

### \*\* PUBLIC DISCLOSURE COPY \*\*

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

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

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

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public

Α	For the	2020 calendar year, or tax year beginning OCT 1, 2020 and endin	ig S.	EP 30, 2021		
В	Check if applicable	C Name of organization NATIONAL ENVIRONMENTAL EDUCATION AND		D Employer identifi	cation number	
	Addres change	TRAINING FOUNDATION, INC.				
F	Name change	Doing business as SEE SCHEDULE O		54-15570	43	
F	Initial return	Number and street (or P.O. box if mail is not delivered to street address)  Room.	/suite	E Telephone numbe		
	Final return/	4301 CONNECTICUT AVENUE, NW 160		(202)833		
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	3,751,948.	
	Amend return	WASHINGTON, DC 20000		H(a) Is this a group re	eturn	
	Application	F Name and address of principal officer: HERT - HARGARET DECODES		for subordinates	? Yes X No	
	pendin	SAME AS C ABOVE		H(b) Are all subordinates in	ncluded? Yes No	
		mpt status: X 501(c)(3) 501(c) ( ) ( insert no.) 4947(a)(1) or	527	If "No," attach a	list. See instructions	
		e: ▶ WWW.NEEFUSA.ORG		H(c) Group exemptio	n number 🕨	
K	Form of	organization: X Corporation Trust Association Other ► L	. Year o	of formation: 1990 N	🖊 State of legal domicile: VA	
P		Summary				
ø	1 6	Briefly describe the organization's mission or most significant activities: ${\color{red} {\sf SEE}} {\color{black} {\sf PAR'}}$	T I	II, LINE 1.		
Governance	_					
ern	2 (	Check this box $lacktriangledown$ if the organization discontinued its operations or disposed of	f more	than 25% of its net as		
Š		Number of voting members of the governing body (Part VI, line 1a)			9	
<u>«</u>		Number of independent voting members of the governing body (Part VI, line 1b)			9	
es		Total number of individuals employed in calendar year 2020 (Part V, line 2a)			24	
Activities		Total number of volunteers (estimate if necessary)			4000	
Act		Total unrelated business revenue from Part VIII, column (C), line 12			0.	
	1 d	Net unrelated business taxable income from Form 990-T, Part I, line 11		7b	0.	
Revenue				Prior Year	Current Year	
		Contributions and grants (Part VIII, line 1h)		3,022,014.	3,749,071.	
	1	Program service revenue (Part VIII, line 2g)		0.	0.	
		nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		3,947.		
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,885.		
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		3,029,846.		
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		424,688.	839,176.	
		Benefits paid to or for members (Part IX, column (A), line 4)		0.		
Expenses	15 5	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	-	2,231,658.	2,221,995.	
en	16a F	Professional fundraising fees (Part IX, column (A), line 11e)		<u> </u>	0.	
Ä	b	Total fundraising expenses (Part IX, column (D), line 25)  229,096.		717,426.	862,306.	
	17 (	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		3,373,772.		
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		-343,926.		
_ 0		Revenue less expenses. Subtract line 18 from line 12	- Boo			
ts o		Tabel accepts (Dart V. line 40)	Бед	ginning of Current Year 2,656,159.	End of Year 2,573,644.	
ASSE Bals	20	Total assets (Part X, line 16)		752,879.	841,893.	
Net Assets or Fund Balances	21 7	Total liabilities (Part X, line 26)		1,903,280.	1,731,751.	
	art II	Net assets or fund balances. Subtract line 21 from line 20		1,505,200	1,731,731	
		ties of perjury I declare that I have examined this return, including accompanying schedules and s	stateme	ents, and to the hest of m	v knowledge and helief it is	
	-	, and complete. Declaration of preparer (other than officer) is based on all information of which pro			y miowioago ana bonon, icio	
	1	N. C.				
Sig	ın İ	Signature of officer		Date		
Here MERI-MARGARET DEOUDES, PRESIDENT & CEO February 16, 2022						
	.	Type or print name and title				
		Print/Type preparer's name Preparer's signature/		ate Check	PTIN	
Pai		RICHARD J. LOCASTRO, CPA/Clibard J. holast	10	02/11/2022 if self-employ	P00288314	
Pre	-	Firm's name GELMAN, ROSENBERG & FREEDMAN			52-1392008	
Use	Only	Firm's address 4550 MONTGOMERY AVE SUITE 800N				
		BETHESDA, MD 20814-2930		Phone no. ( 3		
Ма	y the IR	S discuss this return with the preparer shown above? See instructions			X Yes No	

	NATIONAL ENVIRONMENTAL EDUCATION AND	
Forn	n 990 (2020) TRAINING FOUNDATION, INC. 54-1557043 Page	2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	ζ.
1	Briefly describe the organization's mission:	
	THE NATIONAL ENVIRONMENTAL EDUCATION AND TRAINING FOUNDATION, DOING	
	BUSINESS AS NEEF, IS THE NATION'S LEADING ORGANIZATION IN LIFELONG	
	ENVIRONMENTAL LEARNING, CREATING OPPORTUNITIES FOR PEOPLE TO	
	EXPERIENCE AND LEARN ABOUT THE ENVIRONMENT (CONTINUED ON SCHEDULE O)	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	О
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X N	О
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	

revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 1,358,833. including grants of \$ 629,166.) (Revenue \$ CONSERVATION:

WITH A COMMITMENT TO CONNECTING PEOPLE TO NATURE AND PREPARING THE NEXT GENERATION OF ENVIRONMENTAL STEWARDS, MANY OF NEEF'S PROGRAMS ENGAGE THE PUBLIC WITH THE OUTDOORS, PRIMARILY ON PUBLIC LANDS. THIS CATEGORY INCLUDES ENGAGING PEOPLE NATIONWIDE TO IMPROVE AND PROTECT PUBLIC LANDS THROUGH NATIONAL PUBLIC LANDS DAY, THE NATION'S LARGEST SINGLE-DAY VOLUNTEER EFFORT FOR PUBLIC LANDS; AND SEVERAL GRANT PROGRAMS FOCUSED ON BIODIVERSITY, VOLUNTEERISM, AND ENVIRONMENTAL EDUCATION, INCLUDING

THE DEPARTMENT OF DEFENSE'S LEGACY GRANTMAKING PROGRAM.

- 4b (Code: )(Expenses \$ 943,312. including grants of \$ 198,510.) (Revenue \$ K-12 EDUCATION:

  NEEF IS DEDICATED TO CULTIVATING AN ENVIRONMENTALLY CONSCIOUS AND RESPONSIBLE PUBLIC THROUGH ENVIRONMENTAL EDUCATION PROGRAMS AND INITIATIVES. AT NEEF, WE BELIEVE THERE IS MUCH TO LEARN FROM OBSERVING AND ENGAGING WITH THE NATURAL WORLD. OUR WORK IS GUIDED BY OUR GREENING STEM APPROACH, WHICH EMBRACES HANDS-ON, PLACE-BASED EDUCATION AS A KEY TO BETTER LEARNING OUTCOMES AND A DEEPER SENSE OF ENVIRONMENTAL
  - GREENING STEM DEMONSTRATION PROJECTS: ON-THE-GROUND PROJECTS TO HELP EDUCATORS ADAPT AND IMPLEMENT GREENING STEM INTO THEIR CURRICULUM WITH DOCUMENTED STUDENT OUTCOMES.
- 4c (Code: \_\_\_\_) (Expenses \$ 520,397. including grants of \$ 11,500.) (Revenue \$ \_\_\_\_\_)
  HEALTH:

  NEEF'S HEALTH WORK BUILDS A BROAD, INCLUSIVE COALITION OF STAKEHOLDERS
  TO FOCUS ON ENVIRONMENTAL HEALTH CONCERNS AND BENEFITS. THROUGH OUR

TO FOCUS ON ENVIRONMENTAL HEALTH CONCERNS AND BENEFITS. THROUGH OUR PEDIATRIC ASTHMA INITIATIVE, NEEF PROVIDES FREE TRAINING TO HEALTHCARE PROFESSIONALS TO HELP THEM IDENTIFY THE WAY THE ENVIRONMENT INFLUENCES PATIENT HEALTH OUTCOMES AND PROVIDES TRAINING AND SUPPORT TO MITIGATE OR ENCOURAGE THOSE EFFECTS.

4d	Other program services (Describe on Schedule O.)		
	730 //1	\	

e Total program service expenses ► 3,561,983.

Form **990** (2020)

STEWARDSHIP.

### Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			x
4	public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	4	Х	
5	during the tax year? If "Yes," complete Schedule C, Part II  Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-	-21	
J	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Х
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		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			3,7
_	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			7.7
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	170		<del></del>
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			3,7
	1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
00	complete Schedule G, Part III	19		X
20a	7 1	20a		<u> </u>
21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
۲۱	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
	Section of the second of the s			

Part IV 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			1
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	23	x	
24a	Schedule J  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		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	04-		
Ч	any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24c 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	244		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
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? If "Yes," complete			
	Schedule L, Part I	25b		X
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%	00		x
27	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II  Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	26		
21	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? If "Yes," complete Schedule L, Part III	27		х
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		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			٠,,
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	22		X
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I  Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
٥,	Part V, line 1	34		х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			x
37	If "Yes," complete Schedule R, Part V, line 2  Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		├^
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<u> </u>		
	Note: All Form 990 filers are required to complete Schedule O  t V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V			$\perp \!\!\! \perp$
	E		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 4			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	(gambling) winnings to prize winners?	1c	Х	
		-		

Form 990 (2020) TRAINING FOUNDATION, INC.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Fai	Statements negariting other in 3 mings and rax compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 24		37	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			37
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	_		Х
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		
р	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			Х
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
оа	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	60		х
<b>L</b>	any contributions that were not tax deductible as charitable contributions?  If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a		
D		6h		
7	were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).	6b		
7	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Х
a b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a 7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.0		
C	to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	70		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?  N/A	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?  N/A	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?  N/A	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12 N/A 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:			
а	Gross income from members or shareholders N/A 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources 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? N/A	13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans  13b			
C	Enter the amount of reserves on hand	4.6 -		X
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		_^
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	4.5		Х
	excess parachute payment(s) during the year?	15		A
16	If "Yes," see instructions and file Form 4720, Schedule N.  Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
16		10		22
	If "Yes," complete Form 4720, Schedule O.			

Form 990 (2020)

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
	ton / it do tonning body and management		Yes	No
<b>1</b> a	Enter the number of voting members of the governing body at the end of the tax year		100	110
	If there are material differences in voting rights among members of the governing body, or if the governing	1		
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b			
2		1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	2		Х
3	officer, director, trustee, or key employee?  Did the organization delegate control over management duties customarily performed by or under the direct supervision	<del>-</del>		
3		,		х
4	of officers, directors, trustees, or key employees to a management company or other person?	4		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	6		X
6	Did the organization have members or stockholders?	F-6		22
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or		x	
	more members of the governing body?	7a		
D	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	7.	x	
•	persons other than the governing body?  Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		
8		0-	Х	
a	The governing body?	8a	X	
	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		x
S00	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	<u> </u>		_ 21
360	tion b. Folicies (This Section B requests information about policies not required by the internal nevertue Code.)		Yes	No
100	Did the exception have level charters branches as affiliates?	10a	res	No X
	Did the organization have local chapters, branches, or affiliates?	IUa		1
D	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		
110	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	IIa		
		12a	х	
12a	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
C		100	х	
10	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	14	X	
14 15	Did the organization have a written document retention and destruction policy?	14	22	
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?	45-	Х	
	The organization's CEO, Executive Director, or top management official	15a	<del>  ^</del>	Х
D	Other officers or key employees of the organization	15b		
160	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			
iva		160		Х
h	taxable entity during the year?  If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a		
Б	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		
<u> 17</u>	List the states with which a copy of this Form 990 is required to be filed ►SEE SCHEDULE O			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)	3)s only	/) avail	able
-	for public inspection. Indicate how you made these available. Check all that apply.	,)	,	
	Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, a	nd fina	ncial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	NANCY SMITH - (202)261-6467			
	4301 CONNECTICUT AVENUE, NW, SUITE 160, WASHINGTON, DC 20008			

Form 990 (2020)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

See instructions for the order in which to list the persons above.

(A)	(B)			((	C)			(D)	(E)	(F)
Name and title	Average	(40	not c	Pos	ition	1		Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation	amount of
	week	-	cer ar	nd a d	lirecto	or/trus	itee)	from	from related	other
	(list any	Individual trustee or director						the	organizations	compensation
	hours for related	or di	99			sated		organization	(W-2/1099-MISC)	from the
	organizations	ustee	trust		e e	nben		(W-2/1099-MISC)		organization and related
	below	dual tr	Institutional trustee	_	Key employee	Highest compensated employee	_			organizations
	line)	ndivic	nstitu	Officer	(ey er	Highe:	Former			5.ga <b>_</b>
(1) MERI-MARGARET DEOUDES	40.00	Ι-	-							
PRESIDENT & CEO		1		Х				259,778.	0.	46,498.
(2) NANCY SMITH	40.00									
VP OF FINANCE & ADMIN		1		Х				156,457.	0.	23,171.
(3) SARA ESPINOZA	40.00									
VP, PROGRAMS					Х			157,078.	0.	17,435.
(4) AMY SKALMUSKY	40.00									
VP, MARKETING & COMMUNICATIONS		1				Х		119,531.	0.	27,565.
(5) DEBORAH LUCCI	40.00									
VP, DEVELOPMENT		1				Х		109,140.	0.	1,279.
(6) MEGAN REILLY CAYTEN	1.00									
BOARD CHAIR (UNTIL 05/2021)		Х		Х				0.	0.	0.
(7) KEVIN BUTT	1.00									_
BOARD CHAIR (FROM 05/2021)		Х		Х				0.	0.	0.
(8) TODD GREENWOOD	1.00									
BOARD TREASURER		Х		Х				0.	0.	0.
(9) CARLOS ALCAZAR	1.00									
BOARD MEMBER		Х						0.	0.	0.
(10) KATHARINE EMERSON	1.00									
BOARD MEMBER		Х						0.	0.	0.
(11) JENIFFER HARPER-TAYLOR	1.00									
BOARD MEMBER		Х						0.	0.	0.
(12) KATIE HOGGE	1.00									
BOARD MEMBER		Х						0.	0.	0.
(13) JENNIFER LOVE	1.00									
BOARD MEMBER		Х						0.	0.	0.
(14) LORI MCFARLING	1.00							_	_	_
BOARD MEMBER		Х						0.	0.	0.
(15) STEPHEN SIKRA	1.00							_	_	_
BOARD MEMBER		Х						0.	0.	0.
		1								
										5 000 (2222)

Form **990** (2020)

c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Ves   No	Par	t VIII Section A Officers Directors Trus					4 Hi	iaha	et (	Compensated Employe		<del>,</del>	0 1 3	- '	age <b>c</b>
Name and title    Average   Possition   Po	1 311			Picy	7003			gne	31 (					(F)	
Compensation   Comp				<b> </b> , .		Pos	itior			1			Es		ed
Subtotal			hours per	box	, unle	ss pe	rson	is bot	h an	· ·	•				
Note for related organizations   Page   P				_	cer an	nd a d	irecto	or/trus	itee)	1					
1b Subtotal				lirecto				L						•	
1b Subtotal				e or d	stee			nsated		_	(88-2/1099-18113	5C)			
1b Subtotal			organizations	truste	al tru		yee	adwo		(** = *********************************					
1b Subtotal				vidual	itutior	Je.	emplc	hest c	ner				orga	anizati	ons
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Ves   No			line)	Indi	Inst	ij	Key	Hig	Pon						
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Ves   No															
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Ves   No															
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Ves   No															
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Ves   No															
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Ves   No															
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Ves   No															
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Ves   No															
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Ves   No															
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Ves   No															
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Ves   No															
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Ves   No								_							
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Ves   No															
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Ves   No															
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Ves   No															
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Ves   No															
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)  2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization    Ves   No															
c Total from continuation sheets to Part VII, Section A	1b	Subtotal							▶	801,984.		0.	11	5,9	48.
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization.    Yes   No	С														
Yes   No   Yes   Y	d	Total (add lines 1b and 1c)							<u> </u>	801,984.		0.	11	5,9	48.
Yes   No   South   S	2	- · · · · · · · · · · · · · · · · · · ·	ot limited to th	ose	liste	ed al	bov	e) wl	no r	eceived more than \$100	0,000 of reportab	le			_
Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Name and business address  NONE  Bescription of services  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who received more than		compensation from the organization												V	
line 1a? If "Yes," complete Schedule J for such individual  4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1 a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 X  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Compensation  1 Obscription of services  1 Obscription of services  (C)  Compensation	•	Diel Herrich et au ferman (final)	-10											res	NO
For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual.  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 X  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Compensation  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who received more than	3	,	•		•	•	•		•		•		2		x
and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual  5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  5 X  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  Name and business address  NONE  Description of services  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than	4	•											3		
Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person  Section B. Independent Contractors  1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Compensation  Description of services  Total number of independent contractors (including but not limited to those listed above) who received more than	7		-		-					•	the organization		4	Х	
rendered to the organization? If "Yes," complete Schedule J for such person 5	5										idual for services				
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A)  (B)  (C)  Compensation  Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than		* *	-				-			_			5		Х
the organization. Report compensation for the calendar year ending with or within the organization's tax year.  (A) (B) (C) Compensation  None and business address None  Description of services  Compensation  2 Total number of independent contractors (including but not limited to those listed above) who received more than	Sec	tion B. Independent Contractors													
(A) Name and business address NONE Description of services Compensation  2 Total number of independent contractors (including but not limited to those listed above) who received more than	1											npens	ation 1	from	
Name and business address NONE Description of services Compensation  Total number of independent contractors (including but not limited to those listed above) who received more than		-	the calendar y	ear	endi	ng v	vith	or w	ithi		year.				
2 Total number of independent contractors (including but not limited to those listed above) who received more than			address	NT/	\NTI	7				. ,	envices				n
· · · · · · · · · · · · · · · · · · ·		Name and business	address	11/	)INI	<u>.                                    </u>				Description of s	iei vices		ompe	iisatio	11
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· · · · · · · · · · · · · · · · · · ·		Total number of independent contractors (	neluding but a	ot II	mita	d +c	the	SC 11		d abovo) who received =	oro than				
	~	\$100,000 of compensation from the organi	•	OL III		u iO		_	ى د <del>د</del> د	a above, who received it	iore triail				

