Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

2008

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements.

Open to Public Inspection

	For the	2008 calendar	r year, c	r tax year b	eginning		,	2008,	and endin	g	=		,		
В	Check if a	applicable:		C Name of c	rganization						D Employ	er Ide	ntificat	ion Number	
	Addr	ress change	lease use RS label	ENVIRON	MENTAL ST	rewari	OSHIP				14-2	200	328	0	
	Nam	ne change	or print or type.		nd street (or P.O. bo			street a	ddr) Room/s	uite	E Telepho	ne nu	ımber		
	Initia	al return	See specific	ро вох	1423						(512	2)	300	-6609	
	=		Instruc- tions.		or country			State	ZIP code + 4		, -	•			
		ended return		BASTROE	>			ТX	78602		G Gross	recein	ts.\$	81,889) .
	=		Name a	and address of p						H(a) Is this	a group retur				-
		. 1	TEPHEN	IW BOX PO	BOX 1423	BA	STROP	ΤУ	78602		l affiliates incl			Yes	_
ī	Tax-e	exempt status) ◀ (insert no		4947(a)(1)		527	If 'No,	' attach a list.	(see	instruc	tions) —	
J		site: ► N/A	11 00.	(0) (0) (,	15 17 (4)(1)	<u>.</u>	-	H(c) Group	exemption nu	umher	•		
K			Corpora	ation Trus	t Association	n Oth	er ►	L	Year of Format					domicile: TX	ζ
Pa		Summary					-				, , , , , ,				-
				janization's i	mission or mos	t signific	ant activities:	EN	VIRONM	ENTAL	EDUCAT	rio	N &	PROTEC	CTION
Φ		-					PRESERVE								
Governance	_					T	HROUGH E	DUC	ATION A	ND QU	TREACH	<u>_ </u>	TI	IE COMM	UNITY
Ë															
δ					zation discontii							1			
જ					governing body							3			
es					nbers of the go							<u>4</u> 5	0		
Activities &				•	/, line 2a) Ite if necessary							6	30	n	
Act					enue from Part							7	_	<u> </u>	
		-			ome from Form							7			
											Prior Year			Current Y	ear
	8 C	Contributions ar	nd gran	ts (Part VIII.	line 1h)						33,2	3.0	_		, 771.
Revenue		Program service revenue (Part VIII, line 2g)										-			,
Ve		Investment income (Part VIII, column (A), lines 3, 4, and 7d)								-	2	32			92.
ď	11 C										2,8	44	•		26.
	12 T	, , , , , , , , , , , , , , , , , , ,									36,3	06	•	81	,889.
	13 G														
	14 B	Benefits paid to	or for i	members (P	art IX, column	(A), line	4)								
Ø	15 S	Salaries, other	comper	nsation, emp	loyee benefits	(Part IX,	column (A),	lines!	5-10)			0	•		
nse	16a ₽	Professional fur	ndraisin	g fees (Part	IX, column (A)	, line 11	e)			-					
Expenses	b⊺	otal fundraisin	g exper	nses (Part IX	(, column (D), I	ine 25) •	•								
ш					A), lines 11a-11						9,0	96		57	, 717.
		•	•	•	nust equal Part		•				9,0				,717.
					ine 18 from line					_	27,2				,172.
es es											nning of Y			End of Y	
ets	20 T	otal assets (Pa	art X lir	ne 16)							27,2				,289.
Ass 1 Ba	21 T	•		•							2172	10	•		7203.
Net Assets or Fund Balances	22 N		•	•	act line 21 from						27,2	1 0		a	,289.
	rt II	Signature			act line 21 from	1 11116 20				•	21,2	. 1 0	•		,200.
					have examined this	return, inc	luding accompany	vina sch	edules and sta	atements, ar	nd to the best	of my	knowl	edge and belie	ef. it is
		true, correct, and	completé	. Declaration of	have examined this preparer (other than	n officer) is	based on all info	ormation	of which prep	arer has'an	y knowledge.			9	.,
Sig	jn 💮	>													
He	re	Signature of	officer							Da	ate				
		► STEPHE	EN W	BOX											
		Type or print	name an	d title.											_
_								[Date		Check if		Prepar (see in	er's identifying structions)	number
Pai		Preparer's								е	mployed ►	Х			
Pre	e- rer's	signature	<u> </u>					(05/28/0	9					
Us		Firm's name (or	Arm	strong	& Fuller,	CPA									
On		yours if self- employed),	► P.O	. Box 3	97					E	EIN ►				
		address, and ZIP + 4	Bas	trop			TX	7860	2	F	Phone no.			_	
May	the IR	S discuss this	return v	with the prep	arer shown ab	ove? (se	e instructions	s)					. 5	Yes	No

95, 298. (Must equal Part IX, Line 25, column (B).)

