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

990

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

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 Inspection

ΑΙ	For the	$\pm 20$ 18 calendar year, or tax year beginning $$ OCT $1$ , $$ $2018$ $$ and ending	<u>S</u> EP 30, 2019	
В	Check if	C Name of organization	D Employer identifi	cation number
	Addres	NATIONAL ENVIRONMENTAL EDUCATION AND		
H	change Name			557043
H	change □Initial			
	return Final _return/	Number and street (or P.O. box if mail is not delivered to street address)  4301 CONNECTICUT AVENUE, NW  160		r )833-2933
	termin- ated		G Gross receipts \$	2,931,838.
	Ameno		H(a) Is this a group re	eturn
	Application	IF Name and address of principal officer: MERI - MARGARET - DECODES	for subordinates	
	pendin	g SAME AS C ABOVE	<b>H(b)</b> Are all subordinates in	ncluded? Yes No
$\overline{\mathbf{L}}$	Tax-exe		527 If "No," attach a	list. (see instructions)
		e: ▶ WWW.NEEFUSA.ORG	H(c) Group exemptio	
			$^\prime$ ear of formation: $1990$ N	🖊 State of legal domicile: VA
Pa		Summary		
ě	1 1	Briefly describe the organization's mission or most significant activities: ${ t SEE \ \ PART }$	III, LINE 1.	
Activities & Governance				
ern		Check this box 🕨 📖 if the organization discontinued its operations or disposed of r	1	
<u>Ş</u>			3	10
۰×		Number of independent voting members of the governing body (Part VI, line 1b)		10
ties		Total number of individuals employed in calendar year 2018 (Part V, line 2a)		24 175000
Ęį		Total number of volunteers (estimate if necessary)		0.
Ac		Total unrelated business revenue from Part VIII, column (C), line 12		0.
	l b	Net unrelated business taxable income from Form 990-T, line 38		
	,	Contributions and grants (Part VIII line 1b)	Prior Year 3,489,552.	Current Year 2,918,808.
Jue		Contributions and grants (Part VIII, line 1h)	0.	0.
Revenue		Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)	7,894.	12,538.
æ		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	604.	492.
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,498,050.	2,931,838.
	_	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	553,552.	507,245.
	1	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
S	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,913,782.	2,029,385.
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
фe	b	Total fundraising expenses (Part IX, column (D), line 25)   246,968.		
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,039,920.	853,747.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,507,254.	3,390,377.
	19	Revenue less expenses. Subtract line 18 from line 12	-9,204.	-458,539.
Net Assets or Fund Balances			Beginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)	3,297,183.	2,672,189.
at As	21	Total liabilities (Part X, line 26)	591,438.	424,983.
Ž	22	Net assets or fund balances. Subtract line 21 from line 20	2,705,745.	2,247,206.
	art II	Signature Block		1 1 1 1 1 1 1 1 1 1 1 1
	-	Ities of perjury, I declare that I have examined this return, including accompanying schedules and sta		y knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep		
C:		Signature of officer	4/7/2	020
Sig		MERI-MARGARET DEOUDES, PRESIDENT & CEO	24.0	
Hei	e	Type or print name and title		
		Print/Type preparer's name Preparer's signature ,	Date Check	PTIN
Pai	d	RICHARD J. LOCASTRO, CPA	4/7/2020   onesh   if   self-employ	$\Box$
		Firm's name GELMAN, ROSENBERG & FREEDMAN	Firm's EIN	52-1392008
	Only	Firm's address 4550 MONTGOMERY AVE SUITE 800N	THIII S EIN	
	- ',	BETHESDA, MD 20814-2930	Phone no. (3	01) 951-9090
Ma	v the IF	RS discuss this return with the preparer shown above? (see instructions)	1 ( -	X Yes No

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2

3,035,665.

572 , 448 • including grants of \$

) (Revenue \$

Total program service expenses

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)? Х If "Yes," complete Schedule A 1 Is the organization required to complete Schedule B, Schedule of Contributors? X 2 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for X public office? If "Yes," complete Schedule C, Part I 3 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect Х during the tax year? If "Yes," complete Schedule C, Part II 4 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or Х similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to X provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 6 Did the organization receive or hold a conservation easement, including easements to preserve open space. X the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 7 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete X Schedule D, Part III 8 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? X If "Yes," complete Schedule D, Part IV 9 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent X endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Х Part VI 11a b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total X assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 11b c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total Х assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 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 Х X e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 11e Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses Х the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 11f 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Х Schedule D, Parts XI and XII 12a b Was the organization included in consolidated, independent audited financial statements for the tax year? Х If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 12b X 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? b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV X 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any X foreign organization? If "Yes," complete Schedule F, Parts II and IV 15 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 Х 16 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, 17 X column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I 17 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 18 Х 1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," Х complete Schedule G, Part III X 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a b 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 21 domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

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## NATIONAL ENVIRONMENTAL EDUCATION AND TRAINING FOUNDATION, INC.

Form 990 (2018)

Part IV | Checklist of Required Schedules (continued)

			1	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	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	00	x	
24 a	Schedule J  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
	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		Х
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	040		
d	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	2.0		
	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			X
26	Schedule L, Part I  Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	25b		
20	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			37
00	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
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, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
00	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c 29		X
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		
00	contributions? If "Yes," complete Schedule M	30		х
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			X
33	Schedule N, Part II  Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	555		
-	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	x	
Pai	Note. All Form 990 filers are required to complete Schedule O t V Statements Regarding Other IRS Filings and Tax Compliance	30		
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	<u></u> .	
			Yes	No
_	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 25			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	Gambling) winnings to prize winners?	1c	х	
	.♥ ♥ ♥ T * * * * * * * * * * * * * * * *			

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Form 990 (2018) TRAINING FOUNDATION, INC.

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

			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,		165	NO
Zu	filed for the calendar year ending with or within the year covered by this return  24			
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
~	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х
		3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
b	If "Yes," enter the name of the foreign country:	14		
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	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		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		_ <u>X</u> _
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	0-		
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b 10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
b 11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11 a				
a b	Gross income from members or shareholders			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b				
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in 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			
	excess parachute payment(s) during the year?	15		_X_
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			

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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 in Schedule O. See instructions.

_	·				X
<u>Sec</u>	tion A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 10	<u>)</u>		
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b 10	)		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	p with any other			
	officer, director, trustee, or key employee?		2		X
3	Did the organization delegate control over management duties customarily performed by or under the	e direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?		3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form		4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's as		5		Х
6	Did the organization have members or stockholders?		6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a				
	more members of the governing body?	•	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,				
_	persons other than the governing body?		7b	х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye				
а	The governing body?		8a	х	
b			8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea				
9	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		х
Sac	tion B. Policies (This Section B requests information about policies not required by the Internal R		1 3		
000	tion B. Follocs (This dection B requests information about policies not required by the internal n	evenue oode.)		Yes	No
100	Did the organization have local chapters, branches, or affiliates?		10a	165	X
	If "Yes," did the organization have written policies and procedures governing the activities of such c		IUa		
b	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
44.				Х	
_	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ly before lilling the form?	11a		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		40.	х	
12a			12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give risc		12b		
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y		1	₹.	
	in Schedule O how this was done		12c	X	
13	Did the organization have a written whistleblower policy?		13	X	
14	Did the organization have a written document retention and destruction policy?		14	Х	
15	Did the process for determining compensation of the following persons include a review and approve				
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
	The organization's CEO, Executive Director, or top management official		15a	Х	
b	Other officers or key employees of the organization		15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment with a			
	taxable entity during the year?		16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	te its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic				
	exempt status with respect to such arrangements?		16b		
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed ▶SEE SCHEDULE	0			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, as	nd 990-T (Section 501(c)(3	)s on <b>l</b> y	) availa	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	in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	nflict of interest policy, an	d finan	cial	
	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 bo	ooks and records 🕨			
	NANCY SMITH - (202)261-6467	· · · · · · · · · · · · · · · · · · ·			
	4301 CONNECTICUT AVENUE, NW. SUITE 160, WASHINGTON	L DC 20008			

