprtionat allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	partr	al or Pe ging ov	(k) rcenta vnersl
					314)			Yes	No		Yes	No	
Identification of Related Orga because it had one or more relate						l ization ans	L wered "Ye:	l s" on F	orm 9	I 990, Part IV	, line	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	l do (state	(c) egal micile or foreign		entity (C c	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of e yea asse			n) ntage rship	Section (13)	(i) on 5 cont ntity
		со	untry)									Yes	\$
													+
													+
													+
													+
-				1									

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

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

No

Nο

No

Page 3

Tansactions with related organizations. complete if the organization answered resident for the say, say, or so.								
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 orgranization 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					
h. Gift, grant, or capital contribution to related organization(s)	1b		No					

Part V. Transactions With Polated Organizations. Complete if the organization answered "Ves" on Form 900. Part IV. line 34, 35h. or 36

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.

(b)

Transaction

type (a-s)

(c)

Amount involved

(a)

Name of related organization

1d 1e

1c

1f

1q

11

1m

10 Yes

1q

1r

15

Schedule R (Form 990) 2020

(d)

Method of determining amount involved

1n Yes

Yes

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	domicile	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	section 501(c)(3) organizations?		section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets			(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership	
			314)	Yes	No			Yes	No		Yes	No				
							-			Schedul	e R (Form	990	0) 2020			

Schedule R (Fo	P ₁	age 5								
Part VII	Supplemental Info	Supplemental Information								
	Provide additional information for responses to questions on Schedule R. (see instructions).									
Return Reference		Explanation								