) (Revenue \$

including grants of

(Expenses

\$

4e 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)? If 'Yes,' complete Schedule A.	1	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II.	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If 'Yes,' complete Schedule D, Part IV</i>	9		Х
10	Did the organization hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If 'Yes,' complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable	11		Х
12	Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14	a Did the organization maintain an office, employees, or agents outside of the U.S.?	14a		Х
ı	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If 'Yes,' complete Schedule F, Part I	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If 'Yes,' complete Schedule F, Part II</i>	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16		Х
	Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If 'Yes,' complete Schedule G, Part I	17		Х
	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	Х	37
	Did the organization report more than \$15,000 on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19 20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		X
	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		X
	Did the organization answer 'Yes' to Part VII, Section A, questions 3, 4, or 5? If 'Yes,' complete Schedule J	23		х
24 8	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer questions 24b-24d and complete Schedule K. If 'No, 'go to question 25	24a		х
ŀ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
C	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		х
ı	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If 'Yes,' complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? 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, or substantial contributor, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		Х

Page 4

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee:			
	a Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively			
	with other person(s) listed in Part VII, Section A)? If 'Yes,' complete Schedule L, Part IV	28a		Х
	b Have a family member who had a direct or indirect business relationship with the organization? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b		Х
	c Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 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		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? 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, Parts II, III, IV, and V, line 1	34		Х
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35		Х
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		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		Х

BAA Form **990** (2008) Form 990 (2008) ENVIRONMENTAL STEWARDSHIP
Part V | Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No					
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable 1a								
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable								
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming								
(gambling) winnings to prize winners?	1c	Х						
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a								
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b							
Note. If the sum of lines 1a and 2a is greater than 250, you be required to e-file this return. (see instructions)								
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Х					
b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No,' provide an explanation in Schedule O</i>	3b							
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?								
b If 'Yes,' enter the name of the foreign country: ▶								
See the instructions for exceptions and filing requirements for Form TD F 90-22.1 , Report of Foreign Bank and Financial Accounts.								
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		Х					
c If 'Yes,' to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5с							
6a Did the organization solicit any contributions that were not tax deductible?	6a		Х					
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6b							
7 Organizations that may receive deductible contributions under section 170(c).	0.0							
a Did the organization provide goods or services in exchange for any guid pro guo contribution of more than \$75?	7a		х					
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b							
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		х					
d If 'Yes,' indicate the number of Forms 8282 filed during the year								
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х					
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х					
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g							
h For all contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h							
8 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		х					
9 Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.	8		^					
a Did the organization make any taxable distributions under section 4966?	9a		Х					
b Did the organization make any distribution to a donor, donor advisor, or related person?	9b		X					
10 Section 501(c)(7) organizations. Enter:								
a Initiation fees and capital contributions included on Part VIII, line 12								
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
11 Section 501(c)(12) organizations. Enter:								
a Gross income from other members or shareholders								
b Gross income from other sources (Do not net amounts due or paid to other sources against 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							
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b								
	_	000	(00000					

Part VI Governance, Management and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)

