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Form	330	

EXTENSION APPROVED THROUGH AUGUST 15, 2015

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

Do not enter social security numbers on this form as it may be made public. Information about Form 990 and its instructions is at www.irs.gov/form990.



Department of the Treasury Internal Revenue Service

AF	or th	e 2014 calendar year, or tax year beginning	and ending	_									
B c	Check if pplicab	e: C Name of organization		D Employer identifie	cation number								
	Address IOWA ENVIRONMENTAL COUNCIL												
	Name		42-1	436090									
	Initial		E Telephone number										
	Final	521 FACT LOCHET STREET)244-1194									
	termii ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	727,038.								
	Amer	ded DES MOINES, IA 50309		H(a) Is this a group re	eturn								
	Appli tion	^{a-} F Name and address of principal officer; RALPH ROSENBERG			? Yes X No								
	pend	^{ng} SAME AS C ABOVE		H(b) Are all subordinates in									
11	Гах-ех	empt status: 🗴 501(c)(3) 🛄 501(c) () ┥ (insert no.) 🗌 4947(a)(1) or 📃 52	If "No," attach a	list. (see instructions)								
		te: WWW.IAENVIRONMENT.ORG		H(c) Group exemption									
		organization: X Corporation Trust Association Other ►	L Year	of formation: 1995	State of legal domicile: IA								
Pa	art I	Summary											
e	1	Briefly describe the organization's mission or most significant activities:	E SCHED	JLE O									
Activities & Governance													
'ern	2	Check this box 🕨 🛄 if the organization discontinued its operations or di	-										
205	3	Number of voting members of the governing body (Part VI, line 1a)			18								
~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	4	Number of independent voting members of the governing body (Part VI, line			18								
ties	5	Total number of individuals employed in calendar year 2014 (Part V, line 2a)		12									
Εİ	6	Total number of volunteers (estimate if necessary)		30									
Act		Total unrelated business revenue from Part VIII, column (C), line 12			0.								
	b	Net unrelated business taxable income from Form 990-T, line 34	·····		-								
				Prior Year 637,021.	Current Year 686,059.								
iue	8	Contributions and grants (Part VIII, line 1h)		26,575.	000,059.								
Revenue	9	Program service revenue (Part VIII, line 2g)		20,575.	522.								
Be	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		3,673.	25,810.								
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		667,562.	712,391.								
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 1		70,000.	8,930.								
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		70,000.	0,930.								
	14	Benefits paid to or for members (Part IX, column (A), line 4)		365,410.	482,533.								
Expenses	15	Professional fundraising fees (Part IX, column (A), line 11e)	10)	0.	<u> </u>								
ben	10a	Total fundraising expenses (Part IX, column (A), line 116) $\sim$ 53	874	••	••								
Ă	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	/ / / / /	152,060.	154,274.								
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		587,470.	645,737.								
	19	Revenue less expenses. Subtract line 18 from line 12		80,092.	66,654.								
or				eginning of Current Year	End of Year								
Net Assets or Fund Balances	20	Total assets (Part X, line 16)		398,818.	363,177.								
Ass 1 Ba	21	Total liabilities (Part X, line 26)		277,479.	175,184.								
Net -unc	22	Net assets or fund balances. Subtract line 21 from line 20		121,339.	187,993.								
Pa	art II	Signature Block		,	. ,								
		lties of perjury, I declare that I have examined this return, including accompanying sche	dules and stater	nents, and to the best of my	v knowledge and belief, it is								

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer         RALPH ROSENBERG, EXECUTIVE         Type or print name and title	JTIVE DIRECTOR	[	Date								
Daid	Print/Type preparer's name	Preparer's signature	Date	Check PTIN if self-employed P01301731								
Paid	JAMES J. HINGTGEN			doir omproyou								
Preparer	Firm's name DENMAN & COMPANY		F	Firm's EIN 42-0794029								
Use Only	Firm's address 1601 22ND STREET	r, SUITE 400										
	WEST DES MOINES,	IA 50266-1453	F	Phone no.515-225-8400								
May the IF	RS discuss this return with the preparer shown ab	ove? (see instructions)		X Yes No								
432001 11-0	432001 11-07-14 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2014)											

_	10WA ENVIRONMENTAL COUNCIL		36090	Page
Par	t III Statement of Program Service Accomplishments			Г
	Check if Schedule O contains a response or note to any line in this Part III			L
	Briefly describe the organization's mission: TO PROVIDE A SAFE, HEALTHY ENVIRONMENT AND SUSTAINABLE	FUTURE	FOR	IOWA
	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?			es X
	If "Yes," describe these new services on Schedule O.			
	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	?	<b>Y</b>	es X
	If "Yes," describe these changes on Schedule O.			
	Describe the organization's program service accomplishments for each of its three largest program services, a Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to oth			
	revenue, if any, for each program service reported.	ers, the total	expense	s, anu
4a	(Code: ) (Expenses \$ 175, 402 • including grants of \$ ) (Rever			
	WATER PROGRAM- TO PROTECT AND IMPROVE WATER QUALITY OF	IOWA'S	RIVE	RS,
	STREAMS AND LAKES.			
	(Code: ) (Expenses \$ 151,162. including grants of \$ 8,930.) (Reven	nue \$		_
	ENERGY PROGRAM- TO PROMOTE POLICY IMPROVEMENTS ON RENEW			
	ENERGY EFFICIENCY, AND CLEAN ENERGY, INCLUDING REDUCTIC GAS EMISSIONS.	N OF GI	LEENF	lousi
	GAD EMIDDIOND.			
	(Code: )(Expenses 204,916. including grants of ) (Rever OTHER PROGRAMS TO TO PROVIDE FOR A SAFE AND HEALTHY ENV	ue \$ IRONMEI	<del>.</del>	
	OTHER PROGRAMS TO TO PROVIDE FOR A SAFE AND HEALTHY ENV	TRONMER	N.T.	
•				
•				
•				
	Other program services (Describe in Schedule O.)			
	(Expenses \$ including grants of \$ ) (Revenue \$		)	
			) Form	

Form 990 (2014)

Part IV Checklist of Required Schedules

IOWA ENVIRONMENTAL COUNCIL

			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	X	
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? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		v
•	similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i>	6		x
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete Schedule D, Part III</i>	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	-		<u> </u>
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
с	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	12a		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
10	column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>			X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i>	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Form **990** (2014)

432003 11-07-14

#### Form 990 (2014)

IOWA ENVIRONMENTAL COUNCIL

21       Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 17 // "Yes," complete Schedule I, Parts I and II       21       X         22       Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 17 // "Yes," complete Schedule I, Parts I and III       21       X         23       Did the organization answer "Yes" to Part IVI, Section A, line 3, 4, or 5 about compensation of the organization asswer "Yes" to Part IVI, 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 Schedule J.       22       X         24a       Did the organization aware "Yes" to Part IVI, 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 Schedule L // *10", go to line 25a       X         24a       Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?       24b       24c       24d       24
domestic government on Part IX, column (A), line 1? /f "Yes," complete Schedule I, Parts I and II       21       X         22       Lit the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III       22       X         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 Schedule J       23       X         24       Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a       X         b       Did the organization newest any proceeds of tax-exempt bonds beyond a temporary period exception?       24b       X         24       Did the organization as an "on behalf of" issuer for bonds outstanding at any time during the year?       24d       X         25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I       25a       X         26       Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, director, strustees, key employees, highest compensated employees, or disqualified pers
<ul> <li>Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 27 II "Yes," complete Schedule I, Parts I and III</li> <li>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 Schedule I, Part IV 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</li> <li>Did the organization naviation an escrew account other than a refunding escrew at any time during the year to defease any tax-exempt bonds beyond a temporary period exception?</li> <li>Did the organization maintain an escrew account other than a refunding escrew at any time during the year?</li> <li>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I</li> <li>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-E2? If "Yes," complete Schedule L, Part I</li> <li>Did the organization aware that it engaged in an excess benefit transaction with a disqualified person? If "Yes," complete Schedule L, Part I</li> <li>Zib Uid the organization aware that it engaged in an excess benefit transaction with a disqualified person? If "Yes," complete Schedule L, Part I</li> <li>Zib Uid the organization aware that it engaged in an excess benefit transaction with a disqualified person? If "Yes," complete Schedule L, Part I</li> <li>Zib Uid the organization avare that it engaged in an excess benefit transaction with a disqualified person? If "Yes," complete Schedule L, Part I</li> <li>Zib Uid the organization aparty</li></ul>
Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III       22       X         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 Schedule J       23       X         24       Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a       24a       X         b       Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?       24b       24a       X         c       Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?       24d       X         d       Did the organization avare that it engaged in an excess benefit transaction with a disqualified person during the year?       24d       X         25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organization's prior Forms 990 or 990-E2? If "Yes," complete Schedule L, Part I       25a       X         24       Did the organization negot may amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified person? If "Yes," complete Schedule L, Part II       26       X       <
<ul> <li>23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If</i> "Yes," <i>complete Schedule J</i></li> <li>24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If</i> "Yes," <i>answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a</i></li> <li>b Did the organization mientain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?</li> <li>c Did the organization at as an "on behalf of" issuer for bonds outstanding at any time during the year?</li> <li>24d</li> <li>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If</i> "Yes," <i>complete Schedule L, Part I</i></li> <li>25b X</li> <li>26 Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If</i> "Yes," <i>complete Schedule L, Part I</i></li> <li>27 Did the organization a party to a business transaction with or of the following parties (see Schedule L, <i>Part IV</i></li> <li>28 A current or former officer, director, trustee, or key employee (or a family member for a current or former officer, director, trustee, or key employee (or a family member for a uurrent or former officer, director, trustee, or key employee (or a family member for a outrent or former officer, director, trustee, or key employee (or a family member for a uurrent or former officer, director, trustee, or key employee (or a family member for a sufficer, director, t</li></ul>
<ul> <li>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 Schedule J.</li> <li>Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a</li> <li>Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?</li> <li>Did the organization minest an proceeds of tax-exempt bonds outstanding escrew at any time during the year to defease any tax-exempt bonds?</li> <li>Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?</li> <li>Eda b Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?</li> <li>Eda b Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?</li> <li>Eda X</li> <li>b Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?</li> <li>Eda X</li> <li>b Is the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?</li> <li>Eda X</li> <li>b Is the organization act the tangaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part I</li> <li>Eda X</li> <li>27 Did 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):</li> <li>a A current or</li></ul>
Schedule J       23       X         24a       Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No", go to line 25a       24a       X         2b       Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?       24b       24a       X         2c       Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?       24d       24
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Schedule K. If "No", go to line 25a       24a       X         b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?       24b       24b         c 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       24c         d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?       24d       24d         25a       Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I       25a       X         b Is the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part I       26       X         27       Did the organization a part or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, 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 of any of these persons? If "Yes," complete Schedule L, Part IV       28a       X         28       Was the organization a party to a business transaction with no e of the following parties (see Schedule L, Part IV instructions for applicable filling thresholds, conditions, and exceptions): a A current
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<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation
contributions? If "Yes," complete Schedule M 30 X
31 Did the organization liquidate, terminate, or dissolve and cease operations?
If "Yes," complete Schedule N, Part I
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 X
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 X
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
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
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
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
<b>37</b> 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?
Note. All Form 990 filers are required to complete Schedule O

Form **990** (2014)