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### 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) (B)				((	C)			ted any current officer, o	(E)	(F)
Name and Title	Average	(do	not c		ition more		one	Reportable	Reportab <b>l</b> e	Estimated
	hours per	box	box, unless person is both an officer and a director/trustee)				h an	compensation	compensation	amount of
	week			1 1				from the	from related organizations	other compensation
	(list any hours for	or director				-		organization	(W-2/1099-MISC)	from the
	related	tee or	stee			ensate		(W-2/1099-MISC)	(** = * * * * * * * * * * * * * * * * *	organization
	organizations	I trustee	nal tru		oyee	ed mo:				and related
	below	Individual	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) MEGAN REILLY CAYTEN	line) 1.00	프	sul	#0	Ke	E E	For			
(1) MEGAN REILLY CAYTEN BOARD CHAIR	1.00	x		х				0.	0.	0.
(2) KEVIN BUTT	1.00	^		Δ				0.	0.	<u> </u>
BOARD VICE CHAIR	1.00	X		Х				0.	0.	0.
(3) CARLOS ALCAZAR	1.00								•	•
BOARD MEMBER	1.00	x						0.	0.	0.
(4) WONYA LUCAS	1.00							•	•	
BOARD MEMBER		X						0.	0.	0.
(5) SHANNON SCHUYLER	1.00									
BOARD MEMBER		Х						0.	0.	0.
(6) GEORGE BASILE	1.00									
BOARD MEMBER (UNTIL 9/25/19)		Х						0.	0.	0.
(7) JENNIFER HARPER-TAYLOR	1.00									
BOARD MEMBER		Х						0.	0.	0.
(8) ROBERT GARCIA	1.00								_	_
BOARD MEMBER (UNTIL 8/8/19)		Х						0.	0.	0 .
(9) DON MATTINGLY	1.00									
BOARD MEMBER (FROM 8/19/19)	1 00	Х						0.	0.	0 .
(10) KATHERINE EMERSON	1.00	,,								_
BOARD MEMBER (FROM 8/19/19)	1 00	Х						0.	0.	0 .
(11) TODD GRENWOOD	1.00	,,							_	_
BOARD MEMBER (FROM 8/19/19)	1.00	Х						0.	0.	0 .
(12) KAITE HOGGE	1.00	x						0.	0.	0.
BOARD MEMBER (FROM 8/19/19) (13) MERI-MARGARET DEOUDES	40.00	^						0.	0.	0 .
PRESIDENT/CEO/ BOARD SECRETARY	40.00			х				266,556.	0.	28,613
(14) NANCY SMITH	40.00			77				200,330.	0.	20,013
VP OF FINANCE & ADMINISTRATION	40.00	1		Х				140,884.	0.	20,712
(15) SARA ESPINOZA	40.00							110,0010		20,,12
VP, PROGRAMS		1				x		145,917.	0.	11,383
(16) AMY SKALMUSKY	40.00							,	- 1	,
VP, MARKETING & COMMUNICATIONS		1				х		102,818.	0.	16,805
		1					l			

Part VII Section A. Officers,	Directors, Trus	tees, Key Em	ploy	/ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
(A)		(B)			•	C)			(D)	(E)			(F)	
Name and title		Average	(do	not c	Pos heck	itior more	than	one	Reportable	Reportab <b>l</b> e		Es	stimate	<del>:</del> d
		hours per	рох	, unle cer an	ss pe	rson	is bot	h an	compensation	compensatio			nount (	of
		week	<u> </u>	Cer an	1444	lecto	Ji/iius	lee)	from	from related			other	
		(list any hours for	recto						the ·	organization			pensa	
		related	or d	99			sated		organization (W-2/1099-MISC)	(W-2/1099-MIS	) (Oc		om the	
		organizations	ruste	trus		e e	nben		(۷۷-2/1099-101130)				anizati d re <b>l</b> ati	
		below	dualt	tiona	L	nploy	stcol	  -					anizatio	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former						
			Γ	t =	Ī	_								
			1											
											$\dashv$			
			-											
			_											
												<u> </u>		
			1											
			1											
									656 455					
									656,175.		0.		7,5	
c Total from continuation s									0. 656,175.		0.	7	7,5	0.
<ul><li>d Total (add lines 1b and 1c</li><li>2 Total number of individuals</li></ul>										1000 of reported			,,,	<u> </u>
compensation from the org	, -	iot iimitea to ti	1056	IISLE	eu a	DOV	e) wi	10 11	eceived more man \$100	,,000 or reportab	ie.			4
- compensation from the org	ariizatiori 🗾												Yes	No
3 Did the organization list any	y <b>former</b> officer,	director, or tru	uste	e, ke	y er	nplo	yee	, or	highest compensated e	mployee on				
line 1a? If "Yes," complete	Schedule J for s	uch individual										3		X
4 For any individual listed on	line 1a, is the su	ım of reportab	le c	omp	ensa	atior	n and	d otl	her compensation from	the organization				
and related organizations g	reater than \$150	0,000? <i>If</i> "Yes,	" co	mple	ete S	Sche	edule	e <i>J f</i>	for such individual			4	X	
5 Did any person listed on lin		•				-		elat	ted organization or indiv	idual for services				
rendered to the organizatio		plete Schedul	e J t	for si	uch	pers	son .					5		X
Section B. Independent Contra										<b>*</b>			-	
<ol> <li>Complete this table for you the organization. Report co</li> </ol>	_										ipens	ation i	rom	
the organization. Report co	(A)	trie caleridar y	Cai	criai	ng v	VILII	OI W	101111	(B)	year.		(C	<u></u>	
Nam	ne and business	address	N	INC	3				Description of s	ervices	С		nsatio	n
-														
								$\Box$						
2 Total number of independen	nt contractors (	naludina hut :-	O+ 1:	mi+-	d +-	+h-	SC #	nto c	d abovo) who received	oro than				
2 Total number of independe \$100,000 of compensation		_	iUt II	ппе	น เป		se II: O	siec	л арочеј wно гесетуео п	iore man				
# .55,555 or 55mpondulon												Form	990 (2	2018)

Form 990 (2018) TRAINING
Part VIII | Statement of Revenue

		Check if Schedule O cont	tains a resnonse	or note to any li	ne in this Part VIII			
		Check if Schedule O cont	tams a response	or riote to arry in	(A) Total revenue	(B) Related or exempt function revenue	<b>(C)</b> Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	b d e f	Federated campaigns Membership dues Fundraising events Related organizations Government grants (contribut All other contributions, gifts, gran similar amounts not included abo Noncash contributions included in lines	1b 1c 1d tions) 1e 1 , ats, and ve 1f 1 ,	597,023. 321,785.				
an Cc	h	Total. Add lines 1a-1f		<b>&gt;</b>	2,918,808.			
Program Service Revenue	2 a b c d			Business Code				
Ā		All other program service reve						
	3 4 5	I Total. Add lines 2a-2f Investment income (including other similar amounts) Income from investment of ta Royalties	dividends, intere	est, and roceeds	12,538.			12,538.
	6 a	Gross rents Less: rental expenses	(i) Real	(ii) Personal				
	d	Rental income or (loss)  Net rental income or (loss)  Gross amount from sales of assets other than inventory		(ii) Other				
	С	Less: cost or other basis and sales expenses Gain or (loss)						
enne		Net gain or (loss)Gross income from fundraisin including \$		<b>&gt;</b>				
Other Revenu	b	contributions reported on line Part IV, line 18 Less: direct expenses	a					
	9 a	Net income or (loss) from fund Gross income from gaming ad Part IV, line 19	ctivities. See	<b>&gt;</b>				
	10 a	Net income or (loss) from gan Gross sales of inventory, less and allowances Less: cost of goods sold	ning activities returns a b					
		Miscellaneous Revenu		Business Code	492.			492.
		All other revenue  Total. Add lines 11a-11d  Total revenue. See instructions		<b>&gt;</b>	492. 2,931,838.	0.	0.	13,030.