Se	ction A.	Governing Body and Management				
	For each	'Yes' response to lines 2-7b below, and for a 'No' response to lines 8 or 9b below, de	escribe the circumstances,		Yes	No
1	•	s, or changes in Schedule O. See instructions. number of voting members of the governing body	1a 4			
		number of voting members that are independent	1b 0			
			- 1 -			
2	officer, d	fficer, director, trustee, or key employee have a family relationship or a business rela rector, trustee or key employee?	tionship with any other	2		Х
3	Did the o	rganization delegate control over management duties customarily performed by or uno s, directors or trustees, or key employees to a management company or other person	der the direct supervision	3		
Δ		rganization make any significant changes to its organizational documents		4		X
		prior Form 990 was filed?				
5		rganization become aware during the year of a material diversion of the organization's	s assets?	5		Х
6		organization have members or stockholders?	•	6		X
7		organization have members, stockholders, or other persons who may elect one or mo	•			
•	governing	g body?	·····	7a		X
	b Are any o	decisions of the governing body subject to approval by members, stockholders, or other	er persons?	7b		Х
8	Did the o	rganization contemporaneously document the meetings held or written actions undertaing:	aken during the year by			
	a The gove	rning body?		8a	Х	
	b Each con	nmittee with authority to act on behalf of the governing body?		8b	Х	
9	a Does the	organization have local chapters, branches, or affiliates?		9a		Х
	b If 'Yes,' o	oes the organization have written policies and procedures governing the activities of sches to ensure their operations are consistent with those of the organization?	such chapters, affiliates,	9b		
10	Was a co	py of the Form 990 provided to the organization's governing body before it was filed? in Schedule O the process, if any, the organization uses to review the Form 990	All organizations must	10	х	
11	Is there a	iny officer, director or trustee, or key employee listed in Part VII, Section A, who cann	not be reached at the		-21	
Se	organizat	ion's mailing address? If 'Yes,' provide the names and addresses in Schedule O Policies		11		Х
<u> </u>						
					Yes	No
12		organization have a written conflict of interest policy? If 'No.' go to line 13		12a	Yes	No
	a Does the	organization have a written conflict of interest policy? If 'No,' go to line 13	•	12a	Yes X	No
	a Does the	organization have a written conflict of interest policy? If 'No,' go to line 13ers, directors or trustees, and key employees required to disclose annually interests thes?	•	12a 12b	Х	No
	a Does theb Are office to conflicc Does the	ers, directors or trustees, and key employees required to disclose annually interests the tas? organization regularly and consistently monitor and enforce compliance with the police	nat could give rise		Х	No
	a Does theb Are office to conflicc Does the Schedule	ers, directors or trustees, and key employees required to disclose annually interests the	nat could give risey? If 'Yes,' describe in	12b	x	No
13	a Does theb Are office to conflicc Does the ScheduleDoes the	ers, directors or trustees, and key employees required to disclose annually interests the ts? organization regularly and consistently monitor and enforce compliance with the policing of how this is done.	nat could give rise ry? If 'Yes,' describe in	12b 12c	X X X	No
13 14	a Does the b Are office to conflic c Does the Schedule Does the Does the	ers, directors or trustees, and key employees required to disclose annually interests the second organization regularly and consistently monitor and enforce compliance with the policy of the constant of the policy organization have a written whistleblower policy?	nat could give rise ry? If 'Yes,' describe in	12b 12c 13	X X X	
13 14	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons,	ers, directors or trustees, and key employees required to disclose annually interests the sers, directors or trustees, and key employees required to disclose annually interests the sers, directors or regularly and consistently monitor and enforce compliance with the policy or organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review and appropriate to the policy of the deliberation and decisions and decisions.	nat could give rise by? If 'Yes,' describe in pproval by independent sion:	12b 12c 13 14	X X X	
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13 14 15	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The orga b Other offi	ers, directors or trustees, and key employees required to disclose annually interests the tes? organization regularly and consistently monitor and enforce compliance with the police of how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review and approximately data, and contemporaneous substantiation of the deliberation and decisionization's CEO, Executive Director, or top management official? cers of key employees of the organization?	nat could give rise by? If 'Yes,' describe in pproval by independent proval by independent	12b 12c 13 14	X X X	
13 14 15	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The orga b Other offi Describe a Did the o	ers, directors or trustees, and key employees required to disclose annually interests the ts? organization regularly and consistently monitor and enforce compliance with the police of how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? rocess for determining compensation of the following persons include a review and approximately data, and contemporaneous substantiation of the deliberation and decision in the process of the organization? cers of key employees of the organization? the process in Schedule O. (see instructions) reganization invest in, contribute assets to, or participate in a joint venture or similar architecture.	nat could give rise ry? If 'Yes,' describe in pproval by independent sion:	12b 12c 13 14 15a 15b	X X X X	X
13 14 15	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The orga b Other off Describe a Did the o entity dur b If 'Yes,' I' in joint vis	organization regularly and consistently monitor and enforce compliance with the police of how this is done organization have a written whistleblower policy? organization have a written document retention and destruction policy? organization have a written document retention and destruction policy? organization have a written document retention and destruction policy? organization data, and contemporaneous substantiation of the deliberation and decision in the deliberation and decision in the policy of the organization? organization invest in, contribute assets to, or participate in a joint venture or similar aring the year? as the organization adopted a written policy or procedure requiring the organization to the tenture arrangements under applicable federal tax law, and taken steps to safeguard the	part could give rise by? If 'Yes,' describe in proval by independent sion: crangement with a taxable by evaluate its participation are organization's exempt	12b 12c 13 14	X X X X	
13 14 15	a Does the b Are office to conflic c Does the Schedule Does the Does the Did the p persons, a The orga b Other off Describe a Did the o entity dur b If 'Yes,' I' in joint ve status wir	ers, directors or trustees, and key employees required to disclose annually interests the test organization regularly and consistently monitor and enforce compliance with the police of the holice organization have a written whistleblower policy? To comparization have a written document retention and destruction policy? To comparization have a written document retention and destruction policy? To comparization destruction policy? To comparization of the following persons include a review and approximately data, and contemporaneous substantiation of the deliberation and decision in the process of the organization? To comparization of the following persons include a review and approximately data, and contemporaneous substantiation of the deliberation and decision in the process of the organization? To comparization of the following persons include a review and approximately data, and contemporaneous substantiation of the deliberation and decision in the process of the organization? To comparize the process in Schedule O. (see instructions) To proceed the organization adopted a written policy or procedure requiring the organization to the process of the organization adopted a written policy or procedure requiring the organization to the process of the organization adopted a written policy or procedure requiring the organization to the process of the organization adopted a written policy or procedure requiring the organization to the process of the organization adopted a written policy or procedure requiring the organization to the process of the organization and the process of the organization to the process of the organization and the process of the organization to the process of the organization and the process of the organization to the process of the organization and the process of the organization to the process of the organization and the process of the organization and the process of the organization and the process of the organiza	part could give rise by? If 'Yes,' describe in proval by independent sion: crangement with a taxable by evaluate its participation are organization's exempt	12b 12c 13 14 15a 15b	X X X X	X
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Form **990** (2008) Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- 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) or 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 \$100,000 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.