032008 12-23-20

		NATIONAL	ENVIRONME	NTAL	EDUCATIO	N AND
orm 990 (202	20)	TRAINING	FOUNDATIO	N, II	NC.	
Part VIII	Statement	of Revenue				
	Check if Sche	dule O contains a r	esponse or note to	any line i	n this Part VIII .	
					(A)	(E
					Total revenue	Related of

		Check if Schedule O contains a response	or note to any lir				
				(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	( <b>D)</b> Revenue excluded from tax under sections 512 - 514
ıts	1 a	Federated campaigns 1a					
iran Jun		Membership dues 1b					
Ymc		Fundraising events 1c					
iift ar /		Related organizations 1d					
s, ( mil			311,531.				
ion		All other contributions, gifts, grants, and					
but			437,540.				
nti d O	g	Noncash contributions included in lines 1a-1f					
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f	<b>&gt;</b>	3,749,071.			
			<b>Business Code</b>				
e	2 a						
e Zi	b						
Program Service Revenue	c	·					
ran ?ev	d						
rog	е						
Ф	f	All other program service revenue					
		Total. Add lines 2a-2f					
	3	Investment income (including dividends, intere					c F
	_	other similar amounts)		65.			65.
	4	Income from investment of tax-exempt bond p					
	5	Royalties(i) Real	(ii) Personal				
	6 -		(ii) i ersoriai	-			
	6 a						
	b	- · · · · · · · · · · · · · · · · · · ·					
			<b></b>				
		Gross amount from sales of (i) Securities	(ii) Other				
	, ,	assets other than inventory <b>7a</b>	(.,				
	h	Less: cost or other basis					
e	~	and sales expenses 7b					
/en	c	Gain or (loss) 7c					
Revenue		Net gain or (loss)					
Other		Gross income from fundraising events (not					
₹		including \$ of					
		contributions reported on line 1c). See					
		Part IV, line 188a					
	b	Less: direct expenses8b					
	C	Net income or (loss) from fundraising events	<b></b>				
	9 a	Gross income from gaming activities. See					
		Part IV, line 199a					
		Less: direct expenses 9b					
		Net income or (loss) from gaming activities	<b></b>				
	10 a	Gross sales of inventory, less returns					
		and allowances 10a					
		Less: cost of goods sold 10b					
_		Net income or (loss) from sales of inventory	Business Code				
Snc	11 ^	MISCELLANEOUS	900099	2,812.			2,812.
nec	ii a			2,012.			2,012.
ella	0						
Miscellaneous Revenue		All other revenue					
2		Total. Add lines 11a-11d	<b>&gt;</b>	2,812.			
_	12	Total revenue. See instructions		3,751,948.	0.	0.	2,877.

### Part IX Statement of Functional Expenses

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

	ion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respon				
	not include amounts reported on lines 6b,	(A) Total expenses	<b>(B)</b> Program service	(C) Management and	<b>(D)</b> Fundraising
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations	222 476	222 475		
	and domestic governments. See Part IV, line 21	839,176.	839,176.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	710 200	620 620	24 720	62.040
	trustees, and key employees	718,290.	620,630.	34,720.	62,940
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	1 100 402	1 106 004	1 606	01 012
7	Other salaries and wages	1,190,403.	1,106,884.	1,606.	81,913
8	Pension plan accruals and contributions (include	CE 057	C1 347	7.1	4 520
	section 401(k) and 403(b) employer contributions)	65,957.	61,347.	71.	4,539 8,453
9	Other employee benefits	104,551.	94,058.	2,040.	8,453
10	Payroll taxes	142,794.	129,328.	2,620.	10,846
11	Fees for services (nonemployees):				
а	Management				
b	•	00 050	15 540	1 605	4 4 5 5
С	<u> </u>	23,353.	17,549.	1,627.	4,177
d	, , , , , , , , , , , , , , , , , , , ,	24,000.			24,000
е	,				
f	Investment management fees				
g	, -	200 552	205 210	10 110	0 010
	column (A) amount, list line 11g expenses on Sch 0.)	320,573.	307,319.	10,442.	2,812 475
12	Advertising and promotion	36,283.	34,957.	851.	475
13	Office expenses	22,793.	20,177.	1,682.	934
14	Information technology				
15	Royalties	224 224	460 505	40.050	10 100
16	Occupancy	201,301.	169,535.	19,358.	12,408
17	Travel	464.	419.	29.	16
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0.456	1 055	4.5.5	
19	Conferences, conventions, and meetings	2,176.	1,966.	135.	75
20	Interest				
21	Payments to affiliates	44 680	20 202	4 000	^ E4.
22	Depreciation, depletion, and amortization	44,678.	37,078.	4,886.	2,714
23	Insurance	11,658.	9,675.	1,275.	708
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule 0.)	100 022	01 751	0 064	0 110
a		108,833.	91,751.	8,964.	8,118
b	BAD DEBT EXPENSE	40,703.	7 000	40,703.	100
С	MISCELLANEOUS	8,105.	7,809.		106 415
d	EQUIP. RENTAL & MAINT.	6,835.	5,672.	748.	
	All other expenses	10,551.	6,653.	451.	3,447
25	Total functional expenses. Add lines 1 through 24e	3,923,477.	3,561,983.	132,398.	229,096
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				Form <b>990</b> (2020

Form 990 (2020)

Part X | Balance Sheet

Pa	rt X	Balance Sheet				
		Check if Schedule O contains a response or note t	o any line in this Part X			X
				<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing		1,336.	1	300.
	2	Savings and temporary cash investments		1,376,153.	2	1,421,083.
	3	Pledges and grants receivable, net		1,080,004.	3	994,108.
	4	Accounts receivable, net			4	
	5	Loans and other receivables from any current or fo				
		trustee, key employee, creator or founder, substan	itial contributor, or 35%			
		controlled entity or family member of any of these	persons		5	
	6	Loans and other receivables from other disqualified	d persons (as defined			
		under section 4958(f)(1)), and persons described in	n section 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net			7	
Assets	8	Inventories for sale or use			8	
⋖	9	Prepaid expenses and deferred charges		47,447.	9	51,612.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D1	0a 693,579.			
	b	Less: accumulated depreciation1	оь 603,101.	135,156.	10c	90,478.
	11	Investments - publicly traded securities			11	
	12	Investments - other securities. See Part IV, line 11			12	
	13	Investments - program-related. See Part IV, line 11			13	
	14	Intangible assets		46.060	14	16.060
	15	Other assets. See Part IV, line 11		16,063.	15	16,063.
	16	Total assets. Add lines 1 through 15 (must equal I		2,656,159.	16	2,573,644.
	17	Accounts payable and accrued expenses		150,310.	17	284,878.
	18	Grants payable		72 (55	18	10 660
	19	Deferred revenue		73,655.	19	12,660.
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Pa			21	
ies	22	Loans and other payables to any current or former				
Liabilities		trustee, key employee, creator or founder, substan				
<u>ia</u>		controlled entity or family member of any of these			22	
	23	Secured mortgages and notes payable to unrelate		205 261	23	275 140
	24	Unsecured notes and loans payable to unrelated to		305,261.	24	375,140.
	25	Other liabilities (including federal income tax, paya				
		parties, and other liabilities not included on lines 1	•	223,653.		169,215.
	000	of Schedule D		752,879.	25	841,893.
	26	Total liabilities. Add lines 17 through 25		132,019.	26	041,093.
es		Organizations that follow FASB ASC 958, check	nere 🕨 🔼			
ũ	07	and complete lines 27, 28, 32, and 33.		809,959.	27	619,906.
3ale	27 28	Net assets without donor restrictions		1,093,321.	28	1,111,845.
PG.	20	Net assets with donor restrictions  Organizations that do not follow FASB ASC 958		1,055,521.	20	1,111,013.
Ξ		and complete lines 29 through 33.	, check here			
ō	29	Capital stock or trust principal, or current funds			29	
ets	30	Paid-in or capital surplus, or land, building, or equip			30	
Ass	31	Retained earnings, endowment, accumulated inco			31	
Net Assets or Fund Balances				1,903,280.	32	1,731,751.
Z	32	Total liabilities and net assets/fund balances		2,656,159.	33	2,573,644.
	33	Total liabilities and net assets/fund balances		2,000,100	აა	2,3/3,044.