### 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).

D^	Check if Schedule O contains a respons	se or note to any line in (A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	507,245.	507,245.		
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,				
	trustees, and key employees	480,952.	418,895.	1,360.	60,697
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,247,347.	1,147,024.	14,178.	86,145
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	63,215.	58,741.		4,474 8,233
9	Other employee benefits	112,812.	104,579.		8,233
10	Payroll taxes	125,059.	114,307.		10,752
11	Fees for services (non-employees):				
а	Management				
b	Legal			4 - 4	
С	Accounting	45,091.	37,258.	6,156.	1,677
d	, o	42,000.			42,000
е					
f					
g			400 046	44 0-4	
	column (A) amount, list line 11g expenses on Sch O.)	203,034.	182,816.	14,871.	5,3 <u>47</u> 69
12	Advertising and promotion	1,063.	933.	61.	69
13	Office expenses	80,852.	77,646.	1,239.	1,967
14	Information technology				
15	Royalties	000 240	175 664	10 501	14 104
16	Occupancy	200,349.	175,664.	10,581.	14,104
17	Travel	53,552.	51,316.	761.	1,475
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	E4 200	FO 110	772	1 400
19	Conferences, conventions, and meetings	54,390.	52,118.	773.	1,499
20	Interest				
21	Payments to affiliates	47,323.		47,323.	
22	Depreciation, depletion, and amortization	20,416.	17,773.	1,133.	1,510
23	Insurance Other expenses Itamize expenses not severed	40,410.	11,113.	1,133.	1,510
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	TTORNORO AND REED	80,032.	71,391.	3,704.	4,937
b	PUBLICATIONS AND DUES	8,393.	6,820.	244.	1,329
С	EQUIP. RENTAL & MAINT.	7,240.	6,347.	383.	510
d	PAYROLL PROCESSING FEES	4,761.		4,761.	
е	All other expenses	5,251.	4,792.	216.	243
25	Total functional expenses. Add lines 1 through 24e	3,390,377.	3,035,665.	107,744.	246,968
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 990 (2018)
Part X | Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or no	te to ar	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			300.	1	300.
	2	Savings and temporary cash investments			2,000,791.	2	1,859,083.
	3	Pledges and grants receivable, net			991,681.	3	542,798.
	4	Accounts receivable, net			-	4	-
	5	Loans and other receivables from current and for					
		trustees, key employees, and highest compens					
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqual					
		section 4958(f)(1)), persons described in section					
		employers and sponsoring organizations of sec					
<u>s</u>		employees' beneficiary organizations (see instr)			6		
Assets	7	Notes and loans receivable, net			7		
ĕ	8	Inventories for sale or use				8	
	9				65,534.	9	69,983.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	693,579.			
	b	Less: accumulated depreciation	10b	509,617.	222,814.	10c	183,962.
	11	Investments - publicly traded securities		11			
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	16,063. 3,297,183.	15	16,063.		
	16	Total assets. Add lines 1 through 15 (must equ			3,297,183.	16	2,672,189.
	17	Accounts payable and accrued expenses			163,376.	17	204,619.
	18	Grants payable		18			
	19	Deferred revenue			176,079.	19	4,098.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
es	22	Loans and other payables to current and forme					
Ħ		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L				22	
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelate				24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines			251,983.		216 266
		Schedule D			591,438.	25	216,266. 424,983.
	26			<b>V</b> .	331,430.	26	424,903.
		Organizations that follow SFAS 117 (ASC 958		ck nere 🚩 🕰 and			
Š		complete lines 27 through 29, and lines 33 ar			1,512,173.	07	1,302,404.
<u>la</u> u	27	Unrestricted net assets			1,193,572.	27	944,802.
B	28	Temporarily restricted net assets			1,173,372.	28 29	744,0024
Net Assets or Fund Balances	29	Permanently restricted net assets  Organizations that do not follow SFAS 117 (A	SC 05	R) check here		29	
Ē		and complete lines 30 through 34.	13C 936	b), check here			
ts o	30	Capital stock or trust principal, or current funds				30	
sse	30 31	Paid-in or capital surplus, or land, building, or ed				31	
t As	32	Retained earnings, endowment, accumulated in				32	
Š	33	Total net assets or fund balances			2,705,745.	33	2,247,206.
	34			3,297,183.	34	2,672,189.	
	<u> </u>	Total habilities and thet assets/fully balances .	-, -, -, -, -, -, -, -, -, -, -, -, -, -	J-T	Form 990 (2010)		

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)	1		2,93		
2	Total expenses (must equal Part IX, column (A), line 25)	2	3	3,39	0,3	<u>77.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3		-45		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2	2,70	5,7	45.
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 in Schedule O)	9				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	2	2,24	7,2	06.
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	Ο.				
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					
	consolidated basis, or both:					
	X 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	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule C	).			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ng <b>l</b> e Au	dit			
	Act and OMB Circular A-133?			3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired au	dit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b	Х	

### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## 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.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization NATIONAL ENVIRONMENTAL EDUCATION AND Employer identification number TRAINING FOUNDATION, INC. 54-1557043 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.)

•	=	A church, convention of ch					',(^,(') <del>-</del>						
2	Щ	A school described in <b>sect</b> i	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Forn	n 990 or 99	90-EZ).)							
3	Щ	A hospital or a cooperative	hospital service orga	anization described in <b>s</b> e	ection 170	)(b)(1)(A)(i	ii).						
4		A medical research organiz	ation operated in co	njunction with a hospita	described	d in <b>sectio</b>	n 170(b)(1)(A)(iii). Enter	the hospital's name,					
		city, and state:											
5		An organization operated for	or the benefit of a co	ollege or university owner	d or opera	ted by a q	overnmental unit describ	ped in					
		section 170(b)(1)(A)(iv) (C		· ,		, 0							
6		A federal, state, or local gov	•	mental unit described in	section 17	70(h)(1)( <b>Δ</b> )	(v)						
	X		_				· ·	public described in					
'	22	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). (C		(4)(A)( )) (O									
8	$\Box$	A community trust describe			•								
9		An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college											
		or university or a non-land-g	grant college of agric	culture (see instructions)	Enter the	name, city	y, and state of the colleg	e or					
		university:											
10		An organization that norma	Ily receives: (1) more	e than 33 1/3% of its sup	port from	contributi	ons, membership fees, a	nd gross receipts from					
		activities related to its exen	npt functions - subje	ct to certain exceptions	and (2) no	o more tha	ın 33 1/3% of its suppor	t from gross investment					
		income and unrelated busin	ness taxable income	(less section 511 tax) fr	om busine	esses acqu	ired by the organization	after June 30, 1975.					
		See section 509(a)(2). (Cor	mp <b>l</b> ete Part III.)										
11		An organization organized a	and operated exc <b>l</b> us	sively to test for public sa	fety. See	section 50	09(a)(4).						
12		An organization organized a	and operated exclus	ively for the benefit of, to	perform	the functio	ons of, or to carry out the	purposes of one or					
		more publicly supported or	•	· · · · ·	•		•	• •					
		lines 12a through 12d that	-										
а		Type I. A supporting orga	•			•		aivina					
_		the supported organization	•	•	•								
		organization. You must o			a majority	or the dire	otors or tradices or the c	apporting					
h		7 ~	-		tion with it	to ournort	ad arganization(a) by ba	vina					
b		☐ Type II. A supporting org	•				•	•					
		control or management o			ame perso	ons that co	ontrol or manage the sup	рропеа					
		organization(s). You mus											
С							• •	ed with,					
		its supported organization	n(s) (see instructions	s). You must complete	Part IV, Se	ections A,	D, and E.						
d			<b>, integrated.</b> A supp	oorting organization oper	ated in co	nnection v	with its supported organi	zation(s)					
		that is not functionally int	egrated. The organiz	zation generally must sa	tisfy a dist	ribution re	quirement and an attent	iveness					
		requirement (see instruct	ions). <b>You must co</b> r	mplete Part IV, Sections	A and D,	, and Part	V.						
е		$oldsymbol{ol}}}}}}}}}}}}}} $ The cord beland the both both both both both both both both	anization received a	written determination fro	m the IRS	that it is a	a Type I, Type II, Type III						
		functionally integrated, or	r Type III non-functio	nally integrated support	ing organi:	zation.							
f	Ente	er the number of supported o	organizations										
g	Prov	vide the following information	about the supporte	ed organization(s).									
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	anization listed ing document?	(v) Amount of monetary	(vi) Amount of other					
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see instructions)	support (see instructions)					
				assis (see menasisme)									
						-							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 832021 10-11-18 Schedule A (Form 990 or 990-EZ) 2018