Check this box if the organization did not compensate any officer, director, trustee, or key employee. (A) (B) (D) (E) (F) (c) Average Position (check all that apply) Reportable compensation from related organizations (W-2/1099-MISC) Reportable compensation from the organization (W-2/1099-MISC) Name and Title Estimated hours per week amount of other Officer andividual anstitutional trustee Ę compensation from the organization and related employee key amployee director est согпрызатес organizations Hrustee STEPHEN W. BOX 35.00 0 Х 0 0. PRESIDENT MELANIE P PHILLIPS **SECRETARY** 10.00 Х Х 0. 0 0. DENISE RODGERS TREASURER 20.00 X 0. 0 0. MICHAEL WUNDERLIN DIRECTOR 5.00 0. 0 0. Х

Name and Title Columbic Product Produc	Part VII Section A. Officers, Directors, Trust	ees, K	ey I	Ξmμ	plo	yee	es, a	and	Highest Com	pensated Emp	loyees	(cont.)
Total number of independent contractors (including those in 1) who received more than \$100,000 in comparisation from the organization for the organization for a flat of organization and related organizations greater than \$150,000 if 1 free completes Schedule J for such individuals.	(A)								(D)	(E)		(F)
19 Total	Name and Title						-	_	Reportable compensation from	Reportable compensation from		
1 b Total		per week	ndivi or dir	nstitu	Office		-figh∈ empli	-orm	the organization	related organizations (W-2/1099-MISC)	con	npensation
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Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► Yes No												
organization organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual isted on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual isted on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person	1 b Total								0.	0 .		0.
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual 4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person 5 X Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) Name and business address N/A N/A N/A N/A TX 0 N/A TX 0 N/A TX 0 N/A TX TX 0 TX TOTAL number of independent contractors (including those in 1) who received more than \$100,000 in		ho rece	ived	mor	e th	an S	\$100	0,000	0 in reportable cor	mpensation from th	ne	
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual	organization •											
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the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual. 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person 5 X Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	4 For any individual listed on line 1a, is the sum of reg	ortable	com	pens	satio	on a	nd o	othe	r compensation from	om		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If 'Yes,' complete Schedule J for such person Section B. Independent Contractors 1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) Name and business address Description of Services N/A N/A N/A N/A N/A N/A N/A N/A N/A N/	the organization and related organizations greater th	nan \$150	0,000)? If	'Ye	s' c	omp	lete	Schedule J for su	ıch	. 4	x
rendered to the organization? If 'Yes,' complete Schedule J for such person												
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. (A) Name and business address N/A N/A N/A N/A N/A N/A TX 0 N/A TX 0 N/A 2 Total number of independent contractors (including those in 1) who received more than \$100,000 in	rendered to the organization? If 'Yes,' complete Sch	edule J	for s	uch	per	son			·····		5	Х
Compensation from the organization. (A) Name and business address N/A		محامضت امح			4			الم ما ا	waaaii waal waa wa Alaa	- ¢100 000 -f		
Name and business address N/A N/A N/A N/A N/A N/A TX O N/A TX O N/A TX O N/A TX O N/A TX O N/A	compensation from the organization.	ей тиер	enae	enit C	OHL	raci	ors	ınaı	received more tha	311 \$100,000 01		
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		those in	1) w	ho r	ece	ivec	l mo	re th	nan \$100,000 in			

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	rt VIII Statement of Revenue				
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512, 513, or 514
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	1a Federated campaigns 1a b Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e 33,595 f All other contributions, gifts, grants, and similar amounts not included above 1f g Noncash contribns included in Ins 1a-1f: \$ h Total. Add lines 1a-1f	81,771.			
PROGRAM SERVICE REVENUE					
	3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt bond proceeds. 5 Royalties (i) Real (ii) Personal 6a Gross Rents b Less: rental expenses. c Rental income or (loss) d Net rental income or (loss) 7a Gross amount from sales of assets other than inventory	92.	92.		
OTHER REVENUE	b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including . \$ 40,291. of contributions reported on line 1c). See Part IV, line 18				
	9a Gross income from gaming activities. See Part IV, line 19				
	b c d All other revenue e Total. Add lines 11a-11d 12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e	26. 26. 81,889.	26.		

Page 10

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) but are not required to complete columns (B), (C), and (D).