432004 11-07-14

Part V         Statements Regarding Other IRS Filings and Tax Compliance           Check IF Schedul & Ochatians a response nor role to any line in the Part V         Image: Check IF Schedul & Ochatians a response nor role to any line in the Part V         Image: Check IF Schedul & Ochatians a response nor role to any line in the Part V           Image: Check IF Schedul & Ochatians a response nor role to any line in the Part V         Image: Check IF Schedul & Ochatians a response nor role to any line in the Part V           Image: Check IF Schedul & Ochatians a response nor role to any line to vendors and reportable gammatic to vendors and reportable gammatic to vendors and reportable gammatic to role and role and role and role and role and role and role of the role and ro		990 (2014) IOWA ENVIRONMENTAL COUNCIL 42-1436 t V Statements Regarding Other IRS Filings and Tax Compliance	090	Р	age <b>5</b>						
Is         Enter the number reported in Box 3 of Form 1096. Enter 40- if not applicable         1a         5           Is         Enter the number of Forms W28 included in line 1a. Enter 30- if not applicable         1b         0           Is         Define the number of Forms W28 included in line 1a. Enter 30- if not applicable         1b         0           Is         Define the number of Forms W28 included in line 1a. Enter 30- if not applicable         1c         1c           Is         Define the number of entry with acklup withholding rules for reportable payment to rule of an one clance year and row with residen on the second to pay the second to the rule of	Fai										
a Enter the number optored in Box of Form 1098. Enter-0 in not applicable         1a         5           b Enter the number of orms W2G holdade in line its. Enter-0 in not applicable         1c         1c           2 Enter the number of orms W2G holdade in line its. Enter-0 in not applicable         1c         1c           2 Enter the number of orms/0xes reported on Form W3, Transmittal of Wage and Tax Statements.         1z         2b           2 Enter the number of orms/0xes reported on Form W3, Transmittal of Wage and Tax Statements.         2a         1z           b If at liast one is reported on in B2, did the organization fie all required iderail employment tax returns?         2b         X           Note. If the sum of lines 1 and 2 is greater than 250, your may be required to e-file (see instructions)         3a         X           d At any time during the caladine yar, did the organization have an innerset 1, or a significator or other authority over, a financial account in a foreign country.         5a         X           b If Yes, 'rest the name of the organization have an innerset 1, or a significator or other authority over, a financial account is organization have an innerset 1, or a significator or other authority over, a financial account is the organization have an innerset 1, or a significator organization have annihilator and ymmet in cosis signification an enter organization have annihilator and ymmet in cosis signification an enter organization have annihilator and ymmet in cosis signification an enter organization have annihilator and ymmet in cosis signification an entereset ons file organization have an installing desce											
b         Enter the number of Forms W2A included in line 1a. Enter of in rappitable payments to vendors and reportable gaming (gambing) winnings to price winners?         Image: Control of				Yes	No						
c       Dot the organization comply with backup withholding rules for reportable gamming in the sear covered by this return.       12       12         2a       Enter the number of employees reported on Form W3. Transmittal of Wage and Tax Statements.       12       12       2a       X         3b       If at least one is proorted on line 2a, did the organization file all required toderal employment tax returns?       2a       X       X         Note. If the sum of lines 1a and 2a is greater than 250, you may be required to the file (see instructions)       3a       X         b       17 Yes," thas it filed a Form 990. To this year? If No, 10 ine 30, provide an explanation in Schedule O       3b       4         b       17 Yes," that it filed a form 990. To this year? If No, 10 ine 30, provide an explanation in Schedule O       3b       X         b       11 Yes," that it filed a form 990. To this year? If No, 10 ine 30, provide an explanation in Schedule O       3b       X         b       11 Yes," to the face of B, did the organization have than threast in or a sign face or year intervant the autority over, a financial Accounts (FBAR).       5a       X         5a       Was the organization have than solution and y time during the taxyear is a party to a prohibited tax sheller transaction?       5a       X         5b       Diff Yes," to line 6a or 8b, did the organization have manual gross receipts shat an onmaly greaster than \$100,000, and did the organization file GM       7a											
gambling: winnings to prize winners?       1c       1c         2a       Enter the number of enrophyses reported on frem W3. Transmittal of Wage and Tax Statements.       12       12         b       if at least one in exported on line 2a, did the organization fiel all required default amployment tax returns?       2a       X         3a       Did the organization have unrelated business gross income of \$1.000 or more during the year?       3a       X         3b       Did the organization have unrelated business gross income of \$1.000 or more during the year?       3a       X         4a       Atary time during the calendar year, did the organization have an infrareat in, or a signature or other authority over, a financial account)?       4a       X         b       If Yes," enter the name of the foreign country: D       See instructions for filling requirements for FinCEN From 114. Report of Foreign Bank and Financial Accounts (FBAR).       Sa       X         b       Did any taxable party notify the organization fiber 0888-17.       Sa       X         c       If Yes," or id the organization fiber 0888-18.       Sa       X         b       Did any taxable party notify the organization fiber 0888-18.       Sa       X         c       If Yes," idid the organization include with every solicitation an express statement that such contributions of grifts were not tax deductibles of thandpartly as a contribution of authas engineed to the part of the set anot on tha											
2a       Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements.       12         b       If at least one is reported on line 2a, did the organization file all required foderal employment tax returns?       2b       X         Note, If the sum of line 3a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)       3a       X         a       Did the organization have uncertailed business greas income of 31, load or more during the earliend yees, of the organization have an interest in, or a signature or other authority over, a financial accountly result for long 2D, provide an explanation in Schedule O       3a       X         b       If "Yes," that if field a form 900-T for the year? If No, 'to ine 3D, provide an explanation in Schedule O       3b       4a       X         b       If "Yes,' that if field a foreign country (such as a bank account, socurities account, or other financial account)?       4a       X         b       If "Yes,' to line 5a or 5b, did the organization file Forms 888617       5a       X         b       If "Yes,' to line 5a or 5b, did the organization file forms 888617       5a       X         b       If "Yes,' to line 5a or 5b, did the organization file forms 888617       5a       X         b       If "Yes,' to line 5a or 5b, did the organization file forms 888617       5a       X         b       If "Yes,' to line 5a or 5b, did the organization file forms 8282 file during the year	С										
tiet for the calendary year ending with or within the year covered by this return			10								
b       If at least one is roported on line 2a, did the organization lis al required to deral employment tax returns?       2b       X         Note. If the sum existed business gross income of 31,000 or more during the year?       3a       X         b       If "Yes," has it lide a Form 390.1" for line 3b, provide an explanation in Schedule O       3a       X         b       If "Yes," has it lide a Form 390.1" for line 3b, provide an explanation in Schedule O       3a       X         b       If "Yes," has it lide a Form 390.1" for line 3b, provide an explanation in Schedule O       3a       X         b       If "Yes," runt the name of the foreign country (such as a bark account, securities account, or other financial account)?       4a       X         b       If "Yes," to line 5a of 5b, did the organization has explit to a prohibited tax shelf transaction at any time during the tax year?       5a       X         b       Did any taxable pary notify the organization has explit to a prohibited tax shelf transaction?       5b       X         b       If "Yes," toline 5a of 5b, did the organization has explit to a prohibited tax shelf transaction?       5b       X         b       If "Yes," did the organization neiter shell as a contributions?       5b       X         b       If "Yes," did the organization neiter shell as a contribution an express statement thas such contributions or gifts were not tax deductible?       7a       X	2a	10									
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e</i> file (see instructions)       3a       X         3a       Diff the organization have unrelated business gress income of \$1,000 or more during the yea?       3a       X         4a       At any time during the calendar year, did the organization have an inferest II, or a signature or other suthomy ver, a financial account is a creing country be a bank account, securities account, or other financial accounts?       3a       X         b       If "Yes," enter the name of the foreign country be a bank account, securities account, or other financial accounts?       5a       X         5a       Was the organization that it was or is a party to a prohibited tax shelter transaction?       5a       X         5a       If "Yes," the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       5a       X         6a       Does the organization notift we dorn or the value of the organization trats.       6a       X         b       If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were no tax edouctible?       7a       X         b       If wes, 'i did the organization notift the dorn of the value of the ogods and services provided to the pary?       7a       X         b       If "Yes,' did the organization notift the dorn of the value of the ogods and services provided to the pary?       7a		,		v							
ga       Did the organization have unrelated business gross income of \$1,000 or more during the year?       3a       X         bit 1*Yes, 'has it field a Form 990-Tor this year? if 'No,' to line 3b, provide an explanation in Schedule 0       3b       3b         c At any time during the calendar year, did the organization have an interest in, or a signature or other authomy over, a       4a       X         bit 1*Yes, 'near tert he name of the foreign country (such as a bark account, securities account, or other financial account)?       4a       X         bit 1*Yes, 'near tert he name of the foreign country (b)       Security (such as a bark account, securities account, or other financial account)?       4a       X         bit 1*Yes, 'near tert he name of the origin country.       Security (such as a bark account, securities account, or other financial account)?       4a       X         bit 1*Yes, 'to line 5a or 5b, did the organization file Form 888-71       So       So       So         c 11*Yes, 'to line 5a or 5b, did the organization file Form 888-71       So       So       So         c 11*Yes, 'to line form orbitotion include with ever solutionan an express statement that such contributions or gifts were not tax deductible as charitable contributions?       So       So         bit 1*Yes, 'to dit due organization naite access of 375 made partly as contribution and partly for proded and services provided 7       Zo       Zi         c 10 the organization naite accelve a payment in access of 375 made part	b		2b	~							
b       If "Yes," has it field a Form 990-T for this year? If "No," to <i>line 3b, provide an explanation in Schedule 0</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 foreing nountry (such as a bank account, or other financial account)?       4a       X         b       If "Yes," enter the name of the foreign country: ▶			-		v						
4a At any time during the calendar year, did the organization have an interest in, or a signature or other subnorty over, a financial accountly cuch as bank account, securities account, or other innancial accountly?       4a       X         b If 'Yes,' enter the name of the foreign country?       See instructions for fling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Account (FBAR).       5a       X         b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction at any time during the taxy gen?       5a       X         b D dray taxable party notify the organization file Form 8886 T?       5a       X       5b       X         b If 'Yes,' to line 5a or 5b, did the organization file Form 8886 T?       5a       X       5a       X         b If 'Yes,' did the organization network with every solicitation and express statement that such contributions or gits were not tax deductible?       5a       X         b If 'Yes,' did the organization network with every solicitation and party for goods and services provided to the payor?       7a       X         b Did the organization network with every or indirectly, to pay premiums on a personal property for which it was required to file Form 8282?       7b       X         b Did the organization network of runn size shorts that are normally constraints required to file Form 8282?       7t       X         b Did the organization network app, or otherwise dispose of tangible personal property for which it was required?       7c<											
time     tim     time     time     time			3b								
b       If 'Yes,' enter the name of the foreign country.*       See instructions for tining requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       Sa         Sa       Was the organization a party to a prohibed tax shelter transaction at any time during the tax year?       So       X         D Id any taxable party notify the organization that It was or is a party to a prohibed tax shelter transaction?       So       X         B       Dest the organization approximation that any two or is a party to a prohibed tax shelter transaction?       So       X         B       Dest the organization include with were y solicitation an express statement that such contributions or gifts       Go       X         D       Did the organization necitive a payment in eccess of \$75 made party is as contributions and party for goods and services provided to the payor?       7a       X         D Id the organization necitive a payment in eccess of \$75 made party is as contribution and party for goods and services provided?       7b       Y         D Id the organization necive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7c       X         If 'Yes,' id the organization necive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7f       X         Id the organization receive any contribution of cars, backs, airpanes, or other valces dirt due organization file form 8282?       7d       X         Id the organization	4a				v						
See instructions for ling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).       5a       X         5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         5a Did any taxable party notify the organization file Form 8886-17       5c       X         6a 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?       6c       X         7 Organization shut are not tax deductible as charitable contributions?       6c       X       6c         7 Organization shut may receive deductible contributions under section 170(c).       8b       7c       X         8 If "Yes," did the organization notify the donor of the value of the goods or services provided?       7c       X         7 Organization, dirug the yar, parmiums, directly or indirectly, to pay premiums on a personal benefit contract?       7c       X         9 If "Yes," indicate the number of Forms 8282 filed during the year       7d       7c       X         9 If the organization, dirug the year premiums, directly or indirectly, or a personal benefit contract?       7r       X         9 If the organization receive a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7d       X         9 Soponsoring organization make any taxable distri			4a								
5a       Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?       5a       X         b       Did any taxable party notify the organization that it was or is a prohibited tax shelter transaction?       5c       X         6b       Dest 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         7       Organization include with very solicitation an express statement that such contributions or gitts were not tax deductible contributions under section 170(c).       6b       6c         7       Organization shall may receive deductible contributions under section 170(c).       7a       X         10       the organization notive with very solicitation an express statement that such contributions or gitts were not tax deductible contributions under section 170(c).       7a       X         10       the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7b       7c       X         11       If 'Yes, ' indicate the number of Forms 8282 filed during the year       7d       7d       X         12       Id the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7r       X         13       If the organization maximas distribution of cars, boats, airplanes, or ot	b										
b       Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?       5b       X         c       If "Yes," to line 5a or 5b, did the organization file Form 8886-1?       5c       5c         B       Dees the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit       5c       5c         b       If "Yes," to line 5a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?       6a       X         7       Organization receives of 575 made party is a contribution and party for goods and services provided to the payor?       7a       X         b       If "Yes," did the organization necelves of 575 made party is a contribution and party for goods and services provided to the payor?       7a       X         b       If "Yes," indicate the number of Forms 8282? field during the year       [7d]       7c       X         f       If "Yes," indicate the number of Forms 8282? field during the year inplanes, or otherwise dispose of tangible personal property for which it was required?       7c       X         f       Id the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7c       X         f       Id the organization received a contribution of qualified intellectual property, did the organization file a Form 1089C       Sponsoring organization se					37						
c       If "Yes," to line 5a or 5b, did the organization file Form 8886-17       5c         GB       Dees the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions and were not 1tax deductible as charathable 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 as charathable contributions and partly for goods and services provided to the payor?       7a       X         f       Organizations that may receive deductible contributions under section 170(c).       Did the organization notify the donor of the value of the goods or services provided?       7a       X         f       If "Yes," did the organization and, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7d       7d       7c       X         f       Did the organization receive any funck, directly or indirectly, to pay premiums on a personal benefit contract?       7fe       X         f       Did the organization receive any tunck, directly or indirectly, on a personal benefit contract?       7ft       X         f       Did the organization receive any tunck, directly or indirectly, on a personal benefit contract?       7ft       X         f       Did the organization make any taxable distributions under section 4906?       9a       9a       9b       9a       9b											
Ga     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?     Ga     X       b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?     Ga     X       7     Organization that may receive deductible contributions under section 170(c).     Bit the organization neckes a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?     7a     X       7     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     Zd     7c     X       7     Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?     7r     X       g If the organization receive a contribution of casi, boats, aiptanes, or other vehicles, did the organization file a Form 1098 Cf     8       S Sopnooring organization make any taxable distributions under section 4966?     9a       9     Sponsoring organization make any taxable distributions under section 4966?     9a       9     Sponsoring organization make any taxable distributions under section 4966?     9a       9     Sponsoring organization make any taxable distributions under section 4966?     9a       9     Sponso					Ă.						
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       6b         7 Organizations that may receive deductible contributions under section 170(c).       7a       X         a bid the organization neceive 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       X         c Did the organization notify the donor of the value of the goods or services provided?       7c       X         d If "Yes," indicate the number of Forms 8282?       7c       X         d If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7f       X         g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7h       X         g If the organization neceived a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7h       X         g If the organization neceleved a contribution of qualified intellectua			5c								
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).       7a       X         7       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7b       7c       X         7       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form 8282?       7c       X         6       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7r       X         7       Tr       X       Tr       X       Tr       X         7       Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       Tr       X         8       Did the sponsoring organization make any taxable distributions under section 4966?       9a       9a       9a       9a       9a       9b       9a	6a										
were not tax deductible?     6b       7     Organization set we apyment in excess of \$55 made partly as a contribution and partly for goods and services provided to the papor?     7a     X       b If the organization receive a payment in excess of \$55 made partly as a contribution and partly for goods and services provided to the papor?     7a     X       c 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     7d     7c     X       f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?     7t     X       g If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?     7n     7g       8     Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?     9a     9b       Did the sponsoring organization make any taxable distributions under section 4966?     9a     9b     9b       10     Section 501(c)(2) organizations. Enter:     10a     11a     10b       11     Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or schareholders.     11a     12a       12     Section 501(c)(2) organizations. Enter:     11a     12a       <		•	6a								
7       Organizations that may receive deductible contributions under section 170(c).       a Did the organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor?       7a       X         7b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       7c       X         7d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7e       X         7d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       X       7e       X         7d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       X       7e       X         7d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       X       7f       X         7d       If the organization received a contribution of qualified intellectual property, did the organization file Form 8289 as required?       7f       X         7d       If the organization maxe asantianing door advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       9b	b										
a 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       7c       X         c 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       7d       7d       X         e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7c       X         g If the organization receive a contribution of qualified intellectual property, did the organization file a Form 1098-C?       7n       X         8 Sponsoring organizations maintaining doorn advised funds.       10d and the organization file a Form 1098-C?       7n       X         9 Sponsoring organization make and taxable distributions under section 4966?       9a			6b								
b       If "Yes," did the organization notify the donor of the value of the goods or services provided?       70         c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       72       X         d       If "Yes," indicate the number of Forms 8282 filed during the year       7d       7c       X         e       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         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?       7n       X         8       Sponsoring organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       9a         9       Sponsoring organization make a distribution to a donor, donor advisor, or related person?       9b       9b         10       Bestion 501(c)(7) organizations. Enter:       10a       10a       10b       10b         11       Section 501(c)(12) organizations. Enter:       11b       11b       12a       12a       12a         12       Section 501(c)(12) organizations. Enter:					37						
c       Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?       7c       X         d       ft "Yes," indicate the number of Forms 8282 filed during the year       7d       7e       X         d       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         f       Did the organization receive at contribution of qualified intellectual property, did the organization file Form 8899 as required?       7f       X         f       If the organization received a contribution of qualified intellectual property, did the organization file Form 1098-C7       7h       X         f       Sponsoring organization maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       8       9         9       Sponsoring organizations maintaining donor advised funds.       9       9b       9b         10       the sponsoring organizations. Enter:       10a       10b       9b       9b         11       Section 501(c)(2) organizations. Enter:       10a       10b       10b       10b       10b         12       Section 501(c)(2) organizations. Enter:       10a       10b       10b       10b       10b       10b       10b       10b       10b											
to file Form 8282?       7c       X         d If "Yes," indicate the number of Forms 8282 filed during the year       7d       7d       X         e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         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       X         f Bid the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?       7h       X         8 Sponsoring organization have excess business holdings at any time during the year?       8       9         9 Sponsoring organization make any taxable distributions under section 4966?       9a       9         b Did the sponsoring organizations. Enter:       10a       10a       9b       90         11 Section 501(c)(7) organizations. Enter:       10a       10b       11a       10a       10a       10a       10a       10a       10a       10b       11a       10b       11b       11a       11b       11b       11b       11a       11b       11a       11b       11a       11b       11b       11b       11b       11b<		<b>b</b> If "Yes," did the organization notify the donor of the value of the goods or services provided?									
d If "Yes," indicate the number of Forms 8282 filed during the year       7d       7e       X         e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         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       X         n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 1098-C?       7h       X         8       Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       9         9       Sponsoring organization make any taxable distributions under section 4966?       9a       9         10       the sponsoring organizations. Enter:       10a       10a       10b       10b         11       Section 501(c)(7) organizations. Enter:       10a       11b       10a       10b       10b <t< th=""><th>С</th><th colspan="10"></th></t<>	С										
e       Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?       7e       X         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 a Form 1098-C?       7g       7h       X         8       Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966?       9a       9a       9b         9       Did the sponsoring organizations maintaining donor advised funds.       9a       9b       9a											
f       Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?       77       X         g       If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?       7g       7h       X         g       If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file Form 8899 as required?       7h       X         g       Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make excess business holdings at any time during the year?       9a       9a       9a       9b       8         9       Sponsoring organizations maintaining donor advised funds.       a lot a donor advised person?       9b       8       8       9a       9b       9b <th>d</th> <th>If "Yes," indicate the number of Forms 8282 filed during the year 7d</th> <th></th> <th></th> <th></th>	d	If "Yes," indicate the number of Forms 8282 filed during the year 7d									
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					X						
	b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O									