### Schedule A (Form 990 or 990-EZ) 2018 TRAINING FOUNDATION, INC.

Part II 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.) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 3,507,009 2,918,808 4,116,417 3,121,263 3,489,552 17,153,049. 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 3,507,009, 4,116,417 3,121,263 3,489,552. 2,918,808 17,153,049. 4 Total. Add lines 1 through 3 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) 4,604,688. 12,548,361. 6 Public support. Subtract line 5 from line 4 Section B. Total Support (d) 2017 Calendar year (or fiscal year beginning in) (a) 2014 **(b)** 2015 (c) 2016 (e) 2018 (f) Total 3,507,009, 4,116,417 3,121,263 3,489,552. 2,918,808 17,153,049. 7 Amounts from line 4 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, 1,099 2,912. 7,894 12,538. 25,529. 1,086. and income from similar sources 9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital 2,001. 23,786 493. 604. 492 27,376. assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 12 Gross receipts from related activities, etc. (see instructions) 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 72.93 14 14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) % 15 Public support percentage from 2017 Schedule A, Part II, line 14 71.93 15 16a 33 1/3% support test - 2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and ightharpoons Xstop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10% -facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the

Schedule A (Form 990 or 990-EZ) 2018

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

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

Section A. Public Support	below, please com	plete Part II.)				
Calendar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and	(a) 2014	(b) 2013	(6) 2010	(u) 2017	(e) 2018	(i) 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						
3 Gross receipts from activities that						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to						
or expended on its behalf						
5 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and						
3 received from disqualified persons	<i>i</i>					
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						
<b>c</b> Add <b>l</b> ines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support			1			
Calendar year (or fiscal year beginning in)	- · <i>·</i>	<b>(b)</b> 2015	(c) 2016	(d) 2017	<b>(e)</b> 2018	(f) Total
9 Amounts from line 6						
<b>10a</b> Gross income from interest,						
dividends, payments received on securities loans, rents, royalties,						
and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business						
activities not included in line 10b,						
whether or not the business is regularly carried on						
12 Other income. Do not include gain						
or loss from the sale of capital						
assets (Explain in Part VI.)						
14 First five years. If the Form 990 is for	-	s first second thi	rd fourth or fifth t	ax vear as a section	n 501(c)(3) organiz	ration
check this box and stop here	9		<i>'</i>	,	( / ( / )	· —
Section C. Computation of Pub						
15 Public support percentage for 2018			column (f))		15	%
16 Public support percentage from 201					16	%
Section D. Computation of Inve						
17 Investment income percentage for 2	.018 (line 10c, colu	mn (f), divided by I	ine 13, column (f))		17	%
18 Investment income percentage from	ı <b>2017</b> Schedu <b>l</b> e A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2018. If th					33 1/3%, and line 1	7 is not
more than 33 1/3%, check this box						
b 33 1/3% support tests - 2017. If th		-				
line 18 is not more than 33 1/3%, ch	-					
20 Private foundation. If the organization						

### | Part IV | Supporting Organizations

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

### 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **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 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.)

		-	
1		Yes	No
	1		
	2		
	3a		
	Ol-		
	3b		
	3с		
	4a		
	4b		
	4c		
	10		
	5a		
	5b		
	5c		
	6		
	_		
	7		
	8		
	9a		
	9b		
	9с		
	10a		
	. 34		
	10b		
m 9	90 or 99	0-EZ	2018

Par	t IV   Supporting Organizations <sub>(continued)</sub>			
			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 (b) and (c)			
-	below, the governing body of a supported organization?	11a		
h	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations	110		
360	tion B. Type I Supporting Organizations		V	NI-
	Бил и		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	tion C. Type II Supporting Organizations			
	<u> </u>		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		
S00:	tion D. All Type III Supporting Organizations	ı		
360	tion B. All Type III Supporting Organizations		V	NI-
	Fig. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		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 (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	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. <i>Complete</i> <b>line 3</b> <i>below.</i>			
c	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instr	uctions	3).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		100	140
a	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	0-		
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
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? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

832025 10-11-18

## Schedule A (Form 990 or 990-EZ) 2018 TRAINING FOUNDATION,

Pai 1	Check here if the organization satisfied the Integral Part Test as a qualifyin			Part VI.) See instructions. A
•	other Type III non-functionally integrated supporting organizations must co	-		· are trij ood maa aataan.
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optiona <b>l</b> )
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	ion 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):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
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 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional		ed Type III supporting ord	anization (see
	instructions).			•

Schedule A (Form 990 or 990-EZ) 2018

Schedule A (Form 990 or 990-EZ) 2018 TRAINING FOUNDATION, INC.

Pai	rt V	Type III Non-Functionally Integrated 509	(a)(3) Supporting Org	anizations (continued)	
Sect	ion D	- Distributions		,	Current Year
1	Amo	unts paid to supported organizations to accomp <b>l</b> ish exe	mpt purposes		
2	2 Amounts paid to perform activity that directly furthers exempt purposes of supported				
	orgar	nizations, in excess of income from activity			
3	Admi	inistrative expenses paid to accomplish exempt purpose	ns		
4		unts paid to acquire exempt-use assets			
5	Quali	ified set-aside amounts (prior IRS approval required)			
6	Othe	r distributions (describe in <b>Part VI</b> ). See instructions.			
7	Total	l annual distributions. Add lines 1 through 6.			
8		ibutions to attentive supported organizations to which the	ne organization is responsiv	e	
		ride details in <b>Part VI</b> ). See instructions.	,		
9		ibutable amount for 2018 from Section C, line 6			
10		8 amount divided by line 9 amount			
			(i)	(ii)	(iii)
Sect	ion E	- Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2018	Distributable Amount for 2018
_1_	Distri	ibutable amount for 2018 from Section C, line 6			
2	Unde	erdistributions, if any, for years prior to 2018 (reason-			
	able	cause required- explain in Part VI). See instructions.			
3	Exce	ss distributions carryover, if any, to 2018			
а	From	2013			
b	From	2014			
	From				
d	From	2016			
е	From	2017			
f	Total	of lines 3a through e			
	Appli	ied to underdistributions of prior years			
		ied to 2018 distributable amount			
i		over from 2013 not applied (see instructions)			
ī		ainder. Subtract lines 3g, 3h, and 3i from 3f.			
4		ibutions for 2018 from Section D,			
	line 7	_ ^			
a		ied to underdistributions of prior years			
		ied to 2018 distributable amount			
		ainder. Subtract lines 4a and 4b from 4.			
5		aining underdistributions for years prior to 2018, if			
-		Subtract lines 3g and 4a from line 2. For result greater			
	-	zero, explain in <b>Part VI.</b> See instructions.			
6		aining underdistributions for 2018. Subtract lines 3h			
3		4b from line 1. For result greater than zero, explain in			
		VI. See instructions.			
7		ess distributions carryover to 2019. Add lines 3j			
•	and 4	-			
<del></del> 8		kdown of line 7:			
		ss from 2014			
		ss from 2015			
		ss from 2016			
		ss from 2017 ss from 2018			
C	しんしに	aa iiviii eu IO			

Schedule A (Form 990 or 990-EZ) 2018

### NATIONAL ENVIRONMENTAL EDUCATION AND

Schedule A (Form 990 or 990-EZ) 2018 TRAINING FOUNDATION, 54-1557043 Page 8 INC. Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

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

**2018** 

Name of the organization

NATIONAL ENVIRONMENTAL EDUCATION AND TRAINING FOUNDATION, INC.