	All other organizations must comp		(B)	(C)	(D)
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
	Management				_
) Legal				
	Accounting				
	Lobbying				
	Prof fundraising svcs. See Part IV, In 17				
	Investment management fees				
	j Other				
12	Advertising and promotion				
13	Office expenses	1 980	1,584.	396.	
14	Information technology	1,300.	1,504.	330.	
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	951.	951.		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				
24	Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
	MISCELLANEOUS	824.		824.	
	CONTRACT EXPENSES	13.	13.		
	MEMBERSHIP DUES	180.	144.	36.	
	PROMOTION & ENTERTAINMENT	58.		58.	
	All other expenses	53,711.	53,690.	21.	
	Total functional expenses. Add lines 1 through 24f	57,717.	56,382.	1,335.	
26	SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
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Part X Balance Sheet (A) Beginning of year End of year 27,060. 1 8,814. 2 Savings and temporary cash investments 2 3 3 Pledges and grants receivable, net Accounts receivable, net 150. 4 475. Receivables from current and former officers, directors, trustees, key employees, or other related parties. Complete Part II of Schedule L..... 5 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L ... 6 Notes and loans receivable, net 7 8 Inventories for sale or use Prepaid expenses and deferred charges q 10a Land, buildings, and equipment: cost basis 10a **b** Less: accumulated depreciation. Complete Part VI of 10 c 11 Investments — publicly-traded securities 11 12 12 13 Investments – program-related. See Part IV, line 11 13 14 14 Intangible assets 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 27,210. 16 9,289 17 Accounts payable and accrued expenses 17 18 18 19 19 20 20 Tax-exempt bond liabilities 21 21 Payables to current and former officers, directors, trustees, key employees, 22 highest compensated employees, and disqualified persons. Complete Part II 22 Secured mortgages and notes payable to unrelated third parties 23 24 24 Unsecured notes and loans payable Other liabilities, Complete Part X of Schedule D 25 Total liabilities. Add lines 17 through 25. 0. 26 0. Organizations that follow SFAS 117, check here ► X and complete lines 27 through 29 and lines 33 and 34. 9,289. 27 27 27,210. 28 28 Temporarily restricted net assets Permanently restricted net assets 29 Q R Organizations that do not follow SFAS 117, check here ▶ and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, and equipment fund 32 Retained earnings, endowment, accumulated income, or other funds 32 9,289. 33 Total net assets or fund balances. 27,210. 33 27,210. 9,289. **Financial Statements and Reporting** Yes No X Accrual **1** Accounting method used to prepare the Form 990: Cash 2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a Х 2b Х c If 'Yes' to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, 2c review, or compilation of its financial statements and selection of an independent accountant? 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? Х 3a **b** If 'Yes,' did the organization undergo the required audit or audits? 3b

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support To be completed by all section 501 (c)(3) organizations and section 4947(a)(1)

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

nonexempt charitable trusts. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

ENVIRONMENTAL STEWARDSHIP 14-2003280 Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization.) A church, convention of churches or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section** 5 **170(b)(1)(A)(iv).** (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 9 June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that 11 describes the type of supporting organization and complete lines 11e through 11h. Type I Type II Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box ... Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? 11 g (i) a family member of a person described in (i) above? 11 g (ii) a 35% controlled entity of a person described in (i) or (ii) above? 11 g (iii) Provide the following information about the organizations the organization supports h (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) (ii) EIN (v) Did you notify the organization in col. (i) of (i) Name of Supported Organization (vi) Is the organization in col. (i) organized in the U.S.? (iv) Is the (vii) Amount of Support rganization in col your support? governing document? Yes No Yes Yes Total

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.) Section A. Public Support Calendar year (or fiscal year (a) 2004 (b) 2005 (c) 2006 (d) 2007 (e) 2008 (f) Total beginning in) Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')... 81<u>,</u>771 33,230. 115,001. Tax revenues levied for the organization's benefit and either paid to it or expended The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge Total. Add lines 1-3 33,230. 81,771. 115,001. 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) ... 0. Public support. Subtract line 5 115,001. from line 4 Section B. Total Support Calendar year (or fiscal year (a) 2004 (b) 2005 (c) 2006(d) 2007 (e) 2008 (f) Total beginning in) **7** Amounts from line 4 33,230 81,771 115,001. Gross income from interest. dividends, payments received on securities loans, rents. royalties and income form 232 similar sources 92 324. Net income form unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss form the sale of capital assets (Explain in Part IV.) 2,844 26 2,870. Total support. Add lines 7 118,195. through 10 12 118,195. 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 ► X Section C. Computation of Public Support Percentage % 14 15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f 15 % 16a 33-1/3 support test - 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization. b 33-1/3 support test - 2007. 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 - 2008. 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 IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. 18 Private foundation. If the organization did not check a box on line, 13, 16a, 16b, 17a, or 17b, check this box and see instructions

Schedule A (Form 990 or 990-EZ) 2008 ENVIRONMENTAL STEWARDSHIP Part III Support Schedule for Organizations Described in Section 509(a)(2)