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)		3,75		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,92		
3	Revenue less expenses. Subtract line 2 from line 1	3	-17		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,90	<u>3,2</u>	80.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,73	1,7	51.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain on Scl	nedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	-			
	Act and OMB Circular A-133?		За	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	X	<u> </u>
			Form	990	(2020)

032012 12-23-20

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

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

NATIONAL ENVIRONMENTAL EDUCATION AND

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

TRAINING FOUNDATION, INC. 54-1557043 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. ☐ Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. ☐ Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions)) Total

# Schedule A (Form 990 or 990-EZ) 2020 TRAINING FOUNDATION, INC.

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	3,121,263.	3,489,552.	2,918,808.	3,022,014.	3,749,071.	16,300,708.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	3,121,263.	3,489,552.	2,918,808.	3,022,014.	3,749,071.	16,300,708.
	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						3,336,882.
6	Public support. Subtract line 5 from line 4.						12,963,826.
	ction B. Total Support						, ,
	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Amounts from line 4	3,121,263.	3,489,552.	2,918,808.	3,022,014.	3,749,071.	16,300,708.
	Gross income from interest,	, ,	, ,	, ,	. ,	, ,	<u>, , , , , , , , , , , , , , , , , , , </u>
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	2,912.	7,894.	12,538.	3,947.	65.	27,356.
9	Net income from unrelated business	,			· · · · · · · · · · · · · · · · · · ·		<u> </u>
	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.)	493.	604.	492.	3,885.	2,812.	8,286.
11							16,336,350.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for th	ne organization's fir				501(c)(3)	
	organization, check this box and stop	here					
Sec	ction C. Computation of Publ						
14	Public support percentage for 2020 (I	ine 6, column (f), d	ivided by line 11, o	column (f))		14	79.36 %
15	Public support percentage from 2019	Schedule A, Part	II, line 14			15	74.05 %
16a	33 1/3% support test - 2020. If the o	organization did no	t check the box or	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	
	stop here. The organization qualifies	as a publicly supp	orted organization				<b>X</b>
b	33 1/3% support test - 2019. If the o	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual	ifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances tes						or more,
	and if the organization meets the fact	s-and-circumstanc	es test, check this	box and stop her	e. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	est. The organization	on qualifies as a pu	iblicly supported o	organization		<b>&gt;</b>
b	10% -facts-and-circumstances tes	t - 2019. If the org	anization did not c	heck a box on line	13, 16a, 16b, or	17a, and line 15 is	10% or
	more, and if the organization meets th	ne facts-and-circun	nstances test, che	ck this box and <b>st</b>	<b>op here.</b> Explain ir	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	ne organization qua	alifies as a publicly	supported organ	ization	
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	<u> </u>
						dula A (Earm 000	

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

qualify under the tests listed b Section A. Public Support	elow, please com	iplete Part II.)				
Calendar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(6) 2019	(d) 2010	(e) 2020	(f) Total
1 Gifts, grants, contributions, and	(a) 2010	(0) 2017	(c) 2018	(d) 2019	(8) 2020	(f) Total
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions,						
merchandise sold or services per-						
formed, or facilities furnished in						
any activity that is related to the						
organization's tax-exempt purpose						<del>                                     </del>
<b>3</b> Gross receipts from activities that are not an unrelated trade or bus-						
iness under section 513						
						<del>                                     </del>
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						<del>                                     </del>
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						<del>                                     </del>
6 Total. Add lines 1 through 5						1
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons <b>b</b> Amounts included on lines 2 and 3 received						+
from other than disqualified persons that						
exceed the greater of \$5,000 or 1% of the						
amount on line 13 for the year						<del>                                     </del>
c Add lines 7a and 7b						_
8 Public support. (Subtract line 7c from line 6.)  Section B. Total Support						
	(-) 0040	(I-) 0047	(-) 0040	(-1) 0040	(-) 0000	(6) T-1-1
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6						+
dividends, payments received on						
securities loans, rents, rovalties.						
and income from similar sources						<del> </del>
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						<del> </del>
c Add lines 10a and 10b						<u> </u>
11 Net income from unrelated business activities not included in line 10b,						
whether or not the business is						
regularly carried on	<u> </u>			1		
<b>12</b> Other income. Do not include gain or loss from the sale of capital						
assets (Explain in Part VI.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)	<u> </u>				=======================================	<u> </u>
14 First 5 years. If the Form 990 is for th	e organization's f	first, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organiza	ition,
check this box and stop here						<u></u>
Section C. Computation of Publ					11	
15 Public support percentage for 2020 (l					15	<u>%</u>
16 Public support percentage from 2019					16	<u>%</u>
Section D. Computation of Inves					147	**
17 Investment income percentage for 20					17	<u>%</u>
18 Investment income percentage from 2						<u>%</u>
19a 33 1/3% support tests - 2020. If the						
more than 33 1/3%, check this box a						
<b>b 33 1/3% support tests - 2019.</b> If the	· ·			•		
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization	n did not check a	a box on line 14, 19	a, or 19b, check t	his box and see in	structions	<u></u>

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# Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

- 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.
- 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).
- **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.
- **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.
- c 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.
- **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.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 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 organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
,		
2		
3a		
3b		
20		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
8		
9a		
Oh		
9b		
9с		
10a		
10b m 990 or 9	1 20-F7	2020

Pai	Tiv 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		
b	A family member of a person described in line 11a above?	11b		
С	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
<u>Sec</u>	tion B. Type I Supporting Organizations			
	_		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> 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 officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion 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).	2		
3	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.	3		
Sec	tion 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 yea(see instructions).			
а	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.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see inst	tructio	ns).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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, above, 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.			
а	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.	За		
b				
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orga	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust o	n Nov. 20, 1970 (explain in I	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus	st complet	te Sections A through E.	
Sect	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	<b>1</b> b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	tion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ally integra	ated Type III supporting org	anization (see

Schedule A (Form 990 or 990-EZ) 2020

instructions).

_	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations /oontine	J (2001)	4-1337043 Page 7
	ion D - Distributions	(~,(~, ~~,FF0,	CONTINU	Jeu)	Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	- ' ' ' '		<u> </u>	
_	organizations, in excess of income from activity	· · · · · · · · · · · · · · · · · · ·		2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	IS	3	
4	Amounts paid to acquire exempt-use assets	11 5		4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in <b>Part VI</b> )		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	ne organization is responsive	9		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2020	ns	Distributable Amount for 2020
_1_	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able 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 3e				
<u>g</u>	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2020 distributable amount				
i_	Carryover from 2015 not applied (see instructions)				
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7: \$				
	Applied to underdistributions of prior years				
	Applied to 2020 distributable amount				
	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. For result greater				
_	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
_	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
<u> </u>	Excess from 2020				(F 000 000 F7) 0000

Schedule A (Form 990 or 990-EZ) 2020

#### NATIONAL ENVIRONMENTAL EDUCATION AND

54-1557043 Page 8 Schedule A (Form 990 or 990-EZ) 2020 TRAINING FOUNDATION, INC. Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service **Schedule of Contributors** 

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.
➤ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

Name of the organization

NATIONAL ENVIRONMENTAL EDUCATION AND TRAINING FOUNDATION, INC.

Employer identification number

54-1557043

Organiz	ation type (check of	Section:    X   501(c)( 3 ) (enter number) organization   4947(a)(1) nonexempt charitable trust not treated as a private foundation   527 political organization   501(c)(3) exempt private foundation   4947(a)(1) nonexempt charitable trust treated as a private foundation   501(c)(3) taxable private foundation   501(c)(3) taxable private foundation   501(c)(3) taxable private foundation
Filers of	f:	Section:    X   501(c)( 3 ) (enter number) organization   4947(a)(1) nonexempt charitable trust not treated as a private foundation   527 political organization   501(c)(3) exempt private foundation   4947(a)(1) nonexempt charitable trust treated as a private foundation   501(c)(3) taxable private foundation   501(c)(3) taxable private foundation   501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
Form 99	00 or 990-EZ	X 501(c)( 3) (enter number) organization
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
		527 political organization
Form 99	00-PF	501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
General	l Rule	
	ū	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special	Rules	
X	sections 509(a)(1) any one contributo	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from r, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.
	contributor, during literary, or education	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, nal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering instead of the contributor name and address), II, and III.
	year, contributions is checked, enter hourpose. Don't cor	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., applete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year
but it m	ust answer "No" on	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to ne filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

 $\ \ \, \text{LHA} \ \ \, \text{For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.}$ 

Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Name of organization
NATIONAL ENVIRONMENTAL EDUCATION AND
TRAINING FOUNDATION, INC.

Employer identification number

54-1557043

Parti	Contributors (see instructions). Use duplicate copies of Part I if addit	ional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3			Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4			Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5			Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$122,936.	Person X Payroll

Name of organization
NATIONAL ENVIRONMENTAL EDUCATION AND
TRAINING FOUNDATION, INC.

Employer identification number

54-1557043

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	litional space is needed.
(a)	(b)	(c) (d)
	Name, address, and ZIP + 4	Total contributions  Type of contribution  Person X Payroll  Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
8		Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
9	Nume, addition and Emily 1	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c) (d)
No.	Name, address, and ZIP + 4	Total contributions  Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
		Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contribution
	Name, audi 655, and Zir T T	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization
NATIONAL ENVIRONMENTAL EDUCATION AND
TRAINING FOUNDATION, INC.

Employer identification number

54-1557043

Noticasti Property (see instructions). Use duplicate copies of Pa	art II ir additional space is needed.	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<del></del>	
	(b) Description of noncash property given   Description of noncash property given  (b)  Description of noncash property given  (c)  FMV (or estimate) (See instructions.)  (b)  Description of noncash property given  (c)  FMV (or estimate) (See instructions.)  (c)  FMV (or estimate) (See instructions.)  (c)  FMV (or estimate) (See instructions.)  (d)  Description of noncash property given  (c)  FMV (or estimate) (See instructions.)  (d)  Description of noncash property given  (e)  FMV (or estimate) (See instructions.)  (f)  FMV (or estimate) (See instructions.)  (h)  Description of noncash property given  (c)  FMV (or estimate) (See instructions.)	