1) Form **990** (20

432005 11-07-14

Form 990	(2014)
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#### IOWA ENVIRONMENTAL COUNCIL

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.

ect	Check if Schedule O contains a response or note to any line in this Part VI				
	tion A. Governing body and Management			Yes	Т
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	18		105	t
	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.				
h	Enter the number of voting members included in line 1a, above, who are independent <b>1b</b>	18			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any officer.				
2	officer, director, trustee, or key employee?		2		T
3	Did the organization delegate control over management duties customarily performed by or under the direct supe		~		t
	of officers, directors, or trustees, or key employees to a management company or other person?		3		
			4		t
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed'		4 5		ł
	Did the organization become aware during the year of a significant diversion of the organization's assets?		5 6	Х	$^{+}$
	Did the organization have members or stockholders?		0	<u></u>	╉
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or		_	х	
	more members of the governing body?		7a	~	╀
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,	or			
	persons other than the governing body?		7b		∔
	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the follow			37	1
а	The governing body?		8a	X	4
	Each committee with authority to act on behalf of the governing body?		8b	Х	4
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the				I
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9		
ect	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code	.)			-
				Yes	4
0a	Did the organization have local chapters, branches, or affiliates?		10a		4
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affilia				
	and branches to ensure their operations are consistent with the organization's exempt purposes?		10b		
1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				
2a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		12b	Х	I
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe				Ī
	in Schedule O how this was done		12c	Х	I
	Did the organization have a written whistleblower policy?		13		T
	Did the organization have a written document retention and destruction policy?		14	Х	t
	Did the process for determining compensation of the following persons include a review and approval by indepen				t
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				1
а	The organization's CEO, Executive Director, or top management official		15a	х	T
	Other officers or key employees of the organization		15b	x	t
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		155		t
160	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a				I
			40-		ł
	taxable entity during the year?		16a		+
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its particip	ation			l
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's				ł
	exempt status with respect to such arrangements?		16b		1
	tion C. Disclosure				_
	List the states with which a copy of this Form 990 is required to be filed NONE				
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 50-	l (c)(3)s only) a	availab	le	
	for public inspection. Indicate how you made these available. Check all that apply.				
	Own website Another's website X Upon request Other (explain in Schedule	O)			
	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest	est policy, and	d finan	cial	
9					
	statements available to the public during the tax year.				
20	State the name, address, and telephone number of the person who possesses the organization's books and reco	rds:			_
20	State the name, address, and telephone number of the person who possesses the organization's books and record RALPH ROSENBERG $-515-244-1194$	rds: ►			_
20	State the name, address, and telephone number of the person who possesses the organization's books and reco	rds: ►			

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.

		T				npe	iout			( <b>m</b> .)
(A)	(B)				C)			(D)	(E)	(F)
Name and Title	Average	Positio (do not check mor box, unless persor			more than one			Reportable	Reportable	Estimated
	hours per					is bot pr/trus		compensation	compensation	amount of
	week						,	from the	from related organizations	other
	(list any hours for	direct				-		organization	(W-2/1099-MISC)	compensation from the
	related	se or	stee			nsate		(W-2/1099-MISC)		organization
	organizations	trust	al tru		yee	ompe				and related
	below	Individual trustee or director	Institutional trustee	er	Key employee	Highest compensated employee	her			organizations
	line)	Indiv	Insti	Officer	Key	High emp	Former			
(1) MARGI WEISS	1.00									
PRESIDENT		Х		Х				0.	0.	0.
(2) LINDA KINMAN	1.00									
IMMEDIATE PAST PRESIDENT		X		X				0.	0.	0.
(3) CYRIL MANDELBAUM	1.00									
TREASURER		X		X				0.	0.	0.
(4) SARAH LOHMEIER	1.00									
SECRETARY		x		x				0.	0.	0.
(5) LORRAINE MAY	1.00									
VICE-PRESIDENT		x		x				0.	0.	0.
(6) DAN BACEHOWSKI	1.00									
MEMBER		x						0.	0.	0.
(7) JANE CLARK	1.00									
MEMBER		X						0.	0.	0.
(8) KEVIN NORDMEYER	1.00									
MEMBER		X						0.	0.	0.
(9) ROSS BAXTER	1.00									
MEMBER		X						0.	0.	0.
(10) SONDRA FELDSTEIN	1.00									
MEMBER		X						0.	0.	0.
(11) RYAN PETERSON	1.00									
MEMBER		X						0.	0.	0.
(12) LAURA BELIN	1.00									
MEMBER		X						0.	0.	0.
(13) STEVE ROE	1.00									
MEMBER		X						0.	0.	0.
(14) KARMEN WILHELM	1.00									
MEMBER		X						0.	0.	0.
(15) ED WOOLSEY	1.00									
MEMBER		x						0.	0.	0.
(16) CATHERINE COWNIE	1.00									
MEMBER		x						0.	0.	0.
(17) ELIZABETH GARST	1.00					1				
MEMBER		x						0.	0.	0.
432007 11-07-14										Form <b>990</b> (2014)

432007 11-07-14

11010807 758194 16-4734-001

7 2014.04000 IOWA ENVIRONMENTAL COUNCIL

16 - 47341

Form 990 (2014) IOWA ENV									42-14	360	90	Pa	age <b>8</b>
Part VII Section A. Officers, Directors, Trus		ploy	vees			ghe	st C						
(A) Name and title	( <b>B</b> ) Average hours per week	(C) Positio (do not check mor box, unless person officer and a direc				than is bot	h an	(D) Reportable compensation from	<b>(E)</b> Reportable compensation from related		Est am	<b>(F)</b> imate ount o other	
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC	C)	orga and	ensat om the nizati relate nizatio	e on ed
(18) JONATHAN ROSENBLOOM MEMBER	1.00	x						0.		ο.			0.
(19) RALPH ROSENBERG	40.00			~				71 404		~	_		
EXECUTIVE DIRECTOR				X				71,404.		0.	2	2,44	40.
										_			
1b Sub-total							►	71,404.		0.	2	2,44	46.
c Total from continuation sheets to Part VI	I, Section A							0.		0.			0.
<ul> <li>d Total (add lines 1b and 1c)</li> <li>2 Total number of individuals (including but n</li> </ul>							► no re	71,404. eceived more than \$100	),000 of reportable	0.		2,44	40.
compensation from the organization												Yes	0 No
3 Did the organization list any <b>former</b> officer,													
<ul><li>line 1a? If "Yes," complete Schedule J for s</li><li>For any individual listed on line 1a, is the su</li></ul>								her compensation from			3		X
<ul><li>and related organizations greater than \$150</li><li>5 Did any person listed on line 1a receive or a</li></ul>											4		X
rendered to the organization? If "Yes, " com					-			-			5		Х
Section B. Independent Contractors           1         Complete this table for your five highest co	mpensated inc	depe	ende	ent c	ontr	racto	ors t	that received more than	\$100,000 of comp	ensa	ition fr	om	
the organization. Report compensation for (A)	the calendar y	ear	endi	ng v	vith	or w	ithir I	n the organization's tax (B)	year.		(C)		
Name and business	address	N	ONI	Ξ				Description of s	ervices	Сс	ompen		1
							_						
2 Total number of independent contractors (i	ncluding but n		mito	d to	the	وم انه		d above) who received a	ore than				
\$100,000 of compensation from the organi	•		C			0						00	
432008 11-07-14										F	⁻ orm <b>9</b>	<b>9U</b> (2	2014)

<u>Fo</u> rm	<u>99</u> 0	(2014) <b>IOWA</b>	ENVIRONM	IENTAL CO	UNCIL		42-143	6090 Page <b>9</b>
	rt VI		nue					
_		Check if Schedule O cont	ains a response	or note to any lin		(B)	(C)	
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	Unrelated business revenue	( <b>D)</b> Revenue excluded from tax under sections 512 - 514
nts nts	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues		104,824.				
Åπ,		Fundraising events						
Gif		Related organizations						
Sins,		Government grants (contribut						
utio	f	All other contributions, gifts, gran		581,235.				
dtib		similar amounts not included abo		501,255.				
Son		Noncash contributions included in lines <b>Total.</b> Add lines 1a-1f		<b>&gt;</b>	686,059.			
<u> </u>				Business Code				
ø	2 a	L						
Program Service Revenue	b							
enu Se	с							
ran eve	d	1						
l Бо Н	е	)						
ā	f	1 5						
	g							
	3	Investment income (including			522.			522.
		other similar amounts)			522.			522.
	4 5	Income from investment of tax						
	3	Royalties	(i) Real	(ii) Personal				
	6 a	Gross rents						
		Less: rental expenses						
		Rental income or (loss)						
	d	Net rental income or (loss)		►				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory						
	b	Less: cost or other basis						
		and sales expenses						
		Gain or (loss)						
		Net gain or (loss)     Gross income from fundraisin		▶				
Other Revenue	8 a	including \$						
ever		contributions reported on line						
r R		Part IV, line 18		37,152.				
the	b	Less: direct expenses						
0		Net income or (loss) from fund		►	22,505.			22,505.
		Gross income from gaming ac						
		Part IV, line 19		ļ				
		Less: direct expenses						
		Net income or (loss) from gam		····· <b>&gt;</b>				
	10 a	Gross sales of inventory, less						
	1-	and allowances						
		<ul> <li>Less: cost of goods sold</li> <li>Net income or (loss) from sale</li> </ul>		L				
	0	Miscellaneous Revenu		Business Code				
ł	11 a	RENT	-	900099	2,230.			2,230.
	b			900099	1,075.			1,075.
	с	·						
	d	All other revenue						
	е	• Total. Add lines 11a-11d		►	3,305.			
42000	12	Total revenue. See instructions.		►	712,391.	0.	0	-
43200 11-07-	14							Form <b>990</b> (2014)