Employer identification number

54-1557043

Organization type (check one):					
Filers of	f:	Section:			
Form 990 or 990-EZ		$\overline{\mathbf{X}}$ 501(c)( $\overline{3}$ ) (enter number) organization			
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation			
		527 political organization			
Form 99	0-PF	501(c)(3) exempt private foundation			
		4947(a)(1) nonexempt charitable trust treated as a private foundation			
		501(c)(3) taxable private foundation			
	nly a section 501(c)	covered by the <b>General Rule</b> or a <b>Special Rule</b> .  7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.			
	For an organization	rilling 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.			
	year, total contribu	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the ty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address),			
	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., nplete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively e, etc., contributions totaling \$5,000 or more during the year \ \rightarrow \ \\ \rightarrow \ \rightarrow \ \\ \rightarrow \ \\ \rightarrow \ \\ \rightarrow \ \\ \rightarrow \ \rightarrow \ \\ \rightarrow \ \rightarrow \ \\ \rightarrow \ \\ \rightarrow \ \rightarrow \ \\ \rightarrow \ \rightarrow \rightarrow \ \rightarrow \ \rightarrow \rightarrow \rightarrow \ \rightarrow \rightarrow \ \rightarrow \rig			
but it mu	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 he 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) (2018)

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

Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
1		\$65,000.	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
2		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
3		\$150,000.	Person X Payroll	
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
4		\$\$	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
5		\$ 870,200.	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
6		\$150,000.	Person X Payroll	

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

Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.			
(a) No.	(b) Name, address, and <b>ZI</b> P + 4	(c) Total contributions	(d) Type of contribution	
7		\$\$	Person X Payroll	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
8		\$119,593.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
9		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a)	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)	

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

Employer identification number

Noncash Property (see instructions). Use duplicate copies of Part II if 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
	_	
	(b) Description of noncash property given  (b) Description of noncash property given	(b) Description of noncash property given  (c) FMV (or estimate) (See instructions.)  (d) FMV (or estimate) (See instructions.)  (e) FMV (or estimate) (See instructions.)  (f) FMV (or estimate) (See instructions.)  (g) FMV (or estimate) (See instructions.)  (h) Description of noncash property given  (c) FMV (or estimate) (See instructions.)  (d) FMV (or estimate) (See instructions.)  (e) FMV (or estimate) (See instructions.)  (f) FMV (or estimate) (See instructions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Employer identification number Name of organization 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. `from 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 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 Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift

823454 11-08-18

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

### SCHEDULE C

(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

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.

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

<ul> <li>Section 501(c)(4), (5), or (6) organiza</li> </ul>	tions: Complete Part III			
	L ENVIRONMENTAL	EDUCATION A	ND Er	nployer identification number
TRAININ	G FOUNDATION, IN	IC.		54-1557043
Part I-A Complete if the org	janization is exempt und	der section 501(c)	or is a section 527	' organization.
<ol> <li>Provide a description of the organiz</li> <li>Political campaign activity expendit</li> <li>Volunteer hours for political campa</li> </ol>	ures		<b>&gt;</b>	*\$
Part I-B Complete if the org	janization is exempt und	der section 501(c)	(3).	
1 Enter the amount of any excise tax				<b>\$</b>
2 Enter the amount of any excise tax	incurred by organization manag	ers under section 495	5	<b>\$</b>
3 If the organization incurred a section				
4a Was a correction made?				Yes No
<b>b</b> If "Yes." describe in Part IV.				
	janization is exempt und		<u> </u>	
1 Enter the amount directly expended				<b>\$</b>
2 Enter the amount of the filing organ	ization's funds contributed to o	ther organizations for s	section 527	
exempt function activities				* \$
3 Total exempt function expenditures			*	
line 17b				
4 Did the filing organization file Form				
5 Enter the names, addresses and er made payments. For each organiza contributions received that were pr political action committee (PAC). If	tion listed, enter the amount pa omptly and directly delivered to	id from the filing organi a separate political org	ization's funds. Also ente ganization, such as a sep	r the amount of political
<b>(a)</b> Name	<b>(b)</b> Address	(c) EIN	(d) Amount paid fror filing organization's funds. If none, enter	contributions received and

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

832041 11-08-18

Schedule C (Form 990 or 990-EZ) 2018 TRAINING FOUNDATION, INC.

44,100.

81,508.

Schedule C (Form 990 or 990-EZ) 2018 TRAINING FOUNDATION, INC. 54-1557043 Page 2							
Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under							
section 501(h)).							
Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,							
expenses, and s	expenses, and share of excess lobbying expenditures).						
3 Check 🕨 🔲 if the filing organ	Check Filing organization checked box A and "limited control" provisions apply.						
Li (The term "expe	)	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals				
1a Total lobbying expenditures to in	nfluence public opinion (	(grass roots lobbying)		0.			
<b>b</b> Total lobbying expenditures to in	nfluence a legislative bo	dy (direct lobbying)		42,000.			
c Total lobbying expenditures (ad-	d lines 1a and 1b)			42,000.			
d Other exempt purpose expendit	ures			3,348,377.			
e Total exempt purpose expenditu	ires (add <b>l</b> ines 1c and 1d	d)		3,390,377.			
f Lobbying nontaxable amount. E	nter the amount from th	e following table in bot	h columns.	319,519.			
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	000,000 \$100,00	00 plus 15% of the exc	ess over \$500,000.				
Over \$1,000,000 but not over \$	,500,000 \$175,00	00 plus 10% of the exc	ess over \$1,000,000.				
Over \$1,500,000 but not over \$	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	,			79,880.			
h Subtract line 1g from line 1a. If a				0.			
i Subtract line 1f from line 1c. If z				0.			
j If there is an amount other than		line 1i, did the organiza	ation fi <b>l</b> e Form 4720	Г			
reporting section 4911 tax for th				L	Yes No		
(Some organizations	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 (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	<b>(c)</b> 2017	<b>(d)</b> 2018	(e) Total		
2a Lobbying nontaxable amount	326,031.	331,070.	325,363.	319,519.	1,301,983.		
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					1,952,975.		

42,450.

82,768.

Schedule C (Form 990 or 990-EZ) 2018

171,150.

325,497.

488,246.

42,000.

79,880.

c Total lobbying expenditures

d Grassroots nontaxable amount e Grassroots ceiling amount

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

42,600.

81,341.

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 th	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b	)
	e lobbying activity.	Yes	No	Amo	unt
1	During the year, did the filing organization attempt to influence foreign, national, state, or				
	local legislation, including any attempt to influence public opinion on a legislative matter				
	or referendum, through the use of:				
a	Volunteers?				
	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?				
	- Cut - 1: 1: - C				
	Other activities?  Total. Add lines 1c through 1i				
2 2	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(	5), or se	ection	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
_3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
ra	rt III-B Complete if the organization is exempt under section 501(c)(4), sectio	n 501(c)(	5), or se	ection	
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No," OR	(b) Par		ie 3, is
	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	"No," OR	(b) Par		ie 3, is
	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	"No," OR	(b) Par		ie 3, is
1 2	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).	"No," OR	(b) Par		ne 3, is
1 2	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).  Current year	"No," OR	(b) Par		ne 3, is
1 2 a	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).  Current year  Carryover from last year	"No," OR	(b) Par		ne 3, is
1 2 a	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).  Current year  Carryover from last year  Total	"No," OR	(b) Par 1 2a 2b 2c		ne 3, is
1 2 a	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).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	"No," OR	(b) Par 1 2a 2b 2c		ne 3, is
1 2 a b	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).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	"No," OR	(b) Par 1 2a 2b 2c		ne 3, is
1 2 a b c 3	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).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section and the section and processing the section agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section agree to carryover to the reasonable estimate of nondeductible lobbying and processing the section agree to carryover to the reasonable estimate the sect	"No," OR	(b) Par  2a 2b 2c 3		ne 3, is
1 2 a b	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).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	"No," OR	(b) Par  2a 2b 2c 3		ne 3, is
1 2 a k	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).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedes the organization agree to carryover to the reasonable estimate of nondeductible lobbying and preexpenditure next year?	"No," OR	(b) Par  2a 2b 2c 3		ne 3, is
1 2 a b c c 3 4 5 Pa	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).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedates the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)	"No," OR	(b) Par  2a 2b 2c 3 4 5	t III-A, lir	ne 3, is
1 2 a b c c 3 4 4 5 Prov	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).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedable the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  Total  Supplemental Information  Tide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	"No," OR	(b) Par  2a 2b 2c 3 4 5	t III-A, lir	ne 3, is
1 2 a b c c 3 4 4 5 Prov	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).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedable the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  Total  Supplemental Information  Tide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	"No," OR	(b) Par  2a 2b 2c 3 4 5	t III-A, lir	ne 3, is
1 2 a b c c 3 4 4 5 Prov	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).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedable the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  Total  Supplemental Information  Tide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	"No," OR	(b) Par  2a 2b 2c 3 4 5	t III-A, lir	ne 3, is
1 2 a b c c 3 4 4 5 Prov	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).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedable the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  Total  Supplemental Information  Tide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	"No," OR	(b) Par  2a 2b 2c 3 4 5	t III-A, lir	ne 3, is
1 2 2 8 k c 3 4 5 Prov	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).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedable the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  Total  Supplemental Information  Tide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	"No," OR	(b) Par  2a 2b 2c 3 4 5	t III-A, lir	ne 3, is
1 2 a b c c 3 4 4 5 Prov	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).  Current year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceedable the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pole expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)  Total  Supplemental Information  Tide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group)	"No," OR	(b) Par  2a 2b 2c 3 4 5	t III-A, lir	ne 3, is