Schedule B (Form 990, 990-EZ, or 990-PF) (2020) Name of organization **Employer identification number** NATIONAL ENVIRONMENTAL EDUCATION AND 54-1557043 TRAINING FOUNDATION, INC. Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. `fŕom Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

### SCHEDULE C

(Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

OMB No. 1545-0047
2020

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Under section 501(c) and section 527

➤ Complete if the organization is described below. 
➤ Attach to Form 990 or Form 990-EZ.

➤ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

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

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

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

• Section 501(c)(4) (5) or (6) organizations: Complete Part III

Name of or	$\frac{130 \text{ f(c)(4), (3), 01 (0) organiza}}{\text{canization}} \qquad \mathbf{N} \mathbf{\Lambda} \mathbf{T} \mathbf{\Gamma} \mathbf{O} \mathbf{N} \mathbf{\Lambda}$	L ENVIRONMENTAL	EDIICATION AN	JD Empl	oyer identification number
Name of of		G FOUNDATION, IN		Linbi	54-1557043
Part I-A	Complete if the ord	ganization is exempt und	er section 501(c)	or is a section 527 o	
1 Provid 2 Politic	le a description of the organia	zation's direct and indirect politic ures gn activities	al campaign activities in	n Part IV. ▶\$	
Part I-B	Complete if the org	ganization is exempt und	er section 501(c)(	3).	
1 Enter	the amount of any excise tax	incurred by the organization und	ler section 4955	<b>▶</b> \$	
2 Enter	the amount of any excise tax	incurred by organization manage	ers under section 4955	<b>▶</b> \$	
3 If the	organization incurred a section	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a Was a	correction made?				Yes No
	s," describe in Part IV.				
Part I-C	Complete if the org	ganization is exempt und	er section 501(c),	<u> </u>	` ' '
	• •	d by the filing organization for sec	•		
	0 0	ization's funds contributed to other	· ·		
		s. Add lines 1 and 2. Enter here a			
line 17	′b			<b>&gt;</b> \$	
		1120-POL for this year?			
made contril	payments. For each organiza outions received that were pr	nployer identification number (Ell tion listed, enter the amount paid omptly and directly delivered to a additional space is needed, prov	d from the filing organiz a separate political orga	ation's funds. Also enter thanization, such as a separa	ne amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0

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

Schedule C (Form 990 or 990-EZ) 2020

LHA

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	edule C (Form 990 or 990-EZ) 2020					55/043 Page 2		
Pa	rt II-A Complete if the or	ganization is exe	mpt under section	n 501(c)(3) and fil	ed Form 5768 (el	ection under		
	section 501(h)).							
A C	Check 🕨 🔲 if the filing organiz	ation belongs to an aff	liated group (and list in	Part IV each affiliated	group member's nam	e, address, EIN,		
	expenses, and sh	are of excess lobbying	expenditures).					
<b>B</b> C	Check 🕨 🔲 if the filing organiz	ation checked box A a	nd "limited control" pro	visions apply.				
	Lin (The term "expe	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals					
1a	Total lobbying expenditures to in	luence public opinion (	grassroots lobbying)		0.			
b	Total lobbying expenditures to in	luence a legislative bo	dy (direct lobbying)		24,000.			
С	: Total lobbying expenditures (add	lines 1a and 1b)			24,000.			
d	d Other exempt purpose expenditu	res			3,899,477.			
е	Total exempt purpose expenditu	es (add lines 1c and 1c	(b		3,923,477.			
f	Lobbying nontaxable amount. Er	ter the amount from th	e following table in bot	h columns.	346,174.			
	If the amount on line 1e, column (a)	or (b) is: The lob	bying nontaxable am	ount is:				
	Not over \$500,000	20% of	the amount on line 1e.					
	Over \$500,000 but not over \$1,0	00,000 \$100,00	00 plus 15% of the exc	ess over \$500,000.				
	Over \$1,000,000 but not over \$1	500,000 \$175,00	00 plus 10% of the exc	ess over \$1,000,000.				
	Over \$1,500,000 but not over \$1	7,000,000 \$225,00	00 plus 5% of the exce	ss over \$1,500,000.				
	Over \$17,000,000	\$1,000,	000.					
g	Grassroots nontaxable amount (e	nter 25% of line 1f)			86,544.			
h	Subtract line 1g from line 1a. If ze	ero or less, enter -0-			0.			
i	Subtract line 1f from line 1c. If ze	ro or less, enter -0			0.			
j	If there is an amount other than a	ero on either line 1h or	line 1i, did the organiza	ation file Form 4720				
	reporting section 4911 tax for thi	s year?			[	Yes No		
	reporting section 4911 tax for this year?  4-Year Averaging Period Under Section 501(h)  (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.  See the separate instructions for lines 2a through 2f.)							
		Lobbying Expe	nditures During 4-Yea	ar Averaging Period				
	Calendar year	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) Total		

	Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	( <b>d)</b> 2020	(e) Total					
2a Lobbying nontaxable amount	325,363.	319,519.	318,686.	346,174.	1,309,742.					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					1,964,613.					
c Total lobbying expenditures	42,600.	42,000.	31,100.	24,000.	139,700.					
d Grassroots nontaxable amount	81,341.	79,880.	79,672.	86,544.	327,437.					
e Grassroots ceiling amount (150% of line 2d, column (e))					491,156.					
f Grassroots lobbying expenditures										

Schedule C (Form 990 or 990-EZ) 2020

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

of the lo	ch "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description by by lobbying activity.					b)
		Yes	N	lo	Amo	ount
lo	During the year, did the filing organization attempt to influence foreign, national, state, or					
	ocal legislation, including any attempt to influence public opinion on a legislative matter					
0	or referendum, through the use of:					
a V	/olunteers?					
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
	Media advertisements?					
	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?					
	Grants to other organizations for lobbying purposes?					
	Direct contact with legislators, their staffs, government officials, or a legislative body?					
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
	Fotal. Add lines 1c through 1i					
2a D	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
	f "Yes," enter the amount of any tax incurred under section 4912					
	f "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	f the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c	)(5),	or se	ection	
Part						
Part	501(c)(6).					_
					Yes	١
1 V	Vere substantially all (90% or more) dues received nondeductible by members?			1	Yes	ı
1 V 2 D 3 D	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	e prior yea	ar? <b>)(5),</b>	2 3 or se	ection	
1 W 2 D 3 D Part	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	e prior yea on 501(c "No" Ol	ar? )(5), ( R (b)	2 3 or se Part	ection	
1 W 2 D 3 D Part	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members	e prior yea on 501(c "No" OI	ar? )(5), ( R (b)	2 3 or se	ection	
1 W 2 D 3 D Part	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	e prior yea on 501(c "No" OI	ar? )(5), ( R (b)	2 3 or se Part	ection	
1 W 2 D 3 D Part	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	e prior yea on 501(c "No" OI	ar? )(5), ( R (b)	2 3 or se Part	ection	
1 W 2 D 3 D Part	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year	e prior yea on 501(c "No" OI	ar? )(5), ( R (b)	2 3 or se Part	ection	
1 W 2 D 3 D Part	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	e prior yea on 501(c "No" OI	ar? )(5), (b)	2 3 or se Part	ection	
1 W 2 D 3 D Part 1 D 2 S e a C b C c T	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	e prior yea on 501(c "No" OI	in (b)	2 3 or se Part	ection	
1 W 2 D 3 D Part 1 D 2 S e a C b C c T 3 A	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year	e prior yea on 501(c "No" OI	in (b)	2 3 or se Part 1 2 2b 2c	ection	
1 W 2 D 3 D Part   1 D 2 S e a C b C c T 3 A 4 If	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	e prior yea on 501(c "No" OI	in (b)	2 3 or se Part 1 2 2b 2c	ection	
1 W 2 D 3 D Part   1 D 2 S e a C b C C T 3 A 4 Iff	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues finotices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3, what portion of the exceeds the amount on line 3.	e prior yea in 501(c "No" OI  al	ar? )(5), G R (b)	2 3 or se Part 1 2 2b 2c	ection	ne 3,
1 W 2 D 3 D Part   1 D 2 S e a C b C c T 3 A 4 Iff	Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the source of the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues for notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exception of the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expensions.	e prior yea in 501(c "No" OI  al	ar? )(5), G R (b)	2 3 or se Part 1 2a 2b 2c 3	ection	

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

NATIONAL ENVIRONMENTAL EDUCATION AND TRAINING FOUNDATION TNC.