	(Complete only if you chec	ked the box on II	ne 9 of Part I.)				
Sec	tion A. Public Support						
Cale	ndar year (or fiscal yr beginning in)►	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions and membership fees received. (Do not include 'unusual grants.')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
7 a	Total. Add lines 1-5						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c	Add lines 7a and 7b						
8	Public support (Subtract line						
	7c from line 6.)						
Sec	tion B. Total Support						
Cala							
vale	ndar year (or fiscal yr beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
		(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10 a	Amounts from line 6	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10 a b	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b,	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 10 a b c 11	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 is	s for the organiza	tion's first, second	I, third, fourth, o	r fifth tax year as	a section 501(c)(3)	
9 10 a b c 11 12	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and	s for the organiza	tion's first, second	I, third, fourth, o	r fifth tax year as	a section 501(c)(3)	
9 10 a b c 11 12 13 14 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and stone conservations.	s for the organizastop here	tion's first, second	I, third, fourth, o	r fifth tax year as	a section 501(c)(3)	
9 10 a b c 11 12 13 14 Sec 15	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and tion C. Computation of Pub Public support percentage for 200	s for the organiza stop here lic Support P 18 (line 8, column	tion's first, second	I, third, fourth, o	r fifth tax year as	a section 501(c)(3)	
9 10 a b c 11 12 13 14 Sec 15 16	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and stion C. Computation of Pub Public support percentage from 200	s for the organiza stop here lic Support P 08 (line 8, column 007 Schedule A,	ercentage n (f) divided by line Part IV-A, line 27	I, third, fourth, o	r fifth tax year as	a section 501(c)(3)	
9 10 a b c 11 12 13 14 Sec 15 16 Sec	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and tion C. Computation of Pub Public support percentage for 200 Public support percentage from 2	s for the organiza stop here lic Support P 18 (line 8, columr 007 Schedule A,	ercentage n (f) divided by line Part IV-A, line 27 ne Percentage	I, third, fourth, o	r fifth tax year as	a section 501(c)(3)	
9 10 a b c 11 12 13 14 Sec 15 16 Sec 17	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and tion C. Computation of Pub Public support percentage from 2 tion D. Computation of Investment income percentage for	s for the organizastop here lic Support P 8 (line 8, column 007 Schedule A, estment Incon r 2008 (line 10c,	ercentage n (f) divided by line Part IV-A, line 27 ne Percentage column (f) divided	t, third, fourth, o	r fifth tax year as	a section 501(c)(3)	► [
9 10 a b c 11 12 13 14 Sec 15 16 Sec 17 18	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and stion C. Computation of Pub Public support percentage for 200 Public support percentage from 2 tion D. Computation of Invetion D. Computation of Invetion San Support tests — 2008. If the	s for the organizastop here lic Support P 8 (line 8, column 007 Schedule A, estment Incon r 2008 (line 10c, om 2007 Schedule e organization did	ercentage n (f) divided by line Part IV-A, line 27 ne Percentage column (f) divided e A, Part IV-A, lin d not check the bo	by line 13, colume 27h	r fifth tax year as	a section 501(c)(3) 15 16 17 18 nan 33-1/3%, and li	
9 10 a b c 11 12 13 14 Sec 15 16 Sec 17 18 19 a	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12.) First five years. If the Form 990 is organization, check this box and tion C. Computation of Pub Public support percentage from 2 tion D. Computation of Investment income percentage for Investment income percentage for	s for the organizastop here lic Support P 8 (line 8, column 007 Schedule A, estment Incon or 2008 (line 10c, om 2007 Schedule e organization did ox and stop here.	ercentage n (f) divided by line Part IV-A, line 27 ne Percentage column (f) divided e A, Part IV-A, lin d not check the bo The organization	by line 13, colume 27h	r fifth tax year as	a section 501(c)(3) 15 16 17 18 nan 33-1/3%, and liganization	

						STEWARDS		14-200328	
Part IV	Supple Part II,	e mental line 17a	Informat a or 17b;	ion. Comple or Part III,	te this pline 12.	part to provi Provide an	de the y other	explanation required by Part II, additional information. (see ins	line 10; tructions)
<u>Other</u>	Income	<u>Part</u>	II <u>,</u> Li	ne_10					
Descri	ption:	MAP_S	ALES_						
2007:	218								
2008:	26								
Descri	<u>ption:</u>	SPECI	AL_EVE	<u>NTS</u>					
2007:	2626.								