Part IX Statement of Functional Expenses

IOWA ENVIRONMENTAL COUNCIL

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

	Check if Schedule O contains a respons not include amounts reported on lines 6b,	<b>(A)</b> Total expenses	<b>(B)</b> Program service	<b>(C)</b> Management and	<b>(D)</b> Fundraising	
/0, 1	<b>8b, 9b, and 10b of Part VIII.</b> Grants and other assistance to domestic organizations		expenses	general expenses	expenses	
•	and domestic governments. See Part IV, line 21	8,930.	8,930.			
2	Grants and other assistance to domestic	0,550.	0,550.			
2						
3	individuals. See Part IV, line 22					
3	ç					
	organizations, foreign governments, and foreign					
4	individuals. See Part IV, lines 15 and 16 Benefits paid to or for members					
4 5	Compensation of current officers, directors,					
5	trustees, and key employees	73,851.	55,388.	11,078.	7,385.	
6	Compensation not included above, to disqualified	/5,0510	55,500.	11,070.	7,505	
0	persons (as defined under section 4958(f)(1)) and					
7	persons described in section 4958(c)(3)(B)	355,394.	290,273.	33,416.	31,705.	
7 0	Other salaries and wages	555,5940	470,413.	55,±10•	51,103.	
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)					
~		19,360.	17,115.	969.	1,276.	
9 10	Other employee benefits	33,928.	27,342.	3,386.	3,200	
10 11	Payroll taxes	55,520.	27, 572.	5,500•	5,200	
11	Fees for services (non-employees):					
a L	F					
b	E E	3,800.	3,002.	418.	380.	
	Accounting	12,335.	12,335.		500.	
	Lobbying	12,333.	12,333.			
	Professional fundraising services. See Part IV, line 17					
f	Investment management fees					
g						
10	column (A) amount, list line 11g expenses on Sch 0.)					
12	Advertising and promotion	1,670.	1,319.	184.	167.	
13	Office expenses	15,085.	11,617.	1,817.	1,651.	
14	Information technology	13,003.	11,01/•	, 01/•	1,051.	
15	Royalties	33,750.	26,946.	3,564.	3,240.	
16		17,867.	17,325.	542.	5,240.	
17	Travel	17,007.	17,525.	J=2•		
18	Payments of travel or entertainment expenses					
	for any federal, state, or local public officials					
19	Conferences, conventions, and meetings					
20	Interest					
21	Payments to affiliates	2,525.	1,992.	279.	254.	
22	Depreciation, depletion, and amortization	3,843.	3,026.	428.	389.	
23	Insurance	5,045.	5,020•	420.	505.	
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.)	33,700.	33,700.			
a		8,792.	6,956.	964.	872.	
b		5,782.	4,569.	635.	578.	
c	TELEPHONE	5,782.	4,348.	603.	578.	
d		9,626.	5,297.	2,100.	2,229.	
e	· · · · · · · · · · · · · · · · · · ·	645,737.	531,480.	60,383.	53,874.	
25	Total functional expenses. Add lines 1 through 24e	040,/3/.	551,40U.	00,303.	55,0/4.	
26	<b>Joint costs.</b> 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)				<b>E 000</b> (001 4)	

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Form **990** (2014)

16-47341

### IOWA ENVIRONMENTAL COUNCIL

n 990 ( <b>art X</b>	(2014) IOWA ENVIRONM	ENTAL C	OUNCIL		42-	1436090 Page <b>1</b> 1
	Check if Schedule O contains a response or no	ote to any line	in this Part X			
	I	J		<b>(A)</b> Beginning of year		<b>(B)</b> End of year
1	Cash - non-interest-bearing			376,143.	1	201,893
2	Savings and temporary cash investments			5,075.	2	150,000
3	Pledges and grants receivable, net			-	3	
4	Accounts receivable, net			4,728.	4	0
5	Loans and other receivables from current and			-		
	trustees, key employees, and highest compens					
	Part II of Schedule L				5	
6	Loans and other receivables from other disqua					
	section 4958(f)(1)), persons described in section	n 4958(c)(3)(E	B), and contributing			
	employers and sponsoring organizations of sec		-			
	employees' beneficiary organizations (see instr				6	
7	Notes and loans receivable, net				7	
8	Inventories for sale or use				8	
9	Prepaid expenses and deferred charges			2,700.	9	1,583
10a	Land, buildings, and equipment: cost or other					
	basis. Complete Part VI of Schedule D	10a	18,392.			
b	Less: accumulated depreciation		8,966.	10,172.	10c	9,426
11	Investments - publicly traded securities				11	
12	Investments - other securities. See Part IV, line	11			12	
13	Investments - program-related. See Part IV, line	e 11			13	
14	Intangible assets		14			
15	Other assets. See Part IV, line 11		0.	15	275	
16	Total assets. Add lines 1 through 15 (must equ	ual line 34)		398,818.	16	363,177
17	Accounts payable and accrued expenses		23,823.	17	10,812	
18	Grants payable			18		
19	Deferred revenue		253,656.	19	164,372	
20	Tax-exempt bond liabilities		20			
21	Escrow or custodial account liability. Complete		21			
22	Loans and other payables to current and forme					
	key employees, highest compensated employe					
	Complete Part II of Schedule L		······  -		22	
23	Secured mortgages and notes payable to unre				23	
24	Unsecured notes and loans payable to unrelate				24	
25	Other liabilities (including federal income tax, p					
	parties, and other liabilities not included on line	,	•			
	Schedule D			277,479.	25	175,184
26	Total liabilities. Add lines 17 through 25			211,419.	26	1/3,104
	Organizations that follow SFAS 117 (ASC 95					
07	complete lines 27 through 29, and lines 33 a			121,339.	27	187,993
27	Unrestricted net assets			121,555.	27	107,555
28 29	Temporarily restricted net assets Permanently restricted net assets				20 29	
25	Organizations that do not follow SFAS 117 (		eck bere		29	
	and complete lines 30 through 34.	-30 300), CH				
30	Capital stock or trust principal, or current funds				30	
31	Paid-in or capital surplus, or land, building, or e				31	
32	Retained earnings, endowment, accumulated i				32	
02	Total net assets or fund balances			121,339.	33	187,993
33	LOTAL NET ASSETS OF TUND DAIADCES		1			

Form **990** (2014)

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Form	1990 (2014) IOWA ENVIRONMENTAL COUNCIL	42-1	436090	Page	12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI			L	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		2,39	
2	Total expenses (must equal Part IX, column (A), line 25)	2		5,73	
3	Revenue less expenses. Subtract line 2 from line 1	3		5,65	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	121	.,33	9.
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	187	7,99	3.
Pa	rt XII Financial Statements and Reporting			_	
	Check if Schedule O contains a response or note to any line in this Part XII			<u></u> L	
				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				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>x</u>
	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	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	te basis,			
	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				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	iired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2014)

432012 11-07-14

SCHEDULE A	
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(Form	990	or	990-	·ΕΖ
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# 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.

	2014
	Open to Public Inspection
r	identification numbe

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

mation about Schodula A	(Earm 000 or 000 E7)	) and its instructions is	at the manuffer
mation about Schedule A	(I OIIII 330 OI 330-LZ)	<i>j</i> and its mound is a	a www.irs.gov/io

		ion about Schedule A	(Form 990 or 990-EZ) and	its instruct	ions is at _W	ww.irs.gov/fo		mapeetion
Name o	f the organization							identification number
			NTAL COUNCIL					2-1436090
Part	Reason for Public	Charity Status (A	All organizations must co	omplete th	is part.) Se	ee instructior	IS.	
The org	anization is not a private found	lation because it is: (	(For lines 1 through 11, o	heck only	one box.)			
1	A church, convention of ch	urches, or associatio	on of churches describe	d in <b>sectio</b>	n 170(b)(*	1)(A)(i).		
2	A school described in <b>sect</b>	ion 170(b)(1)(A)(ii).	Attach Schedule E.)					
3	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						(iii). Enter	the hospital's name,
	city, and state:							
5	An organization operated for	or the benefit of a co	llege or university owne	d or operat	ted by a g	overnmental	unit describ	ed in
	section 170(b)(1)(A)(iv). (C							
6	A federal, state, or local go	vernment or governn	nental unit described in	section 17	70(b)(1)(A)	(v).		
7 X	An organization that norma	Illy receives a substa	Intial part of its support f	rom a gov	ernmental	l unit or from	the general	public described in
	section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8	A community trust describe		(1)(A)(vi). (Complete Par	t II.)				
9	An organization that norma	Illy receives: (1) more	e than 33 1/3% of its sup	port from	contributi	ons, member	ship fees, a	nd gross receipts from
	activities related to its exen	npt functions - subje	ct to certain exceptions,	and (2) no	o more tha	n 33 1/3% o	f its support	from gross investment
	income and unrelated busir	ness taxable income	(less section 511 tax) fr	om busine	sses acqu	uired by the o	rganization	after June 30, 1975.
	See section 509(a)(2). (Co	mplete Part III.)						
10	An organization organized a	and operated exclus	ively to test for public sa	fety. See s	section 50	09(a)(4).		
11 🗌	An organization organized a	and operated exclus	ively for the benefit of, to	perform t	the functio	ons of, or to c	arry out the	purposes of one or
	more publicly supported or	ganizations describe	ed in <b>section 509(a)(1)</b> o	r section !	509(a)(2).	See section	509(a)(3). C	heck the box in
	lines 11a through 11d that	describes the type o	of supporting organizatio	n and corr	nplete lines	s 11e, 11f, ar	id 11g.	
a	<b>Type I.</b> A supporting orga	anization operated, s	supervised, or controlled	by its sup	ported org	ganization(s),	typically by	giving
	the supported organization	on(s) the power to re	gularly appoint or elect a	a majority o	of the dire	ctors or trust	ees of the s	upporting
	organization. You must o	complete Part IV, Se	ections A and B.					
b	<b>Type II.</b> A supporting org	anization supervised	d or controlled in connec	tion with it	s support	ed organizati	on(s), by ha	ving
	control or management o	of the supporting org	anization vested in the s	ame perso	ons that co	ontrol or man	age the sup	ported
	organization(s). You mus	t complete Part IV,	Sections A and C.					
c	Type III functionally inte	grated. A supporting	g organization operated	in connec	tion with, a	and functiona	ally integrate	ed with,
_	its supported organizatio	n(s) (see instructions	s). You must complete l	Part IV, Se	ections A,	D, and E.		
d	Type III non-functionally	y integrated. A supp	oorting organization oper	ated in co	nnection v	with its suppo	orted organiz	zation(s)
	that is not functionally int	tegrated. The organiz	zation generally must sa	tisfy a disti	ribution re	quirement ar	id an attenti	veness
_	requirement (see instruct	ions). <b>You must con</b>	nplete Part IV, Sections	s A and D,	and Part	۷.		
e	Check this box if the orga	anization received a	written determination fro	om the IRS	that it is a	а Туре I, Туре	e II, Type III	
	functionally integrated, or	r Type III non-functio	nally integrated support	ing organiz	zation.			
f Er	nter the number of supported o	organizations						
g Pi	rovide the following information							
	(i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the or listed i		(v) Amount c		(vi) Amount of
	organization		(described on lines 1-9 above or IRC section		document?	suppor Instruc		other support (see Instructions)
			(see instructions))	Yes	No	Instruc	10115/	instructions)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 432021 09-17-14

Schedule A (Form 990 or 990-EZ) 2014

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Total

2014.04000 IOWA ENVIRONMENTAL COUNCIL 16-47341

## Schedule A (Form 990 or 990-EZ) 2014 IOWA ENVIRONMENTAL COUNCIL

42-1436090 Page 2

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.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in) 🕨	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	464,186.	470,034.	459,912.	637,021.	686,059.	2717212.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge $\dots$						
4	Total. Add lines 1 through 3	464,186.	470,034.	459,912.	637,021.	686,059.	2717212.
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)						1325850.
6	Public support. Subtract line 5 from line 4.						1391362.
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	464,186.	470,034.	459,912.	637,021.	686,059.	2717212.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources $\dots$	2,900.	487.	1,507.	2,693.	2,752.	10,339.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on $\dots$						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						2727551.
12	,		,			12	189,984.
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
<u> </u>	organization, check this box and stor ction C. Computation of Publ	here	rooptogo				<b>&gt;</b>
	•						E1 01
	Public support percentage for 2014 (					14	51.01 % 50.35 %
	Public support percentage from 2013					15	, -
16a	<b>33 1/3% support test - 2014.</b> If the c						
	stop here. The organization qualifies						······ • —
r	<b>33 1/3% support test - 2013.</b> If the c	-					
4-	and <b>stop here.</b> The organization qual						
178	10% -facts-and-circumstances tes						
	and if the organization meets the "fac			-	-	-	
	meets the "facts-and-circumstances"	•	•		•		
Ľ	10% -facts-and-circumstances tes						
	more, and if the organization meets the						, 
10	organization meets the "facts-and-circ <b>Private foundation.</b> If the organization		-		• • •		
18	Finale foundation. If the organizatio	IT UIU HUL CHECK à		a, 100, 17a, 01 17k		edule A (Form 990	
					00110		

432022 09-17-14

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

(Complete only if you checked the box on line 9 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.)