### **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, lin		
	organization another to only only only are try in	(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		ed funds
	are the organization's property, subject to the organization's	=	
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of		
Pai			
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a histor	rically important land area
	Protection of natural habitat	Preservation of a certif	ied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form o	f 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	re
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel		
	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	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	ervation easements during the year
	<b></b>		
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservati	on easements during the year
	<b>&gt;</b> \$		
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	•	
	include, if applicable, the text of the footnote to the organizat	tion's financial statements that describes the	he organization's accounting for
Pai	conservation easements.  t III   Organizations Maintaining Collections or	f Art Historical Treasures or Ot	har Similar Assats
rai	Complete if the organization answered "Yes" on Form	•	nei Siiniai Assets.
			ont and balance about works of art
ıa	If the organization elected, as permitted under SFAS 116 (AS historical treasures, or other similar assets held for public exh		
	the text of the footnote to its financial statements that descri		ce of public service, provide, in Fart XIII,
b	If the organization elected, as permitted under SFAS 116 (AS		and balance shoot works of art, historical
D	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:	ducation, or research in farther ance of pub	ine service, provide the following amounts
	(i) Revenue included on Form 990, Part VIII, line 1		▶ ¢
			<b>.</b> .
2	If the organization received or held works of art, historical treations		
_	the following amounts required to be reported under SFAS 1		ga, provide
а	Revenue included on Form 990, Part VIII, line 1	, , ,	<b>&gt;</b> \$
	Assets included in Form 990, Part X		

832051 10-29-18

Schedule D (Form 990) 2018

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

	t III Organizations Maintaining C	collections of A			easures o	r Othe		ar Asse			age Z
	Using the organization's acquisition, accessi										
3		on, and other record	is, crieci	Carry Or tirle	ioliowing triat	ale a sig	Jillicani i	use or its	COIIECTIOI	Helli	5
_	(check all that apply):  Public exhibition	ام		l oan or ove	hange progra	mo					
a		d									
b	Scholarly research	е	• — '	Other							
C	Preservation for future generations	-114:						: . D	+ VIII		
4	Provide a description of the organization's co			-	-			ose in Par	t XIII.		
5	During the year, did the organization solicit o								٦٧		١
Dai	to be sold to raise funds rather than to be ma								<u> Yes</u>		No
Pai	t IV Escrow and Custodial Arran reported an amount on Form 990, Par		ete if the	organizatio	n answered "	Yes" on I	-orm 990	), Part IV,	line 9, or		
1a	Is the organization an agent, trustee, custod	ian or other intermed	diary for	contributior	ns or other ass	sets not i	ncluded		_		,
	on Form 990, Part X?							L	Yes		No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing t	able:							
									Amount		
С	Beginning balance						1c				
	Additions during the year										
	Distributions during the year										
f	Ending balance										
2a	Did the organization include an amount on Fe								Yes		No
b	If "Yes," explain the arrangement in Part XIII.										
Pai	T V Endowment Funds. Complete i	f the organization ar	swered	"Yes" on Fo	orm 990, Part	IV, line 10	Э.				
		(a) Current year	<b>(b)</b> P	rior year	(c) Two years	s back 🛭 🕻	<b>d)</b> Three y	ears back	(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										
g	End of year balance										
2	Provide the estimated percentage of the curr	rent year end baland	e (line 1	g, column (a	a)) held as:	•					
а	Board designated or quasi-endowment	•	%	•							
b	Permanent endowment	%	_								
С	Temporarily restricted endowment	<del></del> %									
	The percentages on lines 2a, 2b, and 2c sho	uld equal 100%.									
За	Are there endowment funds not in the posse		ation tha	at are he <b>l</b> d a	and administer	red for th	e organiz	ation			
	by:	3					Ü		Γ	Yes	No
	(i) unrelated organizations								3a(i)		
	(ii) related organizations								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requi	red on S	chedule R?							
4	Describe in Part XIII the intended uses of the										
Pai	t VI Land, Buildings, and Equipm										
	Complete if the organization answere		D. Part I\	/. line 11a. S	See Form 990.	. Part X. I	ine 10.				
	Description of property	(a) Cost or o			or other		cumulate	ed	(d) Book	valu	<del>-</del>
	Description of property	basis (investr			(other)		reciation		(4) 200.	· · ·	
	Land	`			. ,						
	Buildings										
2	Leasehold improvements			2.4	4,878.		87,2	<del>59. </del>	15	7.6	19.
4	Equipment						<i></i> ,			<del>, , ,</del>	
	Other			4.4	8,701.	4	22,3	58.	2.6	5.3	43.
	Add lines 1a through 1a (Column (d) must a		Y colun				,_,	<del> </del>		3 9	

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018

54-1557043 Page 3

	Complete if the organization analyses "Vee"	on Form 000 Port IV line	a 11h Coa Farm 000 Dart V lina 1	0
(a) Descrip	Complete if the organization answered "Yes" oftion of security or category (including name of security)	on Form 990, Part IV, line (b) Book value		z. t or end-of-year market value
• • •	at day to at the	(-,	(0,	
	al derivatives -held equity interests		<u> </u>	
( <b>3)</b> Other	-neid equity interests		<u> </u>	
(A)				
(A) (B)				
(C)				
(D)			+	
(E)			+	
(F)			+	
(G)			+	
(H)	h) must equal Form 000 Port V and (D) line 10 \			
	b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related.			_
	Complete if the organization answered "Yes"  (a) Description of investment			
	(a) Description of investment	(b) Book value	(c) Method of Valuation: Cos	t or end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX				_
	Complete if the organization answered "Yes"		e 11d. See Form 990, Part X, line 1	
	(a)	Description		(b) Book value
(1)				
(2)				
(3)				
(4)				
/ <del>- `</del>				
(5)				
(6)				
(6)				
(6) (7) (8) (9)				
(6) (7) (8) (9)	ımn (b) must equal Form 990, Part X, col. (B) lin <b>Other Liabilities.</b>	e 15.)		
(6) (7) (8) (9) Total. (Colu	Other Liabilities.  Complete if the organization answered "Yes"	·		► line 25.
(6) (7) (8) (9) Total. (Colu	Other Liabilities.	·	e 11e or 11f. See Form 990, Part X (b) Book value	► line 25.
(6) (7) (8) (9) Total. (Colu Part X	Other Liabilities.  Complete if the organization answered "Yes"	·	(b) Book value	Iine 25.
(6) (7) (8) (9) Total. (Colu Part X	Other Liabilities.  Complete if the organization answered "Yes"  (a) Description of liability  deral income taxes  EFERRED RENT	on Form 990, Part IV, line		Iine 25.
(6) (7) (8) (9) Total. (Colu Part X 1. (1) Fec (2) DE	Other Liabilities.  Complete if the organization answered "Yes"  (a) Description of liability  deral income taxes	on Form 990, Part IV, line	(b) Book value	► line 25.
(6) (7) (8) (9) Total. (Colu Part X 1. (1) Fec (2) DE (3) DE	Other Liabilities.  Complete if the organization answered "Yes"  (a) Description of liability  deral income taxes  EFERRED RENT	on Form 990, Part IV, line	(b) Book value	Iine 25.
(6) (7) (8) (9) Total. (Columna X Part X 1. (1) Fec (2) DE (3) DE (4) AL	Other Liabilities.  Complete if the organization answered "Yes"  (a) Description of liability  deral income taxes  EFERRED RENT  EFERRED TENANT IMPROVEME	on Form 990, Part IV, line	(b) Book value 66,069.	> line 25.
(6) (7) (8) (9) Total. (Columbra X Part X 1. (1) Fec (2) DE (3) DE (4) AI (5)	Other Liabilities.  Complete if the organization answered "Yes"  (a) Description of liability  deral income taxes  EFERRED RENT  EFERRED TENANT IMPROVEME	on Form 990, Part IV, line	(b) Book value 66,069.	<b>&gt;</b> line 25.
(6) (7) (8) (9) Total. (Columna Part X ) 1. (1) Feccn (2) DEnna (3) DEnna (4) AL (5) (6)	Other Liabilities.  Complete if the organization answered "Yes"  (a) Description of liability  deral income taxes  EFERRED RENT  EFERRED TENANT IMPROVEME	on Form 990, Part IV, line	(b) Book value 66,069.	line 25.
(6) (7) (8) (9) Total. (Column Part X  1. (1) Fecc (2) DE (3) DE (4) AL (5) (6) (7)	Other Liabilities.  Complete if the organization answered "Yes"  (a) Description of liability  deral income taxes  EFERRED RENT  EFERRED TENANT IMPROVEME	on Form 990, Part IV, line	(b) Book value 66,069.	Iine 25.
(6) (7) (8) (9) Total. (Column Part X  1. (1) Fecc (2) DE (3) DE (4) AL (5) (6) (7) (8)	Other Liabilities.  Complete if the organization answered "Yes"  (a) Description of liability  deral income taxes  EFERRED RENT  EFERRED TENANT IMPROVEME	on Form 990, Part IV, line	(b) Book value 66,069.	
(6) (7) (8) (9) Total. (Column of the column	Other Liabilities.  Complete if the organization answered "Yes"  (a) Description of liability  deral income taxes  EFERRED RENT  EFERRED TENANT IMPROVEME	on Form 990, Part IV, line	(b) Book value 66,069.	