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047 2008

Department of the Treasury Internal Revenue Service

► Must be completed by organizations that answer 'Yes' to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Open to Public Inspection

Name of the organization						Employer identifica	tion number				
ENVIRONMENTAL STEWARDSHI	P			14-2003280							
Part I Fundraising Activities.		he organ	nization	answered 'Yes' to F	orm 9	90, Part IV,	line 17.				
1 Indicate whether the organization ra	aised funds thro	ough any o	of the follo	wing activities. Check a	II that a	oply.					
Mail solicitations				Solicitation of non-g	governm	ent grants					
Email solicitations				Solicitation of gover	•	•					
Phone solicitations				Special fundraising		9					
In-person solicitations				opecial fariataising	CVCIIIS						
<u> </u>											
2a Did the organization have written or employees listed in Form 990, Part	r oral agreemer	nt with any	individua	I (including officers, dire	ectors, t	rustees or key	Yes No				
				-							
b If 'Yes,' list the ten highest paid incompensated at least \$5,000 by the	lividuals or enti e organization	ities (fundr Form 9901	aisers) pu =7 filers a	rsuant to agreements un	nder wh	ich the fundrais table	er is to be				
compensated at least \$5,000 by the	organization.	1 01111 3301	IIICI 3 U	Te flot required to compl		nount paid to					
(i) Name of individual	(ii) Activity	(iii) Did	fundraiser	(iv) Gross receipts	(v) Ai	retained by)	(vi) Amount paid to				
or entity (fundraiser)	, ,	have custoo	ly or control	from activity	fundr	aiser listed in	(or retained by)				
			butions?			col.(i)	organization				
		Yes	No								
T-1-1											
Total							<u> </u>				
3 List all states in which the organiza	tion is registere	ed or licen	sed to soli	cit funds or has been no	otified it	is exempt from	registration				
or licensing.											

ı uı		reported more than \$15,000 on Fo	orm 990-EZ, line 6	a. List events with	gross receipts grea	ter than	\$5,00	0.
			(a) Event #1 NATUREFEST2008	(b) Event #2	(c) Other Events	(Add col	tal Ever . (a) thr	
Ŗ			(event type)	(event type)	(total number)		. ,,	
KE>EZOE	1	Gross receipts	39,241.				39,2	41.
Ē	2	Less: Charitable contributions						
	3	Gross revenue (line 1 minus line 2)	39,241.				39,2	41.
D	4	Cash prizes						
D I R E C T	5	Non-cash prizes						
	6	Rent/facility costs						
EXPENSES	7	Other direct expenses	38,185.				38,1	85.
E S	8						38,1	
_	9	Net income summary. Combine lines 3 and	nd 8 in column (d)		▶		1,0)56.
Par	t III	Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a.	tion answered 'Yes	s' to Form 990, Par	t IV, line 19, or rep	orted m	ore tha	ın
REVENUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(Add col	al gami . (a) thr	ng ough
Ē	1	Gross revenue						
		Cash prizes						
D I RECT	3	Non-cash prizes						
C S T E S	4	Rent/facility costs						
	5	Other direct expenses						
	6	Volunteer labor	Yes%	Yes%	Yes%			
	7	Direct expense summary. Add lines 2 thro	ough 5 in column (d)					
	8	Net gaming income summary. Combine lin	nes 1 and 7 in column ((q)	•			
		The garming mooning cummany.		(4)		I	YES	NO
		er the state(s) in which the organization ope						
		ne organization licensed to operate gaming	activities in each of the	ese states?		9	а	
) IT TI	lo,' Explain: 						
10 -		re any of the organization's gaming licenses				10	2	
		e any or the organization's gaming licenses es,' Explain:	s reveneu, suspenueu c	. Commuted during the	tax your	10	4	
11	 Dos	es the organization operate gaming activities				11		
						[11		
12	adn	ne organization a grantor, beneficiary or tru ninister charitable gaming?	siee oi a trust or a mer	nber of a partnership or	other entity formed to	12		

Schedule G (Form 990 or 990-EZ) 2008 ENVIRONMENTAL STEWARDSHIP	14-2003280	F	age :
13 Indicate the percentage of gaming activity operated in: a The organization's facility b An outside facility 13a 14 Provide the name and address of the person who prepares the organization's gaming/special events book	% % s and records:	YES	NO
Name: ►			
15a Does the organization have a contact with a third party from whom the organization receives gaming reve b If 'Yes,' enter the amount of gaming revenue received by the organization \$	the amount		
Gaming manager compensation ► \$ Description of services provided: ► Director/officer			

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

 \mathbf{b} Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the

organization's own exempt activities during the tax year: ▶ \$

17a

SCHEDULE O (Form 990)

Supplemental Information to Form 990

OMB No. 1545-0047

2008

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.