**Employer identification number** 54-1557043

Pai	t I Organizations Maintaining Donor Advise	•	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line		2
	, ,	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advis	ed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor o	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, F	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recrea	tion or education) Preservation of	a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic structu	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per	<b>.</b> . , ,	
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing cons	servation easements during the year
	<b>&gt;</b>		
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conserva	tion easements during the year
_	<b>\$</b>		a.v., v., a.
8	Does each conservation easement reported on line 2(d) above	•	
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	•	
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial statement	ents that describes the
Pai	organization's accounting for conservation easements.  t III   Organizations Maintaining Collections of	f Art Historical Treasures or O	thar Similar Assats
ı aı	Complete if the organization answered "Yes" on Form	-	the Olimai Assets.
10	If the organization elected, as permitted under FASB ASC 95		and balance shoot works
Id	of art, historical treasures, or other similar assets held for pub	, .	
	service, provide in Part XIII the text of the footnote to its finar	, ,	•
h	If the organization elected, as permitted under FASB ASC 95		
b	art, historical treasures, or other similar assets held for public		
	provide the following amounts relating to these items:	exhibition, education, or research in full	refairce of public service,
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical trea		
_	the following amounts required to be reported under FASB A	•	. ga, provide
а	Revenue included on Form 990, Part VIII, line 1	_	<b>▶</b> \$
	Assets included in Form 990, Part X		

032051 12-01-20

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

	t III Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures,	or Othe	r Similar As	ssets(continued)
3	Using the organization's acquisition, accession	on, and other record	ds, chec	k any of the	following that	at make siç	gnificant use o	f its
	collection items (check all that apply):							
а	Public exhibition	d		Loan or exc	hange progr	am		
b	Scholarly research	е						
С	Preservation for future generations							
4	Provide a description of the organization's co	ollections and explai	n how th	nev further t	he organizat	ion's exem	npt purpose in	Part XIII.
5	During the year, did the organization solicit or							
	to be sold to raise funds rather than to be ma							Yes No
Pai	t IV Escrow and Custodial Arran							
	reported an amount on Form 990, Par							
1a	Is the organization an agent, trustee, custodi	an or other intermed	diary for	contribution	ns or other as	sets not i	ncluded	
	on Form 990, Part X?							Yes No
b	If "Yes," explain the arrangement in Part XIII							
								Amount
С	Beginning balance						1c	
	Additions during the year							
	Distributions during the year							
f	Ending balance							
2a	Did the organization include an amount on Fo							Yes No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	xplanatio	on has been	provided or	Part XIII		
Pai	t V Endowment Funds. Complete if	the organization an	swered	"Yes" on Fo	orm 990, Par	t IV, line 10	).	
		(a) Current year	(b) F	rior year	(c) Two yea	rs back (d	d) Three years b	ack (e) Four years back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and losses							
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
	End of year balance							
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1	g, column (a	a)) held as:			
а	Board designated or quasi-endowment		%					
b	Permanent endowment	%	<u></u>					
С	Term endowment	<del>//</del>						
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.						
За	Are there endowment funds not in the posse	ssion of the organiz	ation tha	at are held a	and administe	ered for the	e organization	
	by:							Yes No
	(i) Unrelated organizations							3a(i)
	(ii) Related organizations							
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requi	red on S	Schedule R?				3b
4	Describe in Part XIII the intended uses of the		owment	funds.				
Pai	t VI Land, Buildings, and Equipm							
	Complete if the organization answered	d "Yes" on Form 990	0, Part I	/, line 11a. S	See Form 99	0, Part X, li	ne 10.	
	Description of property	(a) Cost or o			or other		cumulated	(d) Book value
		basis (investr	ment)	basis	(other)	depr	reciation	
1a	Land							
b	Buildings			_				
С	Leasehold improvements			24	4,878.	1	61,653.	83,225.
d	Equipment				0 = 0.1		14 / 12	
	Other				8,701.	4	41,448.	7,253.
Tota	. Add lines 1a through 1e. (Column (d) must ed	gual Form 990, Part	X, colur	nn (B), line 1	10c.)			90,478.

Schedule D (Form 990) 2020

	UNDATION, INC.	54-	-1557043 Page <b>3</b>
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (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, line 1		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1d. See Form 990, Part X, line 15.	
	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	 ne 15 )		
Part X Other Liabilities.	0 70.7		
Complete if the organization answered "Yes"	on Form 990. Part IV. line 1	1e or 11f. See Form 990. Part X. line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) DEFERRED RENT			89,738.
(3) DEFERRED TENANT IMPROVEME	יתי		03,730.
(-7	114 1		79,477.
		+	17,411•
(5)			
(6)			
<u>(7)</u>			
(8)			
(9)			160 015
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 25.)	<b>.</b>	169,215.

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Schedule D (Form 990) 2020

Sche	NATIONAL ENVIRONMENTAL EDUCATION AND rdule D (Form 990) 2020 TRAINING FOUNDATION, INC.	54-	1557043 <sub>Page</sub>
	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per F		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	8,669,600
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities 2b 4,917,652		
С	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	4,917,652
3	Subtract line <b>2e</b> from line <b>1</b>	3	3,751,948
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.) 4b	1	
c	Add lines 4a and 4b	4c	0
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form</i> 990, <i>Part I, line 12.</i> )	5	3,751,948
	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	8,841,129
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	'	0,011,119
	Donated services and use of facilities		
a		4	
b		-	
С.	Other losses 2c	-	
d	Other (Describe in Part XIII.)	- 1	4 017 652
_	Add lines 2a through 2d	2e	4,917,652 3,923,477
3	Subtract line <b>2e</b> from line <b>1</b>	3	3,943,411
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	-	
b	Other (Describe in Part XIII.)		•
С	Add lines <b>4a</b> and <b>4b</b>	4c	0
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	3,923,477
Pai	rt XIII Supplemental Information.		
	de 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 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	4; Part	X, line 2; Part XI,
PAI	RT X, LINE 2:		
FOE	R THE YEAR ENDED SEPTEMBER 30, 2021, NEEF HAS DOCUMENTED	TS	
COI	NSIDERATION OF FASB ACCOUNTING STANDARDS CODIFICATION (ASC	2) 7	40-10,
INC	COME TAXES, THAT PROVIDES GUIDANCE FOR REPORTING UNCERTAIN	TY	IN INCOME
TAX	KES AND HAS DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSI	TIO	NS QUALIFY
FOE	R EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEM	IENT	S.

#### SCHEDULE I (Form 990)

Department of the Treasury

# **Grants and Other Assistance to Organizations, Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

► Attach to Form 990.

2020

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service ▶ Go to www.irs.gov/Form990 for the latest information. NATIONAL ENVIRONMENTAL EDUCATION AND Name of the organization **Employer identification number** 54-1557043 TRAINING FOUNDATION, INC. Part I **General Information on Grants and Assistance** 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection X Yes criteria used to award the grants or assistance? No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments, Complete if the organization answered "Yes" on Form 990, Part IV. line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of (c) IRC section 1 (a) Name and address of organization (b) EIN (d) Amount of (e) Amount of (a) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant non-cash noncash assistance or assistance FMV, appraisal, assistance other) BAY AREA DISCOVERY MUSEUM 557 MCREYNOLDS ROAD NATURAL SCIENCE STEWARDSHIP 68-0033227 501(C)(3) SAUSALITO, CA 94965 16,310 0

COLORADO CANYONS ASSOCIATION 543 MAIN STREET BLM SPONSORSHIP GRAND JUNCTION, CO 81501 20-2409837 501(C)(3) 10,000 COLORADO NATIONAL MONUMENT ASSOCIATION - 1750 RIM ROCK DRIVE NATURAL SCIENCE STEWARDSHIP - FRUITA, CO 81521 84-6035626 501(C)(3) 19,500 0 CONSERVANCY FOR CUYAHOGA VALLEY NATIONAL PARK - 1403 WEST HINES NATURAL SCIENCE STEWARDSHIP HILL RD - PENINSULA OH 44264 34-1917257 501(C)(3) 9 710 CORAZON LATINO 1015 15TH ST NW #600 WASHINGTON, DC 20005 82-3390896 NPLD SIGNATURE EVENT 501(C)(3) 6 000 0 CRYSTAL COVE CONSERVANCY 5 CRYSTAL COVE NATURAL SCIENCE

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

33-0878633 501(C)(3)

..... 🟲 -

STEWARDSHIP

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

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Schedule I (Form 990) 2020

26.

0.

38 500

0

NEWPORT BEACH, CA 92657

Schedule I (Form 990) Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (g) Description of (a) Name and address of (b) EIN (c) IRC section (d) Amount of (e) Amount of (f) Method of (h) Purpose of grant organization or government if applicable cash grant valuation non-cash assistance or assistance non-cash (book, FMV. assistance appraisal, other) DEPARTMENT OF ENERGY AND ENVIRONMENT - 1200 1ST ST NE, 5TH FLOOR - WASHINGTON, DC 20002 53-6001131 GOVT 32,775 0 BIODIVERSITY GRANT DEPARTMENT OF MILITARY AFFAIRS. GUAM - PO BOX 884 - HAGATNA, GU 96932 98-0018947 GOVT 6,000 0 DOD LEGACY AWARD FAIRFAX COUNTY PARK FOUNDATION 12055 GOVERNMENT CENTER PARKWAY SU FARIFAX, VA 22305 54-2019179 GOVT 7,525 0 BIODIVERSITY GRANT FRIENDS OF THE GREAT SMOKY MOUNTAINS NATIONAL PARK - 3099 WINFILED DUNN PKWY - KODAK, TN NATURAL SCIENCE 62-1564782 501(C)(3) 10,500 0 STEWARDSHIP 37764 FRIENDS OF SAGUARO NATIONAL PARK 2700 NORTH KINNEY ROAD NATURAL SCIENCE STEWARDSHIP 86-0842503 0 TUSCON, AZ 85743 501(C)(3) 11,879 FRIENDS OF THE SMOKIES 3099 WINFIELD DUNN PKWY NATURAL SCIENCE KODAK, TN 37764 62-0576032 501(C)(3) STEWARDSHIP 9.750 0 FROST MUSEUM OF SCIENCE 1101 BISCAYNE BLVD 59-0854960 MIAMI FL 33132 501(C)(3) 20 000 0 SPONSORSHIP HOLANI HOUSE HC1 BO 250 HANA, HI 96713 26-4836145 501(C)(3) 7,200 0 DOD LEGACY AWARD LAND TRUST OF NORTH ALABAMA 2707 ARTIE ST RESTORATION & RESILIENCE HUNTSVILLE, AL 35802 63-0974278 501(C)(3) 11,250 0 GRANT