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Schedule D (Form 990) 2018

Pai	t XI Reconciliation of Revenue per Audited Financial State	ements With	Revenue per P	Returr	١.
	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	2,966,569.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b	34,731.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	34,731.
3	Subtract line 2e from line 1			3	2,931,838.
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	4a			
b	Other (Describe in Part XIII.)	4b			
С	Add lines 4a and 4b			4c	0.
_5_	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	2,931,838.
Pa	rt XII Reconciliation of Expenses per Audited Financial Stat		Expenses per	Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line				
1	Total expenses and losses per audited financial statements			1	3,425,108.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	34,731.		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	34,731. 3,390,377.
3	Subtract line 2e from line 1			3	3,390,377.
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	4a			
b	Other (Describe in Part XIII.)	4b			_
	Add lines 4a and 4b			4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	3,390,377.
	rt XIII Supplemental Information.				
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4;			4; Part	X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any	additional inform	nation.		
D 3 1	OM V T THE O				
PAI	RT X, LINE 2:				
пот	THE VELL CHANGE CONTRACT TO 2010 MAD	T 113 C DO	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	- ш «	
F.OI	R THE YEAR ENDED SEPTEMBER 30, 2019, NEE	F HAS DO	COMENTED I	.TS	
~~1	JOIDED MICH OF THE AGE TAG TAG THE	3.7700 mii			
<u>COI</u>	NSIDERATION OF FASB ASC 740-10, INCOME T	AXES, TH	AT PROVIDE	is G	UIDANCE FOR
				3.7	0 M3MDDT3T
KE:	PORTING UNCERTAINTY IN INCOME TAXES AND	HAS DETE	RMINED THA	7.T. I/O	O MATERIAL
TT3T/	SEDENTIN MAY DOCUMENTONG OUALTEY FOR ETHILED	DECOGNIT	TION OD DI	· aat	OCUDE TAI
ONG	CERTAIN TAX POSITIONS QUALIFY FOR EITHER	RECOGNI.	LION OR DI	. SCL	OSURE IN
THI	E FINANCIAL STATEMENTS.				

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

Part

Part II

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

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

► Attach to Form 990.

Open to Public

Inspection

OMB No. 1545-0047

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

23. Schedule I (Form 990) (2018) **ջ** ∏ Employer identification number RESTORATION & RESILIANCE EVERY DAY EVENTS (NATURE RESTORATION & RESILIANCE 54-1557043 HEALTH IN THE NATURAL (h) Purpose of grant or assistance ENVIRONMENT GRANT CENTENNIAL GRANT EVERY DAY EVENTS X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any IN THE CITY) GRANT **3RANT** 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 (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) 0 0 Ö 。 。 0 (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (d) Amount of cash grant 7,700. 357 000 15,363 7,000 20,500 NATIONAL ENVIRONMENTAL EDUCATION AND Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ω ω, (c) IRC section (if applicable) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. INC. 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) Enter total number of other organizations listed in the line 1 table FOUNDATION, 36-3715155 94-2889684 38-3178841 36-3559764 66-0737571 86-0762149 General Information on Grants and Assistance (b) EIN criteria used to award the grants or assistance? FUNDACION AMIGOS DE EL YUNQUE, INC TRAINING 1 (a) Name and address of organization BRUSHWOOD CENTER AT RYERSON WOODS FRIENDS OF SLEEPING BEAR DUNES ARIZONA TRAIL ASSOCIATION 802 FERNANDEZ JUNCOS AVE FRIENDS OF CHICAGO RIVER or government 21850 N RIVERWOODS ROAD EARTH ISLAND INSTITUTE RIVERWOODS, IL 60015 Name of the organization 411 S. WELLS STREET PR 00907 CA 94704 PHOENIX, AZ 85067 CHICAGO, IL 60607 2150 ALLSTON WAY EMPIRE, MI 49630 P.O. BOX 36736

P.O. BOX 545

BERKELEY,

832101 11-02-18

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## ENVIRONMENTAL EDUCATION AND NATIONAL

FOUNDATION, TRAINING Schedule | (Form 990)

Page 1

54-1557043

RESTORATION & RESILIANCE RESTORATION & RESILIANCE RESTORATION & RESILIANCE EVERY DAY EVENTS GRANT EVERY DAY EVENTS GRANT (h) Purpose of grant or assistance EVERY DAY EVENTS EVERY DAY EVENTS SVERY DAY EVENTS OOD LEGACY GRANT GRANT GRANT GRANT (g) Description of non-cash assistance Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) (f) Method of valuation (book, FMV, appraisal, other) 0. o 0 0 Ö 0 0 • 。 (e) Amount of non-cash assistance 8,000 20,000. (d) Amount of cash grant 8,000 7,858 9,700, 10,750, 20,000 7,000 19,389, (c) IRC section if applicable 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 501(C)(3) 76-0327389 84-1153561 93-0818160 91-1091819 63-0974278 87-0786530 36-4105593 87-0690144 73-1644103 (p) EIN NEIGHBOR SPACE - 445 N SACREMENTO SOLUTIONS - 761 NEWPORT STREET -MAXWELL STREET COMMUNITY GARDEN (a) Name and address of organization or government INSTITUTE FOR ENVIRONMENTAL 1 KELLOGG BLVD E, SUITE 105 MISSISSIPPI PARK CONNECTION LAND TRUST OF NORTH ALABAMA MCKENZIE WATERSHED COUNCIL MOUNTAIN STUDIES INSTITUTE BLVD - CHICAGO, IL 60612 HERMANN PARK CONSERVANCY SPRINGFIELD, OR 97475 NORTHWEST YOUTH CORPS HUNTSVILLE, AL 35802 2621 AUGUSTA STREET 1700 HERMANN DRIVE ST. PAUL, MN 55101 HOUSTON, TX 77004 DURANGO, CT 81301 SEATTLE, WA 98109 2707 ARTIE STREET EUGENE, OR 97403 DENVER, CO 80220 679 E 2ND AVENUE P.O. BOX 19748 P.O. BOX 70166 Part II GROW

Schedule I (Form 990)