<ol> <li>Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")</li> <li>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</li> <li>Gross receipts from activities that are not an unrelated trade or bus- ingenue provide and the provide and the provide and the provide interval of the provide and the provide and the provide and the provide and the provide and the pr</li></ol>						
<ul> <li>include any "unusual grants.")</li> <li>2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose</li> <li>3 Gross receipts from activities that are not an unrelated trade or bus-</li> </ul>						
<ol> <li>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</li> <li>Gross receipts from activities that are not an unrelated trade or bus-</li> </ol>						
<ul> <li>merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose</li> <li>Gross receipts from activities that are not an unrelated trade or bus-</li> </ul>				1		
<ul> <li>any activity that is related to the organization's tax-exempt purpose</li> <li>Gross receipts from activities that are not an unrelated trade or bus-</li> </ul>						
<b>3</b> Gross receipts from activities that are not an unrelated trade or bus-						
are not an unrelated trade or bus-						
iness under section 513						
4 Tax revenues levied for the organ-					1	
ization's benefit and either paid to						
or expended on its behalf						
<b>5</b> The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5				1	1	
<b>7a</b> Amounts included on lines 1, 2, and				1	1	
3 received from disgualified persons						
<b>b</b> Amounts included on lines 2 and 3 received					1	
from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support (Subtract line 7c from line 6.)						
Section B. Total Support					1	
alendar year (or fiscal year beginning in) 🕨	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Tota
9 Amounts from line 6	(4) 2010	(8) 2011	(0) 2012	(4) 2010		
<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						
<b>c</b> Add lines 10a and 10b						
<ul> <li>Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</li> </ul>						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)					Τ	
14 First five years. If the Form 990 is for t	the organization'	s first, second. thi	d, fourth, or fifth t	ax year as a section	on 501(c)(3) ora:	anization.
check this box and stop here	-			•		<b>&gt;</b>
Section C. Computation of Public	c Support Pe	rcentage				
15 Public support percentage for 2014 (lir			column (f))		15	
<b>16</b> Public support percentage for 2013 s					16	
Section D. Computation of Invest						
17 Investment income percentage for 201					17	
		'				
18 Investment income percentage from 20			on line 14 and line			
<b>19a 33 1/3% support tests - 2014.</b> If the c						
more than 33 1/3%, check this box and						
<b>b 33 1/3% support tests - 2013.</b> If the c line 18 is not more than 33 1/3%, chec	•					
			-		-	
20 Private foundation. If the organization	аю пот спеск а		a, or red, check ti			
32023 09-17-14			15	Scl	hedule A (Form	990 or 990-l

#### Schedule A (Form 990 or 990-EZ) 2014 IOWA ENVIRONMENTAL COUNCIL

1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

10b

Yes

No

#### Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d 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 11a or 11b 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 (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) 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 (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disgualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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 9(a)) 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 9(a)) 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 IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) 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.)

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Schedule A (Form 990 or 990-EZ) 2014

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# Schedule A (Form 990 or 990-EZ) 2014 IOWA ENVIRONMENTAL COUNCIL Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
a		11a		
	below, the governing body of a supported organization? 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		
300	ction B. Type I Supporting Organizations		Vee	NI -
			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 <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	ction C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax			
	year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) 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			
3	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 <b>Part VI</b> the role the organization's			
800	supported organizations played in this regard. Stion E. Type III Functionally-Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year(see instructions):			
a	The organization satisfied the Activities Test. <i>Complete</i> <b>line 2</b> below.			
b	The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>		,	
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а				
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (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				
	trustees of each of the supported organizations? Provide details in <i>Part VI.</i>	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 <b>Part VI</b> the role played by the organization in this regard.	3b		
43202	15 09-17-14 Schedule A (Form 9	90 or 99	0-EZ)	2014
	17			

#### Schedule A (Form 990 or 990-EZ) 2014 IOWA ENVIRONMENTAL COUNCIL

 Part V
 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

 1
 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. Set

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970. See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

a strain the second			(optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section 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	<b>1</b> a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e 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		
Section 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	ly-integrat	ted Type III supporting org	anization (see

instructions).

Schedule A (Form 990 or 990-EZ) 2014

432026 09-17-14

#### Schedule A (Form 990 or 990-EZ) 2014 IOWA ENVIRONMENTAL COUNCIL

Pa	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
	ion D - Distributions		(continaca)	Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exemption			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization	S	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which t	he organization is responsive	9	
	(provide details in <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2014 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2014	Distributable Amount for 2014
1	Distributable amount for 2014 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2014			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2014:			
а	<b>, , ,</b>			
b				
с				
d				
е	From 2013			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2014 distributable amount			
i	Carryover from 2009 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2014 from Section D,			
	line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2014 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2014, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2014. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2015. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a				
 b				
 C				
	Excess from 2013			
	Excess from 2014			
0				

Schedule A (Form 990 or 990-EZ) 2014

432027 09-17-14 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

2020 05-7-14 20 Schedule A (Form 990 or 990-E2) 2020 05-7-14 20 Schedule A (Form 990 or 990-E2) 10807 758194 16-4734-001 2014.04000 10WA ENVIRONMENTAL COUNCIL 16-473					
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	10807 758194 16-4734-	001 2014.04000	) IOWA ENVIRC	NMENTAL COUNC	L 16-473

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

Department of the Treasury Internal Revenue Service

Name of the organization

Organization type (abook ano):

** PUBLIC DISCLOSURE COPY **

# Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 .

OMB No. 1545-0047

2014

Employer identification number

42-1436090

IOWA	ENVIRONMENTAL	COUNCIL

Organization type (check of	rganization type (check one).				
Filers of:	Section:				
Form 990 or 990-EZ	X 501(c)( 3) (enter number) organization				
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation				
	527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				

Check if your organization is covered by the General Rule or a Special Rule.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### **General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) 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 any one contributor, 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, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

**Caution.** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on 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 certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA 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) (2014)

Employer identification number

42 - 1436090

#### IOWA ENVIRONMENTAL COUNCIL

Part I	<b>Contributors</b> (see instructions). Use duplicate copies of Part I if a	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$124,000.	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
2		\$129,734.	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		\$27,500.	PersonXPayrollNoncash(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$27,000.	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		\$133,086.	PersonXPayrollImage: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$\$6,222.	Person X Payroll Noncash (Complete Part II for noncash contributions.) 90, 990-EZ, or 990-PF) (2014)
423452 11-05	2	2	00, 000 LL, 01 000-FF) (2014)

Name	of	organization
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## <u>_</u>

value of or	yanization		Employer Identification number
IOWA	ENVIRONMENTAL COUNCIL		42-1436090
Part I	Contributors (see instructions). Use duplicate copies of Part I if ad	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Type of contribution
7		\$16,7	45.       Person       X         A45.       Payroll       Image: Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Is Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Type of contribution
		\$	Person Payroll Payroll (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributior	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

16-47341

11010807 758194 16-4734-001 2014.04000 IOWA ENVIRONMENTAL COUNCIL

423452 11-05-14

42 - 1436090

#### IOWA ENVIRONMENTAL COUNCIL

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		   \$	

Page	4
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Name of organization			Employer identification number			
IOWA E	ENVIRONMENTAL COUNCIL		42-1436090			
Part III	Exclusively religious, charitable, etc., co the year from any one contributor. Complete	ntributions to organizations described in e columns (a) through (e) and the followi	n section 501(c)(7), (8), or (10) that total more than \$1,000 for			
	completing Part III, enter the total of exclusively religi Use duplicate copies of Part III if additic	ous, charitable, etc., contributions of \$1,000 or le	sss for the year. (Enter this info. once.) <b>\$</b>			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
F		(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						
Γ	(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			
F	(e) Transfer of gift					
	Transferee's name, address,	Relationship of transferor to transferee				
Γ	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·			
(a) No. from						
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
F	(e) Transfer of gift					
	Transferee's name, address,	Relationship of transferor to transferee				
F						
100.154			Schedule B (Form 990, 990-EZ, or 990-PF) (2014			
423454 11-05-	- 14	25	Schedule D (FUIII 990, 990-EZ, 01 990-PF) (2014			

SCHEDULE C (Form 990 or 990-EZ)       Political Campaign and Lobbying Activities         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.         Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.						OMB No. 15 20 Open to Inspec	<b>14</b> Public
<ul> <li>Section 501(c)(3) org</li> <li>Section 501(c) (other</li> <li>Section 527 organiz</li> <li>If the organization ans</li> <li>Section 501(c)(3) org</li> <li>Section 501(c)(3) org</li> <li>If the organization ans</li> <li>Tax) (see separate inst</li> <li>Section 501(c)(4), (5</li> </ul>	ganizations: Cor r than section 5 ations: Complet wered "Yes," to ganizations that ganizations that wered "Yes," to ructions), then	Form 990, Part IV, line 3, or For nplete Parts I-A and B. Do not co 01(c)(3)) organizations: Complete e Part I-A only. Form 990, Part IV, line 4, or Fo have filed Form 5768 (election u have NOT filed Form 5768 (elect Form 990, Part IV, line 5 (Prox tions: Complete Part III.	omplete Part I-C. e Parts I-A and C below orm 990-EZ, Part VI, Ii nder section 501(h)): C tion under section 501(	v. Do not complete Part ine 47 (Lobbying Activi complete Part II-A. Do no (h)): Complete Part II-B. instructions) or Form 9	I-B. ties), the ot compl Do not c 990-EZ, I	en ete Part II-B. complete Part Part V, line 35	ōc (Proxy
Name of organization		VIRONMENTAL COUN			4	r identificatio 2-14360	
<ul> <li>2 Political expenditure</li> <li>3 Volunteer hours</li> <li>Part I-B Completion</li> <li>1 Enter the amount of 2 Enter the amount of 2</li> </ul>	es ete if the org f any excise tax f any excise tax	zation's direct and indirect politic ganization is exempt und incurred by the organization und incurred by organization manag on 4955 tax, did it file Form 4720	<b>ler section 501(c)</b> der section 4955 ers under section 4955	(3).	►\$	Yes	No
<b>4a</b> Was a correction m <b>b</b> If "Yes," describe in						Yes	└── No
Part I-C Compl	ete if the org	ganization is exempt und	ler section 501(c)	, except section 5	01(c)(3	3).	
2 Enter the amount of	f the filing organ	d by the filing organization for se iization's funds contributed to of	ther organizations for s	ection 527	►\$ ►\$		
line 17b		s. Add lines 1 and 2. Enter here a		J	►\$	1-1	
5 Enter the names, a made payments. Free contributions received	ddresses and er or each organiza ved that were pr	<b>1120-POL</b> for this year? mployer identification number (El tion listed, enter the amount pai omptly and directly delivered to additional space is needed, prov	IN) of all section 527 po id from the filing organi a separate political org	olitical organizations to v zation's funds. Also entr janization, such as a sej	which the an	nount of politi	cal
<b>(a)</b> Name	3	(b) Address	(c) EIN	(d) Amount paid fro filing organization' funds. If none, enter	s cor -0 d	(e) Amount of ntributions rec promptly and lelivered to a s political organ If none, ente	ceived and directly separate iization.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.							
LHA 432041 10-21-14							

Schedule C (Form 990 or 990-EZ) 2014

	ule C (Form 990 or 990-EZ) 2014	IOWA ENVIRC	NMENTAL COU	NCIL	42-1	436090 Page 2
Part		anization is exe	mpt under sectio	n 501(c)(3) and fil	ed Form 5768 (e	lection under
	section 501(h)).					
A Che	eck 🕨 🛄 if the filing organiza	tion belongs to an affi	iliated group (and list ir	n Part IV each affiliated	group member's nam	e, address, EIN,
	expenses, and sha	re of excess lobbying	expenditures).			
B Che	eck 🕨 🔲 if the filing organiza	tion checked box A a	nd "limited control" pro	ovisions apply.		
		ts on Lobbying Expe ditures" means amou	nditures unts paid or incurred.	)	<b>(a)</b> Filing organization's totals	(b) Affiliated group totals
<b>1</b> a 1	Total lobbying expenditures to infl	uence public opinion (	(grass roots lobbying)		5,748.	
	Fotal lobbying expenditures to infl				12,335.	
	Fotal lobbying expenditures (add I				18,083.	
	Other exempt purpose expenditur				627,654.	
е٦	Total exempt purpose expenditure	es (add lines 1c and 1c	d)		645,737.	
	obbying nontaxable amount. Ent				121,861.	
1	f the amount on line 1e, column (a) o	or (b) is: The lob	bying nontaxable am	ount is:		
١	Not over \$500,000	20% of	the amount on line 1e.			
	Over \$500,000 but not over \$1,00	0,000 \$100,00	00 plus 15% of the exc	ess over \$500,000.		
	Over \$1,000,000 but not over \$1,5	500,000 \$175,00	00 plus 10% of the exc	ess over \$1,000,000.		
	Over \$1,500,000 but not over \$17	,000,000 \$225,00	00 plus 5% of the exce	ss over \$1,500,000.		
C	Over \$17,000,000	\$1,000,	000.			
g(	Grassroots nontaxable amount (er	nter 25% of line 1f)			30,465.	
hΞ	Subtract line 1g from line 1a. If zer	o or less, enter -0-			0.	
i S	Subtract line 1f from line 1c. If zero	o or less, enter -0			0.	
j l	f there is an amount other than ze	ero on either line 1h or	line 1i, did the organization	ation file Form 4720	_	
r	eporting section 4911 tax for this	year?				Yes No
	(Some organizations t	hat made a section 5	eraging Period Under i01(h) election do not ate instructions for li	have to complete all	of the five columns b	elow.
		Lobbying Expe	nditures During 4-Yea	ar Averaging Period		
	Calendar year	<b>(a)</b> 2011	<b>(b)</b> 2012	<b>(c)</b> 2013	<b>(d)</b> 2014	(e) Total

Calendar year (or fiscal year beginning in)	<b>(a)</b> 2011	<b>(b)</b> 2012	<b>(c)</b> 2013	<b>(d)</b> 2014	<b>(e)</b> Total
2a Lobbying nontaxable amount	100,430.	92,432.	113,121.	121,861.	427,844.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					641,766.
<b>c</b> Total lobbying expenditures	20,674.	24,984.	25,276.	18,083.	89,017.
d Grassroots nontaxable amount	25,108.	23,108.	28,280.	30,465.	106,961.
e Grassroots ceiling amount (150% of line 2d, column (e))					160,442.
f Grassroots lobbying expenditures	6,436.	9,254.	8,018.	5,748.	29,456.