Schedule I (Form 990)

(a) Name and address of	(b) EINI						
organization or government	( <b>b)</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
MOUNTAIN STUDIES INSTITUTE							
679 E. 2ND AVE UNIT 8							RESTORATION & RESILIENCE
DURANGO, CT 81301	73-1644103	501(C)(3)	8,750.	0.			GRANT
FRIENDS OF HOMESTEAD							
8523 WEST STATE HIGHWAY 4							NATURAL SCIENCE
BEATRICE, NE 68310	47-0842437	501(C)(3)	7,711.	0.			STEWARDSHIP
OKLAHOMA CITY NATIONAL MEMORIAL							
AND MUSEUM - 620 NORTH HARVEY AVE	72 1472725	E01/G)/3)	E 250	0			NATURAL SCIENCE
- OKLAHOMA CITY, OK 73102 PALOS VERDES PENINSULA LAND	73-1472725	501(C)(3)	5,250.	0.			STEWARDSHIP
CONSERVANCY - 916 SILVER SPUR							
ROAD - ROLLING HILLS ESTATES, CA							
90274	33-0309722	501(C)(3)	37,500.	0.			BIODIVERSITY GRANT
ROCK CREEK CONSERVANCY							
7200 WISCONSIN AVE #500				_			
BETHESDA, MD 20814	20-3874333	501(C)(3)	16,750.	0.			BIODIVERSITY GRANT
SAN MATEO COUNTY PRKS & RECREATION							
FOUNDAITON - 1701 COYOTE POINT DR							
- SAN MATEO, CA 94401	94-3306697	501(C)(3)	40,876.	0.			BIODIVERSITY GRANT
SOUTH YUBA RIVER CITIZENS LEAGUE							BIODIVERSITY
313 RAILROAD AVE #101	60 0171271	E01/G)/3)	40 976	0			GRANT/RESTORATION &
NEVADA CITY, CA 95959	68-0171371	501(C)(3)	40,876.	0.			RESILIENCE
TEANECK CREEK CONSERVANCY							
20 PUFFIN WAY							GREENING STEM/RETORATION
TEANECK, NJ 07666	22-3818003	501(C)(3)	22,476.	0.			& RESILIENCE
THE FUND FOR THE CITY OF NEW YORK							
121 AVENUE OF THE AMERICAS							NATURAL SCIENCE
NEW YORK, NY 10013	13-2612524	501(C)(3)	19,500.	0.			STEWARDSHIP

Schedule I (Form 990)

Schedule I (Form 990)

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (a) Name and address of (b) EIN (c) IRC section (d) Amount of (f) Method of (g) Description of (h) Purpose of grant (e) Amount of organization or government if applicable valuation non-cash assistance cash grant non-cash or assistance assistance (book, FMV, appraisal, other) TIMUCUAN TRAIL PARKS FOUNDATION 9953 HECKSCHER DR RESTORATION & RESILIENCE JACKSONVILLE, FL 32226 59-3614354 501(C)(3) 11,250 0 GRANT US ARMY - FORT CARSON 1676 EVANS ST FORT CARSON, CO 80913 23-7109971 GOVT 6,500. 0 DOD LEGACY AWARD

Schedule I (Form 990) 2020

(a) Type of grant or assistance	<b>(b)</b> Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information red	quired in Part I, lin	ie 2; Part III, columr	n (b); and any other a	dditional information.	
PART I, LINE 2:					
EACH GRANT GOES THROUGH A CENTRALI	ZED PROC	ESS WITH E	EACH APPLIC	ATION BEING	
CREATED WITH THE SAME TEMPLATE. PA	ARTICULAR	ATTENTION	N IS PAID T	O ELIGIBILITY	
REQUIREMENTS AND THE CRITERIA FOR	GRANT SE	LECTION. I	THE FACTORS	THE	
FOUNDATION USES TO SCORE APPLICANT	S INCLUD	E: THE PUR	RPOSE AND R	ESTRICTIONS	
OF THE GRANTS, THE EXPECTED OUTCOM	MES AND T	IMELINE, S	SUBMISSION	INFORMATION,	
APPLICATION, AND ANY REQUIRED DOCU	JMENTS, S	UCH AS AN	AUDIT OR A	N IRS	
DETERMINATION LETTER. APPLICATIONS	ARE CHE	CKED IN AG	SAINST THE	ELIGIBILITY	

REQUIREMENTS AND REQUESTED DOCUMENTS. COMPLETE APPLICATIONS ARE USUALLY

Schedule I (Form 990) TRAINING FOUNDATION, INC.	54-1557043 Page 2
Part IV Supplemental Information	
SCORED BY EXTERNAL JUDGES. SCORES PROVIDE THE FOUNDATION W	TH A LIST OF
FINALISTS TO CONSIDER. GRANTS ARE AWARDED BASED ON SCORES	AND THE GOALS OF
THE GRANT. GRANTEES ARE SENT AN AWARD LETTER WITH A GRANT A	AGREEMENT TO BE
SIGNED. ALL GRANTEES ARE REQUIRED TO SUBMIT A FINAL REPORT	(INCLUDING
FINANCIALS). DEPENDING ON THE GRANT, THEY MAY ALSO BE REQUI	RED TO SUBMIT AN
INTERIM REPORT AND/OR EVALUATION. ONCE A GRANT IS COMPLETE	AND ALL REQUIRED
REPORTS ARE SUBMITTED, A CLOSING LETTER IS SENT.	

#### **SCHEDULE J** (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest

Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990.

Open to Public Inspection

OMB No. 1545-0047

Internal Revenue Service Name of the organization

Department of the Treasury

► Go to www.irs.gov/Form990 for instructions and the latest information. NATIONAL ENVIRONMENTAL EDUCATION AND TRAINING FOUNDATION, INC.

**Employer identification number** 54-1557043

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		Х
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
b	Any related organization?	6b		Х
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?	9	l	

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

Schedule J (Form 990) 2020

Schedule J (Form 990) 2020 TRAII

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 aren't listed on Form 990, Part VII.

54-1557043

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred	(D) Nontaxable	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(I)-(D)	reported as deferred on prior Form 990
(1) MERI-MARGARET DEOUDES	(i)	259,778.	0.	0.	15,683.	30,815.	306,276.	0.
PRESIDENT & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) NANCY SMITH	(i)	156,457.	0.	0.	9,310.	13,861.	179,628.	0.
VP OF FINANCE & ADMIN	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) SARA ESPINOZA	(i)	157,078.	0.	0.	9,339.	8,096.	174,513.	0.
VP, PROGRAMS	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

# SCHEDULE O

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.
 Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

NATIONAL ENVIRONMENTAL EDUCATION AND TRAINING FOUNDATION, INC.

Employer identification number 54-1557043

FORM 990, PART I, DOING BUSINESS AS:

NATIONAL ENVIRONMENTAL EDUCATION FOUNDATION

FORM 990, PART III, LINE 1

IN WAYS THAT IMPROVE THEIR LIVES AND THE HEALTH OF THE PLANET. NEEF WAS

CHARTERED BY CONGRESS IN 1990 AS A 501C(3) NONPROFIT TO COMPLEMENT THE

WORK OF THE US ENVIRONMENTAL PROTECTION AGENCY (EPA). NEEF IS A

NON-PARTISAN, NON-ADVOCACY ORGANIZATION WORKING TO MAKE THE ENVIRONMENT

MORE ACCESSIBLE, RELATABLE, RELEVANT, AND CONNECTED TO PEOPLE'S DAILY

LIVES.

OUR PURPOSE IS TO CULTIVATE AN ENVIRONMENTALLY CONSCIOUS AND

RESPONSIBLE PUBLIC. OUR VISION IS THAT PEOPLE'S EVERYDAY ACTIONS ARE

GUIDED BY AN UNDERSTANDING AND CONCERN FOR THE WELL-BEING OF PEOPLE AND

THE PLANET. OUR MISSION IS TO MAKE THE ENVIRONMENT MORE ACCESSIBLE,

RELATABLE, RELEVANT, AND CONNECTED TO THE DAILY LIVES OF ALL AMERICANS.

THROUGH K-12 EDUCATION, HEALTH, AND CONSERVATION-FOCUSED PROGRAMS,

GRANTS, AND INITIATIVES, NEEF IS WORKING TO CREATE DIVERSE PATHWAYS FOR

PEOPLE TO CONNECT TO THE NATURAL WORLD TO INSPIRE EMPATHY,

UNDERSTANDING, AND CREATE SUSTAINED, ENVIRONMENTALLY-RESPONSIBLE

ACTION.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) 2020

<sup>-</sup> GREENING STEM HUB: AN ONLINE COLLECTION OF CASE STUDIES, RESEARCH,

Name of the organization NATIONAL ENVIRONMENTAL EDUCATION AND TRAINING FOUNDATION, INC.