34

Page 1

54-1557043

NATIONAL ENVIRONMENTAL EDUCATION AND TRAINING FOUNDATION, INC. Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)	Assistance to Go	vernments and Orgar	izations in the Ur	nited States (Sche	dule I (Form 990), Par	t II.)	
(a) Name and address of 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
PALOS VERDES PENINSULA LAND CONSERVANCY - 916 SILVER SPUR ROAD - ROLLING HILLS, CA 90274	33-0309722	501(C)(3)	8,500.	.0			EVERY DAY EVENTS GRANT
ROCKY MOUNTAIN WILD 1536 WYNOOP STREET DENVER, CO 80202	84-1512852	501(C)(3)	7,900.	0.			EVERY DAY EVENTS GRANT
SHAWNEE RESOURCE CONSERVATION & DEVELOPMENT AREA, INC - 941 STATE HIGHWAY - GOLCONDA, IL 62938	37-1368038	501(C)(3)	17,500.	0.		-	RESTORATION & RESILIANCE GRANT
SOUTHERN APPALACHIAN WILDERNESS STEWARDS - 225 E CHESTNUT STREET - ASHEVILLE, NC 28801	47-2407669	501(C)(3)	14,276.	0		-	RESTORATION & RESILIANCE GRANT
STUDENT CONSERVATION ASSOCIATION 689 RIVER ROAD CHARLESTOWN, NH 03603	91-0080684	501(C)(3)	20,000.	0			RESTORATION & RESILIANCE GRANT
TEXAS MILITARY DEPARTMENT 220 W 35TH STREET AUSTIN, TX 78703	74-6000053	GOVERNMENT	19,000.	0.			DOD LEGACY GRANT
THE BOLSA CHICA CONSERVANCY 3842 WARNER AVE HUNTINGTON BEACH, CA 92649	33-0392527	501(C)(3)	7,000.	0.			EVERY DAY EVENTS GRANT
TIMUCUAN TRAIL PARKS FOUNDATION 9953 HECKSCHER DRIVE JACKSONVILLE, FL 32226	59-3614354	501(C)(3)	. 22, 230.	0.			RESTORATION & RESILIANCE GRANT
							Schedule I (Form 990)

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# NATIONAL ENVIRONMENTAL EDUCATION AND

TRAINING FOUNDATION, INC.

Schedule | (Form 990) (2018)

Page 2

54-1557043

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Part III

Schedule I (Form 990) (2018) (f) Description of noncash assistance (e) Method of valuation (book, FMV, appraisal, other) CREATED WITH THE SAME TEMPLATE. PARTICULAR ATTENTION IS PAID TO ELIGIBILITY OF THE GRANTS, THE EXPECTED OUTCOMES AND TIMELINE, SUBMISSION INFORMATION EACH GRANT GOES THROUGH A CENTRALIZED PROCESS WITH EACH APPLICATION BEING FOUNDATION USES TO SCORE APPLICANTS INCLUDE: THE PURPOSE AND RESTRICTIONS DETERMINATION LETTER. APPLICATIONS ARE CHECKED IN AGAINST THE ELIGIBILITY Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. REQUIREMENTS AND REQUESTED DOCUMENTS. COMPLETE APPLICATIONS ARE USUALLY 882102 11-02-18 AND ANY REQUIRED DOCUMENTS, SUCH AS AN AUDIT OR AN IRS REQUIREMENTS AND THE CRITERIA FOR GRANT SELECTION. THE FACTORS THE (d) Amount of non-cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance PART I, LINE APPLICATION, Part IV

Part IV   Supplemental Information
SCORED BY EXTERNAL JUDGES. SCORES PROVIDE THE FOUNDATION WITH 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 AGREEMENT TO BE
SIGNED. ALL GRANTEES ARE REQUIRED TO SUBMIT A FINAL REPORT (INCLUDING
FINANCIALS). DEPENDING ON THE GRANT, THEY MAY ALSO BE REQUIRED 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

OMB No. 1545-0047

Inspection

Internal Revenue Service Name of the organization

**Questions Regarding Compensation** 

Department of the Treasury

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

Employer identification number 54-1557043

			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 filing organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant  X Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
	Delice the constitution of			
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:	4 -		Х
a	Receive a severance payment or change-of-control payment?	4a		X
D	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		
	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		Х
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		Х
b	Any related organization?	6b		X
	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		Х
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		

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

Schedule J (Form 990) 2018

# NATIONAL ENVIRONMENTAL EDUCATION AND

TRAINING FOUNDATION, INC.

54-1557043

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Schedule J (Form 990) 2018

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.

Page 2

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.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base	(ii) Bonus & incentive	(iii) Other	other deferred compensation		(B)(i)-(D)	in column (B) reported as deferred
			compensation	compensation				on prior Form 990
(1) MERI-MARGARET DEOUDES	(i)	266,556.	0	0	11,250.	17,363.	295,16	0
PRESIDENT/CEO/ BOARD SECRETARY	(ii)		0	• 0	• 0	0		0
(2) NANCY SMITH	(i)	140,884.	0 •	• 0	6,608	14,104.	161,596.	0
VP OF FINANCE & ADMINISTRATION	€		0	• 0	0	0		0
(3) SARA ESPINOZA	(i)	145,917	0	• 0	6,547.	4,836.	157,30	0
VP, PROGRAMS	(ii)	• 0	0	• 0	0	0	0	0
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	Ξ							
	(ii)							
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	(ii)							
	Ξ							
	(ii)							
	Θ							
	(ii)							
	(i)							
	(ii)							
	Ξ							
	<u>(ii)</u>							
	Ξ							
	<u>(ii)</u>							

Schedule J (Form 990) 2018

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# NATIONAL ENVIRONMENTAL EDUCATION AND

TRAINING FOUNDATION, INC.

Page 3 Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. 54-1557043 Part III Supplemental Information Schedule J (Form 990) 2018

Schedule J (Form 990) 2018	

### SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

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, DESCRIPTION OF ORGANIZATION MISSION:
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. THROUGH K-12 EDUCATION, HEALTH AND WELLNESS, 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 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

CLASSROOM, AND ALLOWS THEM TO INTERACT WITH NATURE ENTHUSIASTS,

METEOROLOGISTS, FEDERAL PARTNERS, AND 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. NEEF HAS EMPLOYED SOCIAL
MEDIA AND SMS ENGAGEMENT CAMPAIGNS TO REACH PEOPLE THROUGH MAJOR
AFFINITY GROUPS, SUCH AS SPORTS LEAGUES, AQUARIUMS, AND MUSEUMS TO
PROMPT FANS AND VISITORS TO TAKE ENVIRONMENTAL ACTION AT HOME. THIS
INCLUDES CONTINUING THE WORK WITH THE NBA, NHL, AND PURSUING NEW

OPPORTUNITIES WITH AQUARIA AND MUSEUMS.

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

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

Schedule O (Form 990 or 990-EZ) (2018) Page 2 Name of the organization NATIONAL ENVIRONMENTAL EDUCATION AND **Employer** identification number TRAINING FOUNDATION, INC. 54-1557043 EXPENSES \$ 229,191. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. PUBLIC OUTREACH: PUBLIC OUTREACH WORKS TO LEARN ABOUT AND MARKET TO NEEF'S AUDIENCES. FOR EXAMPLE, THE BENCHMARK SURVEY WAS DESIGNED TO HELP GUIDE THE CREATION AND ASSESSMENT OF EFFECTIVE ENVIRONMENTAL EDUCATION PROGRAMS TO REFLECT AN UNDERSTANDING OF DIFFERENT SEGMENTS OF THE POPULATION BASED ON CURRENT LEVELS OF ENVIRONMENTAL KNOWLEDGE AND BEHAVIOR. THE SURVEY INITIALLY RAN IN 2013, AND IN FY 18, NEEF RE-RAN THE SURVEY TO ASSESS IF THE PRIORITIES, VALUES, AND BEHAVIORS HAD CHANGED IN THE LAST FIVE YEARS. NEEF DISSEMINATES PRACTICAL AND INFORMATIVE INFORMATION THROUGH ITS MONTHLY NEWSLETTER, THE NEEF CONNECT. EXPENSES \$ 343,257. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. 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

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.

**Employer identification number** 54-1557043

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 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 SEPTEMBER 2019.

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

NATIONAL ENVIRONMENTAL EDUCATION AND TRAINING FOUNDATION, INC.  Employer identification number 54-1557043  FOUNDATION ARE AVAILABLE ONLINE AND THE CONFLICT OF INTEREST POLICY IS AVAILABLE UPON REQUEST.	Schedule O (Form 990 or 99	90-EZ) (2018)								Page 2
	Name of the organization					ON AND		Emp	loyer identific 54-1557(	ation number ) 4 3
AVAILABLE UPON REQUEST.	FOUNDATION ARE	AVAILABL	E ONLINE	AND T	HE CONF	LICT OF	' INTER	EST	POLICY	IS
	AVAILABLE UPON	REQUEST.								
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