Schedule C (Form 990 or 990-EZ) 2014

432042 10-21-14

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#### Schedule C (Form 990 or 990-EZ) 2014 IOWA ENVIRONMENTAL COUNCIL

## 42-1436090 Page 3

# 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)).

For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description	(a)	)	(k	)
of the	lobbying activity.	Yes	No	Amo	ount
1 a	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: Volunteers?				
b	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?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	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				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	on 501(c)(	5), or se	ction	
				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?				
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		3		
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section				
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No," OR	l (b) Par	t III-A, lir	ne 3, is
			1		
1	Dues, assessments and similar amounts from members				
2	expenses for which the section 527(f) tax was paid).	Jai			
-			2a		
	Current yearCarryover from last year				
	Total				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc		5		
-	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
	expenditure next year?		4		
5	Taxable amount of lobbying and political expenditures (see instructions)				
	t IV Supplemental Information		V		
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part I-A (affiliated group	list): Part II-	A lines 1 :	and 2 (see	
	ictions): and Part II-B. line 1. Also, complete this part for any additional information.		.,		

Schedule C (Form 990 or 990-EZ) 2014

432043 10-21-14

50	HEDULE D	Supplement	al Financia	al Statements		OMB No. 1545-0047
	n 990)	Complete if the org	anization answe	red "Yes" to Form 990.		2014
•		Part IV, line 6, 7, 8, 9, 10	, 11a, 11b, 11c, 1 Attach to Form 9	1d, 11e, 11f, 12a, or 12b.		Open to Public
	ment of the Treasury I Revenue Service	Information about Schedule D (Formation about Schedule D)	rm 990) and its in	structions is at _{www.irs.gov/f}	orm99	0. Inspection
Nam	e of the organizat	ion IOWA ENVIRONMENTAL	COUNCIL		Em	ployer identification number $42 - 1436090$
Pa	rt I Organiza	ations Maintaining Donor Advise		ther Similar Funds or A	ccou	
		on answered "Yes" to Form 990, Part IV, lin				·
			(a) Donor	advised funds (	<b>b)</b> Fun	ids and other accounts
1	Total number at e	nd of year				
2	Aggregate value of	of contributions to (during year)				
3	Aggregate value of	of grants from (during year)				
4		t end of year				
5	-	on inform all donors and donor advisors in	-			
		on's property, subject to the organization's				Yes II No
6	•	on inform all grantees, donors, and donor a	•	•	-	
		poses and not for the benefit of the donor of			Ũ	
Pa	impermissible priv	rate benefit? ration Easements. Complete if the org		ad "Vaa" to Farm 000. Dart IV		Yes No
			•		line 7.	,
1		servation easements held by the organizat n of land for public use (e.g., recreation or e	· ·	Preservation of a historically	impo	tant land area
		of natural habitat		Preservation of a certified hi	•	
		n of open space			310110	Siluciale
2		through 2d if the organization held a quali	fied conservation	contribution in the form of a co	nserv	ation easement on the last
-	day of the tax yea	<b>.</b> .				
						Held at the End of the Tax Year
а	Total number of c	onservation easements			2a	
b					2b	
с	Number of conser	vation easements on a certified historic str			2c	
d		vation easements included in (c) acquired				
	listed in the Nation	nal Register			2d	
3	Number of conser	vation easements modified, transferred, re	leased, extinguish	ed, or terminated by the organ	nizatio	n during the tax
	year 🕨					
4		where property subject to conservation ea				
5	•	tion have a written policy regarding the pe		inspection, handling of		
_		forcement of the conservation easements				
6		er hours devoted to monitoring, inspecting,	•	•		·
7		ses incurred in monitoring, inspecting, and				\$
8		vation easement reported on line 2(d) abo				
•		i)(4)(B)(ii)?				
9		be how the organization reports conservat ble, the text of the footnote to the organiza		•		
	conservation ease	-	luon s inanciai sta		Janiza	tion's accounting for
Pa		ations Maintaining Collections o	f Art. Historic	al Treasures, or Other	Simil	ar Assets.
		f the organization answered "Yes" to Form				
1a	If the organization	elected, as permitted under SFAS 116 (As	SC 958), not to rep	port in its revenue statement ar	nd bal	ance sheet works of art,
		s, or other similar assets held for public ex				
		tnote to its financial statements that descr				
b	If the organization	elected, as permitted under SFAS 116 (AS	SC 958), to report	in its revenue statement and b	alance	e sheet works of art, historical
	treasures, or othe	r similar assets held for public exhibition, e	ducation, or resea	rch in furtherance of public se	rvice, j	provide the following amounts
	relating to these it	rems:				
	(i) Revenue inclu	Ided in Form 990, Part VIII, line 1				\$
		ed in Form 990, Part X				\$
2	If the organization	received or held works of art, historical tre	easures, or other s	imilar assets for financial gain,	provic	le
	-	unts required to be reported under SFAS 1		-		
а		l in Form 990, Part VIII, line 1				\$
b	Assets included ir	n Form 990, Part X				\$
	5D · -		- (			0-4-44-D/E
LHA 43205 10-01-	1 -	eduction Act Notice, see the Instruction	s for Form 990.			Schedule D (Form 990) 2014