Name of the organization	Employer identification number
ENVIRONMENTAL STEWARDSHIP	14-2003280
Pt VI-B, Line 12c DIRECTORS SIGN AN ANNUAL DISCLOSURE POLICY; I	DISCUSSION
PURSUES WHEN A POTENTIAL CONFLICT OF INTEREST	OCCURS
AND DISCUSSION & VOTE ARE DOCUMENTED IN MINUT	res.
Pt VI-A, Line 10 THE RETURN WAS E-MAILED TO EACH DIRECTOR/BOAR	RD
MEMBER FOR REVIEW AND COMMENTS/QUESTIONS PRICE	DR_TO_MAILING.
Pt VI-B, Line 15 THE ORGANIZATION DOES NOT EMPLOY ANY EMPLOYER	ES OR PAY
DIRECTORS. HOWEVER, THERE DOES EXIST A POLICY	<u> OF</u>
DISCUSSION AND RESEARCH OF COMPENSATION FOR F	KEY
EMPLOYEES, CEO, DIRECTORS.	
Pt VI-C, Line 19 UPON REQUEST	

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

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

► Attach to Form 990, 990-EZ and 990-PF ► See separate instructions.

OMB No. 1545-0047

Name of the organization		Employer identification number	
ENVIRONMENTAL STEWARDSHIP		14-2003280	
Organization type (check one):			
Filers of:	Section:		
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	n	
	4947(a)(1) nonexempt charitable trust not t	reated as a private foundation	
	527 political organization		
Form 990-PF	501(c)(3) exempt private foundation		
FOIII 990-FF	4947(a)(1) nonexempt charitable trust treat	rod as a private foundation	
	501(c)(3) taxable private foundation	ed as a private roundation	
Check if your organization is covered by the G boxes for both the General Rule and a Special	General Rule or a Special Rule. (Note: Only a sect al Rule. See instructions.)	ion 501(c)(7), (8), or (10) organization can check	
General Rule — For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II.)			
Special Rules –			
X For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.			
For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.			
For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use <i>exclusively</i> for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc, purpose. Do not complete any of the Parts unless the General Rule applies to this organization because it received nonexclusively			
religious, charitable, etc, contributions of	\$5,000 or more during the year.)		
990-PF) but they must answer 'No' on Part IV	Caution: Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF) but they must answer 'No' on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).		
BAA For Privacy Act and Paperwork Reduct	tion Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2008	

for Form 990. These instructions will be issued separately.

Employer identification number

of **1**

14-2003280

Part I	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	MAGNOLIA CHARITABLE TRUST 1724A SUNSET BLVDE HOUSTON TX 77005-1714	\$3,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		. \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Supporting Statement of:

Form 990 p 2/Line 4a Expenses

Description	Amount
LPNT	53,494.
Total	53,494.

Supporting Statement of:

Form 990 p 2/Line 4a Grants

Description	Amount
TWPD	33,595.
Total	33,595.

Supporting Statement of:

Form 990 p 2/Line 4a Revenue

Description	Amount
LPNT/TWPD GRANT	33,595.
Total	33,595.

Supporting Statement of:

Form 990 p 2/Line 4b Expenses

Description	Amount
NATUREFEST 2007 NATUREFEST 2008	3,619. 38,185.
Total	41,804.

Supporting Statement of:

Form 990 p 2/Line 4b Grants

Description	Amount
BEDC GRANT	5,000.
HOTEL/MOTEL TAX CITY OF BASTROP	15,000.

Continued

Supporting Statement of:

Form 990 p 2/Line 4b Grants

Description	Amount
Total	20,000.

Supporting Statement of:

Form 990 p 9/Fundraising Events

Description	Amount
NATUREFEST 2007 NATUREFEST 2008	1,050. 39,241.
Total	40,291.

Supporting Statement of:

Form 990 p 9/Government Grants

Description	Amount
TPWD GRANT	33,595.
Total	33,595.

Supporting Statement of:

Form 990 p 9/Other amt. not included

Description	Amount
CONTRIBUTIONS OBC	7,810.
Total	7,885.

Supporting Statement of:

Form 990 p 10/Line 13 col (B)

Description	Amount
OFFICE SUPPLIES	1,209.
POSTAGE	75.

Continued

Supporting Statement of:

Form 990 p 10/Line 13 col (B)

Description	Amount
PRINTING	300.
Total	1,584.

Supporting Statement of:

Form 990 p 10/Line 13 col (C)

Description	Amount
OFFICE SUPPLIES	302.
POSTAGE	19.
PRINTING	75.
Total	396.

Supporting Statement of:

Form 990 p 10/Line 24f col (B) -4

Description	Amount
EQUIP RENTAL	5,180.
LABOR	7,349.
MATERIALS	25,283.
SERVICES & MISC	15,177.
SIGNS	505.
Total	53,494.

Supporting Statement of:

Sch. G, page 2/Event 1 Other Direct Exp.

Description	Amount
EVENTS	1,115.
INSURANCE	1,311.
LOGISTICS & MISC	6,380.
POSTAGE	142.
PRINTING	873.
ADVERTISING/PROMOTION	22,250.
BANNERS	2,710.
GRAPHIC DESIGN	800.
PUBLICITY - OTHER	35.

Continued

Supporting Statement of:

Sch. G, page 2/Event 1 Other Direct Exp.

Description	Amount
USCA-TCRA	2,526.
VOLUNTEER SUPPORT	43.

Total 38,185.