Employer identification number 54-1557043

AND TOOLS TO HELP EDUCATORS IMPLEMENT THE GREENING STEM APPROACH.

- NATIONAL ENVIRONMENTAL EDUCATION WEEK (EE WEEK): THE NATION'S

LARGEST CELEBRATION OF ENVIRONMENTAL EDUCATION. EACH YEAR, WE FEATURE

EE SUCCESS STORIES, INTERVIEW PROMINENT PERSONALITIES, AND HIGHLIGHT

DIFFERENT LEARNING THEMES WITH SPECIALIZED RESOURCES AND TOOLKITS FOR

EDUCATORS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

CAMPAIGNS:

NEEF IS COMMITTED TO FURTHERING ENVIRONMENTALLY RESPONSIBLE BEHAVIOR THROUGHOUT THE US POPULATION BY 2022.

- EMPLOYEE ENGAGEMENT: NEEF WORKS WITH ORGANIZATIONS ON ENGAGEMENT

  CAMPAIGNS TO INCREASE AWARENESS AND SUPPORT FOR CORPORATE SOCIAL

  RESPONSIBILITY PRIORITIES AND ENCOURAGES TEAM MEMBERS TO TAKE ACTION ON

  SUSTAINABILITY AT WORK, AS WELL AS AT HOME AND IN THEIR COMMUNITIES.

  NEEF ALSO CONVENES CORPORATE THOUGHT LEADERS TO ASSESS BEST PRACTICES,

  CONDUCT SUSTAINABILITY SURVEYS, AND CREATE TOOLS TO MEASURE THE RETURN

  ON INVESTMENT OF ENGAGING EMPLOYEES IN ENVIRONMENTAL EDUCATION AND

  BEHAVIORS.
- ENGAGEMENT CAMPAIGNS: NEEF PARTNERS WITH SPORTS LEAGUES (SUCH AS THE NBA AND THE NHL), MUSEUMS, ZOOS, AND AQUARIA TO PROMPT FANS AND VISITORS TO TAKE ENVIRONMENTAL ACTIONS AT HOME. THESE CAMPAIGNS ARE GROUNDED IN BEHAVIORAL SCIENCE, ENGAGE AMERICANS IN "LEARNING BY DOING," AND DEMONSTRATE THAT COLLECTIVE ACTIONS CAN CREATE LARGE-SCALE IMPACTS.

Schedule O (Form 990 or 990-EZ) 2020 Page 2 Name of the organization NATIONAL ENVIRONMENTAL EDUCATION AND **Employer identification number** TRAINING FOUNDATION, INC. 54-1557043 EXPENSES \$ 306,883. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. PUBLIC OUTREACH:

PUBLIC OUTREACH WORKS TO LEARN ABOUT AND MARKET TO NEEF'S AUDIENCES.

NEEF DISSEMINATES PRACTICAL AND INFORMATIVE INFORMATION THROUGH ITS

MONTHLY NEWSLETTER, THE NEEF CONNECT.

INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. EXPENSES \$ 432,558.

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

THE ORGANIZATION HAS ONE CLASS OF MEMBERSHIP, WHICH IS ITS EPA ADMINISTRATOR.

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

IN THE CONGRESSIONAL ACT THAT CREATED NEEF, IT STIPULATES THAT THE EPA NOMINATES THE ORGANIZATION'S BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE 990 WAS REVIEWED BY THE VP OF FINANCE & ADMINISTRATION AND THE PRESIDENT OF THE FOUNDATION. IT WAS THEN SENT TO THE PRESIDENT AND TREASURER OF THE BOARD OF TRUSTEES FOR REVIEW. BOTH CONTACT THE FOUNDATION STAFF AND/OR THE AUDITORS DIRECTLY IF NEEDED. THE 990 WAS THEN PRESENTED TO THE FULL BOARD FOR APPROVAL PRIOR TO FILING WITH THE IRS.

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

THE BOARD AND STAFF COMPLETE A CONFLICT OF INTEREST FORM ANNUALLY. IF A CONFLICT OF INTEREST ARISES, ANY BOARD MEMBER FAILING TO MAKE A DISCLOSURE IS SUBJECT TO DISCIPLINARY ACTION, INCLUDING DISMISSAL. IF THE PRESIDENT OR A MEMBER OF THE BOARD OF DIRECTORS FAILS TO FILE A REQUIRED DISCLOSURE, THE

032212 11-20-20

Name of the organization NATIONAL ENVIRONMENTAL EDUCATION AND TRAINING FOUNDATION, INC.

Employer identification number 54-1557043

CHAIRMAN OF THE BOARD OF DIRECTORS DECIDES ON APPROPRIATE ACTION. IF THE

CHAIRMAN FAILS TO MAKE A REQUIRED DISCLOSURE, THE VICE CHAIRMAN DECIDES AN

APPROPRIATE ACTION.

FORM 990, PART VI, SECTION B, LINE 15A:

THE EXECUTIVE COMMITTEE REVIEWS A SALARY SURVEY AND ALSO WHAT INDIVIDUALS
IN COMPARABLE POSITIONS IN OTHER, SIMILARLY SIZED NONPROFITS ARE CURRENTLY
BEING PAID. THIS IS DONE THROUGH REVIEW OF PROFESSIONAL CONTACTS. THE
COMPENSATION PROCESS IS DOCUMENTED IN THE BOARD MINUTES. THIS POLICY
APPLIES TO THE PRESIDENT AND THIS PROCESS IS IMPLEMENTED AND REVIEWED BY
THE BOARD CHAIR. THE BOARD TREASURER IS CONSULTED ON THE COMPENSATION OF
KEY EMPLOYEES OF THE ORGANIZATION. THE LAST COMPENSATION REVIEW TOOK PLACE
IN DECEMBER 2020.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

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

VA, WV, WI

FORM 990, PART VI, SECTION C, LINE 19:

FINANCIAL INFORMATION IS PROVIDED IN THE FOUNDATION'S ANNUAL REPORT ON THE
WEBSITE WWW.NEEFUSA.ORG. FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST
ONLINE AND IN PRINT. THE ORGANIZATIONAL DOCUMENTS ESTABLISHING THE
FOUNDATION ARE AVAILABLE ONLINE AND THE CONFLICT OF INTEREST POLICY IS
AVAILABLE UPON REQUEST.

FORM 990, PART X, LINE 24:

ON MAY 5, 2020, NEEF RECEIVED LOAN PROCEEDS IN THE AMOUNT OF \$295,261

UNDER THE PAYCHECK PROTECTION PROGRAM (PPP). ADDITIONALLY, NEEF APPLIED

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Schedule O (Form 990 or 990-EZ) 2020

Name of the organization NATIONAL ENVIRONMENTAL EDUCATION AND **Employer identification number** TRAINING FOUNDATION, INC. 54-1557043 FOR AND RECEIVED AN ECONOMIC INJURY DISASTER LOAN (EIDL) IN THE AMOUNT OF \$10,000. UNDER THE CORONAVIRUS AID, RELIEF, AND ECONOMIC SECURITY ACT (CARES ACT), THE PROMISSORY NOTE MUST BE USED FOR CERTAIN EXPENDITURES WITHIN A 24-WEEK PERIOD TO ULTIMATELY BE FORGIVEN BY THE SMALL BUSINESS ADMINISTRATION. DURING THE YEAR ENDED SEPTEMBER 30, 2021, NEEF EXPENDED AND TRACKED THE PPP FUNDS FOR PURPOSES OUTLINED IN THE CARES ACT GUIDANCE AND RECEIVED FULL FORGIVENESS FROM THE SBA IN MAY 2021, INCLUDING THE \$10,000 EIDL FUNDS. ACCORDINGLY, NEEF HAS RECORDED REVENUE FROM FORGIVENESS OF DEBT ON THE ACCOMPANYING STATEMENT OF ACTIVITIES AND CHANGES IN NET ASSETS. ON FEBRUARY 2, 2021, NEEF RECEIVED A SECOND ROUND OF LOAN PROCEEDS IN THE AMOUNT OF \$375,140 UNDER THE PAYCHECK PROTECTION PROGRAM. THE PROMISSORY NOTE CALLS FOR MONTHLY PRINCIPAL AND INTEREST PAYMENTS AMORTIZED OVER THE TERM OF THE PROMISSORY NOTE, UNLESS OTHERWISE FORGIVEN. NEEF USED THE PROCEEDS FOR PURPOSES CONSISTENT WITH THE PAYCHECK PROTECTION PROGRAM AND RECEIVED FORGIVENESS IN DECEMBER 2021 BY THE SBA IN THE AMOUNT OF \$375,140. THERE ARE NO FURTHER REQUIREMENTS

BECAUSE OF THE ECONOMIC UNCERTAINTY TO NEEF DIRECTLY ATTRIBUTED TO THE

COVID 19 PANDEMIC, NEEF'S EXECUTIVE COMMITTEE APPROVED THE APPLICATION

FOR THE FUNDS DISCLOSED ABOVE AND THE SUBSEQUENT FORGIVENESS OF SUCH

FUNDS, IN ACCORDANCE WITH THE GUIDELINES SET FORTH IN THE CARES ACT.

REGARDING THIS FUNDING AND NEEF WILL RECORD THE AMOUNT FORGIVEN AS

REVENUE FROM THE DEBT EXTINGUISHMENT DURING FISCAL YEAR 2022.