Part.III       Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets@contuned)         Using the organization sacuistion, accession, and other records, check any of the following that are a significant use of its collection items       (check all that apply: <ul> <li>Control that apply:</li> <li>Control that apply:</li> <li>Provide a description of the organization solectors and explain how they further the organization's exempt purpose in Part XIII.</li> </ul> Provide a description of the organization solectors and explain how they further the organization's accession?         Yes         No           Part III         Escription of the organization solectors and explain how they further the organization's accession?         Yes         No           Part III         Escription of the organization solectors and explain how they further the organization's accession?         Yes         No           Part IV         Escription of the organization accession of an instruction approximation's accession?         Yes         No           If "Yes," explain the arrangement in Part XIII and complete the following table:         Yes         No         If 'Yes,'' explain the arrangement in Part XIII.         Amount         Id         Amount           Controlutions         Goldman during the year         Id	Sche		<b>IVIRONMENTA</b>						42-14			age <b>2</b>
icheck all tait apply:       icheck all tait apply:         a       Deble exhibition       icheck         b       Scholarly research       icheck         c       Previde acception of the organization sciencions and explain how they further the organization's exempt purpose in Part XIII.         5       During the year, did the organization sciencions and explain how they further the organization's exempt purpose in Part XIII.         6       Derived acception of the organization sciencions and explain how they further the organization's exempt purpose in Part XIII.         7       Distribution form 990, Part X, line 21.         1a       Is the organization angent, trustee, custodian or other intermediary for contributions or other assets not included on Form 900, Part X, line 21.         1a       Is the organization angent, trustee, custodian or Form 900, Part X, line 21.         1a       Detto fundue an amount on Form 900, Part X, line 21.         1a       Detto fundue an amount on Form 900, Part X, line 21.         1b       Detto fundue an amount on Form 900, Part X, line 10.         Part V       Endowment Funds. Complete the organization include an amount on Form 900, Part X, line 10.         1a       Beginning of year balance       icheck here if the explanation include an amount on Form 900, Part X, line 10.         1a       Beginning of year balance       icheck here if the explanation has been provided in Part XIII. <t< th=""><th>Par</th><th>t III Organizations Maintaining (</th><th>Collections of A</th><th>rt, Histo</th><th>rical Tr</th><th>easures, c</th><th>or Othe</th><th>er Simila</th><th>ar Asse</th><th><b>ts</b>(contir</th><th>nued)</th><th></th></t<>	Par	t III Organizations Maintaining (	Collections of A	rt, Histo	rical Tr	easures, c	or Othe	er Simila	ar Asse	<b>ts</b> (contir	nued)	
a Public schuttion de location of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  5 During the year, did the organization solid or receive donations of art. historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answerd "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 900, Part X, line 21.  1 Is the organization answerd "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 900, Part X, line 21.  2 Beginning balance  2 Beginning balance  4 Additions during the year  5 Beginning balance  5 Beginning of year balance  5 Beginning of year balance  5 Contributions 5 Beginning of year balance  5 Contributions 5 Beginning of year balance 5 Beginning	3	Using the organization's acquisition, access	ion, and other record	ds, check a	any of the	following tha	t are a s	ignificant ι	use of its	collectio	n item	s
b       Scholarly research       e       Other         c       Prevention for future generations       Provide a description of the organization science of art. historical treasures, or other similar assets       to be soft the organization collection?       Yes       No         Part M       Escrow and CutStodial Arrangements. Complete if the organization collection?       Yes       No         Part M       Escrow and CutStodial Arrangements. Complete if the organization collection?       Yes       No         In Is the organization angent, trustee, cutStodial or other intermediary for contributions or other assets not included on form 900, Part X, line 21.       Is the organization angent, trustee, cutStodial or other intermediary for contributions or other assets not included on form 900, Part X, line 21.       Amount       Is another asset on the intermediary for contributions or other assets not included on form 900, Part X, line 21.       Amount       Is another asset on the intermediary for contributions or other assets not included on form 900, Part X, line 21. for escrow or cutstodial account liability?       Yes       No         b       If 'Yes,' explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.       Yes       No         Part V       Endowment Funds. Complete three organization include an amount on Form 900, Part X, line 10.       Image: part asset (d) Three years back id organization include asing programs       Image: part asset back ide)		(check all that apply):										
c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization answered "Yes" to Form 990, Part X, line 9.7  Fart IV Exported an amount on Form 990, Part X, line 21. 1 Is the organization an agent, tustee, custodial or other intermediary for contributions or other assets not included on Form 990, Part X / Ites 21. 1 Is the organization angement in Part XIII and complete the following table:  C Beginning balance C Beginning of year balance C Beginning balance C Beginning of year balance C Beginning balance C Beginning balance C Beginning of year balance C Beginning b	а	Public exhibition	c	<b>1</b> 🖂 Lo		• • •						
Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.     During the year, did the organization's collection?	b	Scholarly research	e	e 🗌 Of	ther							
S During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets     to be solid to riske funds refine than to be maintained as part of the organization answered "Yes" to Form 990, Part IV, line 9, or     reported an amount on Form 990, Part X, line 21.     Is the organization angement in Naske, custodial or other intermediary for contributions or other assets not included     on Form 990, Part X7     leginning balance     Is the organization angement in Part XIII and complete the following table:     Amount     d Additions during the year     Intermediary for contributions or outper assets not included     on Form 990, Part X7     Amount     d Additions during the year     Intermediary for contributions     Intermediary for contributions     d Additions during the year     Intermediary for explanation     aneword or custodial account tability?     Ves     No     b If "Yes", explain the arrangement in Part XIII     Additions     during the year explanation answered "Yes" to Form 990, Part X, line 21, for escrow or custodial account tability?     Ves     No     b If "Yes" to Form 990, Part X, line 21, for escrow or custodial account tability?     Ves     No     b If "Yes" to Form 990, Part X, line 21, for escrow or custodial account tability?     Intermediary for a balance     (a) Current year     (b) Prior year     (c) Two years back     (d) Three years back     (e) Four years back     (e) Four years back     (d) Four years back     (e) Four years back     (d) Four years back     (e) Four years back     (d) Four years back     (d) Four years back     (e) Four years back     (d) Four years back     (e) Four years back     (d) Four years back     (e) Four years back     (d) Three years back     (e) Four years back     (d) Foury years back     (d) Four years back	С	Preservation for future generations										
tops sold to raise funds rather than to be maintained as part of the organization sourced 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.         Tay Is the organization an agent, furstee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X       No.         Description of the intermediary for contributions or other assets not included on Form 990, Part X, line 21.       Amount         C Beginning balance       Intermediary for contributions or other assets not included on Form 990, Part X, line 21.       Amount         C Beginning balance       Intermediary for contributions or output assets not included an amount on Form 990, Part X, line 21. for escrow or custodial account liability?       Ves       No         Data bit the organization include an amount on Form 990, Part X, line 21. for escrow or custodial account liability?       Ves       No         Part V       Endowment Funds. Complete it the organization answered 'Yes' to Form 990, Part IV, line 10.       Intervesting and the organization include an amount on Form 990, Part X, line 21. for escrow or custodial account liability?       Ves       No         Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         a Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         A othe the expanditures for fa	4	Provide a description of the organization's c	ollections and explai	in how the	y further t	he organizati	on's exe	mpt purpo	se in Par	t XIII.		
Part IV       Escrow and Custodial Arrangements. Complete if the organization answerd 'Yes' to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X. line 21.         Ta is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X. line 21.       Image: Contributions of the organization and agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X. line 21.       Image: Contributions of Control Contrel Control Control Conter Control Control Conter Control Control C	5								_	-		-
reported an amount on Form 990, Part X, line 21.         1a is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X, line 21.         1a is the organization include an amount on Form 990, Part X, line 21. for escrew or custodial account liability?       Ves       No         1d       1d       1d       1d       1d         2 Both organization include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?       Ves       No         b H 'ryes, 'explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.       Image: Comparisation include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?       Ves       No         b H 'ryes, 'explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.       Image: Comparisation include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?       Ves       No         b Contributions       Image: Comparisation include an amount on Form 990, Part X, line 21, for escrew or custodial account liability?       Ves       No         a Beginning of year balance       Image: Comparisation include an amount on Form 990, Part X, line 21, for escrew or custodial account (a) held as:       a contor scholarships       Image: Comparisation include and programs       Image: Comparisation include and programs       Image: Comparisation include and programs       Image: Comparisation and programs       Image:	_											No
1a       Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X       Ives       No         b       If "Yes," explain the arrangement in Part XIII and complete the following table:       Image: Complete able:       Im	Par		•	ete if the o	rganizatio	n answered '	'Yes" to	Form 990,	, Part IV, I	ine 9, or		
on Form 990, Part X?       Yes       No         b If 'Yes,'' explain the arrangement in Part XIII and complete the following table:       Amount         c Beginning balance       1d         d Additions during the year       1d         e Distributions during the year       1d         e Distributions during the year       1d         d End the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b If 'Yes,'' explain the arrangement in Part XIII. Check here if the esciparation has been provided in Part XIII       Yes       No         b If 'Yes,'' explain the arrangement in Part XIII. Check here if the esciparation has been provided in Part XIII       Yes       No         b Contributions       (a) Current year       (b) Prior year       (c) Three years back       (e) Four years back         a Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         c Net investment earnings, gains, and losses		· ·										
b If "Yes," explain the arrangement in Part XIII and complete the following table:	1a									1		1
c       Beginning balance       Id         d       Additions during the year       Id         e       Distributions during the year       Id         2       Distributions during the year       If         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b       If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.       Image: Check here if the explanation has been provided in Part XIII.       Image: Check here if the explanation has been provided in Part XIII.         Part V       Enclowment Funds. Complete if the organization answered "Yes" to Form 990, Part X, line 10.       Image: Check here if the explanation has been provided in Part XIII.         1a       Beginning of year balance       (a) Current year (b) Prior year (c) Two years back (c) Three years back in the part of the organization answered "Yes" to Form 990, Part X, line 10.         1a       Beginning of year balance       (b) Prior year (c) Two years back in the part of the organization answered "Yes" to Form 990, Part X, line 10.         2       Provide the estimated percentage of the current year end balance (line 1g, column (a) held as:       Bead designated or quasisendowment ▶{96} %         4	_								L	∐ Yes		] No
c       Beginning balance       Id         d       Additions during the year       Id         d       Distributions during the year       Id         f       Ending balance       If         d       Distributions during the year       Id         f       Ending balance       If         d       Distributions during the year       Id         f       Ending balance       If         d       Distributions during the year       Id         e       Distributions       Image: State Sta	b	If "Yes," explain the arrangement in Part XIII	I and complete the fo	bliowing tai	ble:					•		
d Additions during the year       1d         e Distributions during the year       1e         1       1f         2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b If Yes, "explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII       Yes       No         Part V       Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.       Image: the provide the arrangement in Part XIII. Check here if the organization answered "Yes" to Form 990, Part X, line 10.         1a Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         1a Grants or scholarships       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         1 Administrative expenses       (a) Grants or scholarships       (b) Prior year       (c) Two years back       (e) Four years back         2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:       (a) Grants or scholarships       (b) Prior year       %         2 Foroid fy ear balance										Amoun		
e       Distributions during the year       1e         f       Ending balance       1f         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Yes       No         b       If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.       Image: Check here if the explanation has been provided in Part XIII.       Image: Check here if the explanation has been provided in Part XIII.         Part V       Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.       Image: Check here if the explanation has been provided in Part XIII.       Image: Check here if the explanation has been provided in Part XIII.         a       Beginning of year balance       Image: Check here if the explanation has been provided in Part XIII.       Image: Check here is the explanation has been provided in Part XIII.         b       Contributions       Image: Check here if the organization answered "Yes" to Form 990, Part IV, line 10.         c       Other expenditures for facilities       Image: Check here balance       Image: Check here balance         c       Other expenditures for facilities       Image: Check here balance       Image: Check here balance         g       End dyear balance       Image: Check here balance       Image: Check here balance       Image: Check here balance         g       End dyear balance												
f       Ending balance       1f         2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?       Ves       No         b       If "Ves", explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII       Image: Complete if the organization answered "Yes" to Form 990, Part IV, line 10.         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         b       Contributions       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         c       Net investment earnings, gains, and losses       (b) Contributions       (c) Two years back       (d) Three years back       (e) Four years back         d       Grants or scholarships       (c) Two years back       (d) Three years back       (e) Four years back         c       Other expenditures for facilities       (c) Two years back       (d) Three years back       (e) Four years         g       End of year balance       (m) Prior year       (c) Two years back       (e) Four years         g       End of year balance       (m) Prior year       (f) Three years back       (f) Three years back         g       End of year balance       (m) Prior year       (f) Completing t												
2a       Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?												
b       H "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.         Part V       Endowment Funds. Complete if the organization answered "Yes" to Form 980, Part IV, line 10.         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         b       Contributions       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         c       Other expenditures for facilities       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         g       End of year balance       (b) Prior year       (c) Two years back       (d) Three years back       (d) Three years back         g       End of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         g       End of year balance       (a) Column (a) beld as:       (a) Column (a) held as:       (a) Column (a) held as:       (a) Column (a) held as:         a       Board designated or quasi-endowment >										Voc		No
Part V       Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.         1a       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         b       Contributions       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         c       Net investment earnings, gains, and losses       (a) Current year       (b) Prior year       (c) Two years back       (c) Two years back       (e) Four years back         c       Net investment earnings, gains, and losses       (a) Current year       (b) Prior year       (c) Two years back       (c) Puryears back									······ ـــــ			1
Ia       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (d) Three years back       (e) Four years back         Ia       Beginning of year balance       (a) Current year       (b) Prior year       (c) Two years back       (e) Four years back         Ia       Contributions       (b) Contributions       (c) Two years back       (c) Three years back       (e) Four years back         Ia       Contributions       (c) Two years back       (c) Two years back       (e) Four years back         Ia       Contributions       (c) Two years back       (c) Two years back       (e) Four years back         Ia       Contributions       (c) Two years back       (c) Two years back       (c) Two years back       (c) Four years back         Ia       Contributions       (c) Two years back       (c) Two years back       (c) Four years back       (c) Four years back         Ia       Contributions       (c) Contributions       (c) Four years back       (c) Fo									<u></u>			
1a Beginning of year balance   b Contributions   c Net investment earnings, gains, and losses   d Grants or scholarships   e Other expenditures for facilities   and programs		·							ears back	(e) Four	vears	back
b Contributions   c Net investment earnings, gains, and losses   d Grants or scholarships   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i   i i<	1a	Beginning of year balance		(1)		(-/ )		(-) )		(-)	5	
c Net investment earnings, gains, and losses   d Grants or scholarships   e Other expenditures for facilities   and programs i   f Administrative expenses   g End of year balance   2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:   a Board designated or quasi-endowment ▶  %   b Permanent endowment ▶  %   c Temporarily restricted endowment ▶  %   d The percentages in lines 2a, 2b, and 2c should equal 100%.   3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (ii) related organizations 3a(ii) 3a(ii) 4 Description of property (a) Cost or other bals (other) bals (other) 18 August (and the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other bals (other) bals (other) (b) Cost or other bals (other) 18 A; 392. 8, 966. 9, 426. 9, 426.												
d Grants or scholarships												
e       Other expenditures for facilities and programs												
and programs   f Administrative expenses   g End of year balance   2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:   a Board designated or quasi-endowment ▶  %   b Permanent endowment ▶  %   c Temporarily restricted endowment ▶  %   b Permanent endowment ▶  %   c Temporarily restricted endowment ▶  %   b Remanent endowment ▶  %   c Temporarily restricted endowment ▶  %   f (i) unrelated organizations   (ii) unrelated organizations   (iii) related organizations   (iii) related organizations   b If "Yes" to 3a(ii), are the related organization slisted as required on Schedule R?   d Describe in Part XIII the intended uses of the organization's endowment funds.   Part VI   Land, Buildings, and Equipment.   Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.   Description of property   (a) Cost or other   b Buildings   c Leasehold improvements   d Equipment   e Land   b Buildings   c Leasehold improvements   d Equipment   90, Part X, column (B), line 10c.   p 9, 4266.	е											
f       Administrative expenses												
g End of year balance   2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:   a Board designated or quasi-endowment ▶  %   b Permanent endowment ▶  %   c Temporarily restricted endowment ▶  %   mapped percentages in lines 2a, 2b, and 2c should equal 100%.   3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:   (i) unrelated organizations   (ii) related organizations   (iii) related organizations   3a(ii)   3b I   Yes to 3a(ii), are the related organization's endowment funds.     Part VI   Land, Buildings, and Equipment.   Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.   Description of property   (a) Cost or other   b Buildings   c Leasehold improvements   a Land   b Buildings   c Leasehold improvements   b Buildings 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)   b 9, 4226.	f											
2       Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:         a       Board designated or quasi-endowment ▶%         b       Permanent endowment ▶%         c       Temporarily restricted endowment ▶%         3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by: <ul> <li>(i) unrelated organizations</li></ul>												
b       Permanent endowment ▶      %         c       Temporarily restricted endowment ▶      %         The percentages in lines 2a, 2b, and 2c should equal 100%.       3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by:	•			ce (line 1g,	column (a	a)) held as:						
c       Temporarily restricted endowment ▶%         The percentages in lines 2a, 2b, and 2c should equal 100%.       3a         3a       Are there endowment funds not in the possession of the organization that are held and administered for the organization by:	а	Board designated or quasi-endowment		_%								
The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" to Sa(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other b Buildings c Leasehold improvements d Equipment 4 Data (d) Book value 5 Description (e) must equal Form 990, Part X, column (B), line 10c.)	b	Permanent endowment	_%									
3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:       Yes       No         (i) unrelated organizations       3a(i)       is	с	Temporarily restricted endowment	%									
by: (i) unrelated organizations (ii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds. Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10. Description of property (a) Cost or other b Buildings c Leasehold improvements d Equipment e Other Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)		The percentages in lines 2a, 2b, and 2c sho	uld equal 100%.									
(i)       unrelated organizations       3a(i)         (ii)       related organizations       3a(ii)         b       If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?       3b         4       Describe in Part XII the intended uses of the organization's endowment funds.         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (other)       (c) Accumulated depreciation         1a       Land       1       1         b       Buildings       1       1         c       Leasehold improvements       1       1         d       Equipment       1       8, 966.       9, 426.         e       Other       90, Part X, column (B), line 10c.)       9, 426.	3a	Are there endowment funds not in the posse	ession of the organiz	ation that	are held a	nd administe	red for t	he organiz	ation	r		
(ii) related organizations       3a(ii)         b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?       3b         4 Describe in Part XIII the intended uses of the organization's endowment funds.       3b         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (other)       (c) Accumulated depreciation         1a Land       b Buildings		-									Yes	No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?3b3b3b										3a(i)		
4 Describe in Part XIII the intended uses of the organization's endowment funds.         Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)         b Buildings       (d) Book value         c Leasehold improvements       18,392.         d Equipment       18,392.         e Other       990, Part X, column (B), line 10c.)         Part VI       9,426.		(ii) related organizations										
Part VI       Land, Buildings, and Equipment.         Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation       (d) Book value         1a       Land	b									3b		
Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.         Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation       (d) Book value         1a       Land				owment fu	nds.							
Description of property       (a) Cost or other basis (investment)       (b) Cost or other basis (other)       (c) Accumulated depreciation       (d) Book value         1a Land	Par					F 000	<b>D</b>					
basis (investment)       basis (other)       depreciation         1a Land				· · ·					.	(		
b Buildings		Description of property			. ,		• •		d	(d) Boo	k value	9
c Leasehold improvements       d Equipment       18,392.       8,966.       9,426.         e Other       d Equipment       d Equipment       0       0         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       9,426.	1a	Land										
c Leasehold improvements       d Equipment       18,392.       8,966.       9,426.         e Other       d Equipment       d Equipment       0       0         Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)       9,426.												
e Other											<u> </u>	<u> </u>
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) 9,426.	d	Equipment			1	8,392.		8,96	56.		9,4	26.
											<u> </u>	<u></u>
	Tota	. Add lines 1a through 1e. (Column (d) must e	equal Form 990, Part	X, column	n (B), line 1	0c.)						-

Schedule D (Form 990) 2014

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ĺ	Part VII	Investments - C	Other Sec	urities.	
	Schedule D	(Form 990) 2014	IOWA	ENVIRONMENTAL	COUNCIL

Complete if the organization answered "Yes"	to Form 990, Part IV, line -	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	to Form 990, Part IV, line ⁻	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		

(4) (5) (6) (7) (8) (9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶

#### Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

#### Part X Other Liabilities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII 🚺

Schedule D (Form 990) 2014

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Sche	dule D (Form 990) 2014 IOWA ENVIRONMENTAL COUNC	IL		42-	1436090	Page <b>4</b>
Pa	t XI Reconciliation of Revenue per Audited Financial State	ements With				
	Complete if the organization answered "Yes" to Form 990, Part IV, line	12a.				
1	Total revenue, gains, and other support per audited financial statements			1	727	,038.
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				
с	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)		14,647.			
е	Add lines 2a through 2d			2e		,647.
3	Subtract line 2e from line 1			3	712,	,391.
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		,391.
Pa	t XII Reconciliation of Expenses per Audited Financial Stat		h Expenses per	Retu	ırn.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line	12a.				
1	Total expenses and losses per audited financial statements			1	660	,384.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a				
b	Prior year adjustments	2b				
С	Other losses					
d			14,647.			<i>с</i> . <del>–</del>
е	Add lines 2a through 2d			2e	14	,647.
3	Subtract line 2e from line 1			3	645	,737.
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				
С	Add lines <b>4a</b> and <b>4b</b>			4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	645	,737 <b>.</b>
Pa	t XIII Supplemental Information.					

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

#### PART X, LINE 2:

ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA						
REQUIRE MANAGEMENT TO EVALUATE TAX POSITIONS TAKEN BY THE COUNCIL AND						
RECOGNIZE A TAX LIABILITY OR ASSET FOR AN UNCERTAIN POSITION THAT MORE						
LIKELY THAN NOT WOULD NOT BE SUSTAINED UPON EXAMINATION BY THE INTERNAL						
REVENUE SERVICE. MANAGEMENT HAS EVALUATED THEIR MATERIAL TAX POSITIONS AND						
DETERMINED THERE ARE NO UNCERTAIN POSITIONS TAKEN OR EXPECTED TO BE TAKEN						
THAT WOULD REQUIRE RECOGNITION OF A LIABILITY OR ASSET OR DISCLOSURE IN						
THE FINANCIAL STATEMENTS.						

#### PART XI, LINE 2D - OTHER ADJUSTMENTS:

	VENT- ANNUAL	CONFERENCE		14,647.
432054 10-01-14				Schedule D (Form 990) 2014
			32	

Schedule D			-	ENVIF
Part XIII	Supple	mental	Information	(continued)

# PART XII, LINE 2D - OTHER ADJUSTMENTS: SPECIAL EVENT- ANNUAL CONFERENCE 14,647. Schedule D (Form 990) 2014 432055 10-01-14 33 11010807 758194 16-4734-001 2014.04000 IOWA ENVIRONMENTAL COUNCIL 16-47341

SCHEDULE G (Form 990 or 990-EZ)	Complete if the	ental Information Regarding organization answered "Yes" to F	orm 9	990, P	art IV, lines 17, 18, o			OMB No. 1545-0047
Department of the Treasury Internal Revenue Service		organization entered more than \$1 Attach to Form 990	or Fo	rm 99	0-EZ.			Open to Public Inspection
Name of the organization	Information a	bout Schedule G (Form 990 or 990-EZ)	and its	instru	ctions is at <u>www.irs.g</u>	iov/fo	Employer id	lentification number
		VIRONMENTAL COUNCI					42-143	
	omplete this par	<ul> <li>Complete if the organization answe t.</li> </ul>	ered "Y	'es" to	Form 990, Part IV, li	ine 1	7. Form 990-E	Z filers are not
<ul> <li>a Mail solicitation</li> <li>b Internet and e</li> <li>c Phone solicitation</li> <li>d In-person soli</li> <li>2 a Did the organization key employees lister</li> </ul>	ons email solicitations ations citations have a written c d in Form 990, P highest paid indi	f ☐ Solicitat g ☐ Special or oral agreement with any individual Part VII) or entity in connection with p ividuals or entities (fundraisers) purs	tion of tion of fundra (inclue rofess	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, trus iundraising services?	stees	Ye Ye	
(i) Name and address or entity (fundr		(ii) Activity	(iii) fundr have c or con contribu	itrol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by fundraiser ted in col. <b>(i)</b>	
			Yes	No		ļ		
		on is registered or licensed to solicit o	contrib	butions	s or has been notified	d it is	exempt from	registration
LHA For Paperwork Red	duction Act Not	ice, see the Instructions for Form	990 or	990-l	EZ. S	Sched	dule G (Form	990 or 990-EZ) 2014

#### Schedule G (Form 990 or 990 EZ) 2014 IOWA ENVIRONMENTAL COUNCIL

42-1436090 Page 2

Part II	Fundraising Ev	ents. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000	
		contributions and gross income on Form 990 FZ, lines 1 and 6b. List events with gross receipts greater than \$5.00	

		or furfulation geven contributions and gr			svente with groop recei	513 greater than \$5,000.
			(a) Event #1 ANNUAL CONFERENCE	<b>(b)</b> Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
ne			(event type)	(event type)	(total number)	
Revenue	1	Gross receipts	37,152.			37,152.
	2	Less: Contributions				
	~		37,152.			37,152.
	3	Gross income (line 1 minus line 2)	57,152.			57,152.
	4	Cash prizes				
	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
ect Ex	7	Food and beverages				
Dir	0	Entortainmont				
	8 9	Entertainment Other direct expenses				14,647.
		Direct expense summary. Add lines 4 through	h 9 in column (d)			14,647.
Pa	11 rt	Net income summary. Subtract line 10 from I III Gaming. Complete if the organization	ine 3, column (d)	000 Part IV line 10 or r		22,505.
		\$15,000 on Form 990-EZ, line 6a.	answered res toronn	1990, Part IV, inte 19, 011	eported more than	
ē			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(,3-	bingo/progressive bingo	(-,	col. (a) through col. (c))
Re	1	Gross revenue				
ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
	_		Yes%	Yes%	└── Yes %	
	6	Volunteer labor	No	└── No	No No	
	7	Direct expense summary. Add lines 2 through	h 5 in column (d)		▶	
	8	Net gaming income summary. Subtract line 7	7 from line 1, column (d)			
-	_					
		ter the state(s) in which the organization condu he organization licensed to conduct gaming a		states?		Yes No
		No," explain:		States .		
10a	We	ere any of the organization's gaming licenses re	evoked suspended or te	erminated during the tax	/ear?	Yes No
		Yes," explain:				
43208	32 08	3-28-14			Schedule G (Fo	rm 990 or 990-EZ) 2014

Schedule G (Form 990 or 990-E2) 2014 IOWA ENVIRONMENTAL COUNCIL       42-         11 Does the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming activity conducted in:       11         12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?       13         13 Indicate the percentage of gaming activity conducted in:       a The organization's facility       b         b An outside facility       b An outside facility       c         14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:       Name ▶         Address ▶	
12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?   13 Indicate the percentage of gaming activity conducted in:   a The organization's facility   b An outside facility   14   Enter the name and address of the person who prepares the organization's gaming/special events books and records:   Name ▶   Address ▶   If a Does the organization have a contract with a third party from whom the organization receives gaming revenue? If a Does the organization have a contract with a third party from whom the organization receives gaming revenue? If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue received by the organization ▶ \$ If "Yes," enter name and address of the third party: Name ▶ Address ▶ If Gaming manager information: Name ▶ Gaming manager compensation ▶ \$ Description of services provided ▶ Employee Independent contractor If Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	
13       Indicate the percentage of gaming activity conducted in:         a The organization's facility	Yes 🗆 N
13 Indicate the percentage of gaming activity conducted in:         a The organization's facility         b An outside facility         44 Enter the name and address of the person who prepares the organization's gaming/special events books and records:         Name	
<ul> <li>b An outside facility</li></ul>	
I4       Enter the name and address of the person who prepares the organization's gaming/special events books and records:         Name ▶	13a
Name ▶	13b
Address ▶         I5a Does the organization have a contract with a third party from whom the organization receives gaming revenue?         b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$         c If "Yes," enter name and address of the third party:         Name ▶         Address ▶         I6 Gaming manager information:         Name ▶         Gaming manager compensation ▶ \$         Description of services provided ▶	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?         b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount of gaming revenue retained by the third party ▶\$         c If "Yes," enter name and address of the third party:         Name ▶	
<ul> <li>b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ and the amount of gaming revenue retained by the third party ▶\$</li> <li>c If "Yes," enter name and address of the third party:</li> <li>Name ▶</li> <li>Address ▶</li> <li>16 Gaming manager information:</li> <li>Name ▶</li> <li>Gaming manager compensation ▶ \$</li> <li>Description of services provided ▶</li> <li>Director/officer □ Employee □ Independent contractor</li> <li>17 Mandatory distributions:</li> <li>a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?</li> </ul>	
of gaming revenue retained by the third party ▶\$ c If "Yes," enter name and address of the third party: Name ▶	Yes 🔲 M
of gaming revenue retained by the third party ▶\$ c If "Yes," enter name and address of the third party: Name ▶	
c If "Yes," enter name and address of the third party:     Name ▶     Address ▶     16 Gaming manager information:     Name ▶     Gaming manager compensation ▶ \$     Gaming manager compensation ▶ \$     Description of services provided ▶     Description of services provided ▶     Image:	
Name     Address     Address     Address     Gaming manager information:     Name     Gaming manager compensation     \$	
Address ▶	
16 Gaming manager information:   Name   Name   Gaming manager compensation   \$   Description of services provided       Director/officer   Employee   Independent contractor   17 Mandatory distributions:   a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	
Name  Gaming manager compensation  \$ Description of services provided  Description of services provided  Director/officer  Employee Independent contractor  17 Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	
Gaming manager compensation ▶ \$         Description of services provided ▶            Director/officer         Employee         Independent contractor         17         Mandatory distributions:         a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	
Description of services provided ►	
Description of services provided ► Director/officer □ Employee □ Independent contractor  17 Mandatory distributions: a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	
<ul> <li>Director/officer</li> <li>Employee</li> <li>Independent contractor</li> <li>Mandatory distributions:         <ul> <li>a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?</li> </ul> </li> </ul>	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	
retain the state gaming license?	
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	Yes I
organization's own exempt activities during the tax year 🕨 \$	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III,	lines 9, 9b, 10b, 15b
15c, 16, and 17b, as applicable. Also provide any additional information (see instructions).	
	m 990 or 990-EZ) 20
36 10807 758194 16-4734-001 2014.04000 IOWA ENVIRONMENTAL COUNCI	L 16-4734

42-1436090	Page 4
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S	Schedule G	(Form 990 or 990-EZ)	IOWA	ENVIRONMENTAL	COUNCIL
Γ	Part IV	Supplemental Ir	nformation (	continued)	

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							Sc	chedule G (Fo	orm 990 or 990-EZ

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service		<b>Go</b> Compl	arants and Oth vernments, an lete if the organizatio	nd Individual on answered "Yes" Attach to For	<b>ls in the Ŭn</b> " to Form 990, Pa m 990.	ited States rt IV, line 21 or 22.	0	OMB No. 1545-0047
Name of the organization						www.iis.goviioiiiiaa	0.	Employer identification number
		RONMENTAL	COUNCIL					42-1436090
<ol> <li>Does the organization criteria used to award</li> <li>Describe in Part IV the</li> </ol>	I the grants or assisted or assisted as a set or a set of the set	to substantiate the stance? ocedures for moni	e amount of the grants toring the use of grant zations and Domesti	funds in the Unite	d States.		· · · · · · · · · · · · · · · · · · ·	X Yes No
		-	be duplicated if addit					
<b>1 (a)</b> Name and addres or governn		<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
ENVIRONMENTAL LAW ANI CENTER - 35 EAST WACH SUITE 1600 - CHICAGO	KER DRIVE,	36-3866530	501 (C) (3)	8,930.	0.	воок		ENERGY EFFICIENCY
		-	I ganizations listed in th	ne line 1 table				<u> </u>
3 Enter total number of LHA For Paperwork Red	¥						·····	Schedule I (Form 990) (2014)

Part III

(c) Amount of

cash grant

(d) Amount of noncash assistance

IOWA ENVIRONMENTAL COUNCIL Schedule I (Form 990) (2014) Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

(b) Number of

recipients

PART I, LINE 2:

GRANT FUNDS ARE REVIEWED AND MONITORED BY THE COUNCIL'S BOARD OF DIRECTORS

THROUGHOUT THE GRANT PERIOD.

(f) Description of non-cash assistance

(e) Method of valuation (book, FMV, appraisal, other)

Page 2

SCHEDULE O (Form 990 or 990-EZ) Department of the Treasury Internal Revenue Service	orm990.									
Name of the organization	IOWA ENVIRONMENTAL COUNCIL	Employer identification number 42-1436090								
FORM 990, PA	RT I, LINE 1, DESCRIPTION OF ORGANIZATION MIS	SION:								
TO PROMOTE, SUPPORT AND ACHIEVE PROTECTION OF THE ENVIRONMENT AND										
CONSERVATION OF NATURAL RESOURCES, PRIMARILY IN IOWA, BOTH DIRECTLY AND										
THROUGH COORDINATION OF THE ENVIRONMENTAL COMMUNITY.										
FORM 990, PA	RT VI, SECTION A, LINE 6:									
THE ORGANIZA	TION HAS MEMBERS.									
FORM 990, PA	RT VI, SECTION A, LINE 7A:									
THE ORGANIZA	FION'S MEMBERS HAVE THE ABILITY TO ELECT MEME	ERS OF THE BOARD								
OF DIRECTORS.										
FORM 990, PART VI, SECTION B, LINE 11:										
MANAGEMENT REVIEWS FORM 990 WITH THE FINANCE COMMITTEE. FORM 990 IS MADE										
AVAILABLE TO ALL BOARD MEMBERS BEFORE FILING WITH THE IRS.										
FORM 990, PA	RT VI, SECTION B, LINE 12C:									
THE CONFLICT OF INTEREST POLICY IS REVIEWED BY THE MEMBERS OF THE BOARD OF										
DIRECTORS AND	WALLY. ANY CONFLICTS ARE DISCLOSED.									
FORM 990, PA	RT VI, SECTION B, LINE 15:									
SALARY INCRE	ASES FOR EMPLOYEES ARE SUGGESTED BY THE EXECU	TIVE DIRECTOR AND								
SALARY INCRE	ASES FOR THE EXECUTIVE DIRECTOR ARE SUGGESTED	BY THE BOARD								
PRESIDENT.	THE BOARD OF DIRECTORS APPROVES THE SUGGESTED	SALARY INCREASES								
FOR BOTH EMPLOYEES AND THE EXECUTIVE DIRECTOR.										

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 432211 08-27-14 40 11010807 758194 16-4734-001 2014.04000 IOWA ENVIRONMENTAL COUNCIL 16-47341

Schedule O (Form 990 or 990-EZ) (2014)

Name of t	he organ		A ENVIRON	MENTAL	COUNCI	L		Em	ployer identification 42-143609	on num 0
FORM	990,	PART VI	, SECTION	C, LI	NE 19:					
IOWA	ENVI	RONMENTA	L COUNCIL	MAKES	ITS GC	VERNING	DOCUMEN	ITS, CO	NFLICT OF	
INTER	EST	POLICY A	ND FINANC	IAL ST	ATEMENT	'S AVAIL	ABLE UPC	N REQU	JEST.	
32212 18-27-14								Schedule (	) (Form 990 or 990	)-EZ) (2