Form **8868** 

(Rev. January 2025)

### Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

File a separate application for each return.

Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Part I - Identification Name of exempt organization, employer, or other filer, see instructions. Taxpayer identification number (TIN) Type or **Print** ENVIRONMENTAL INITIATIVE 41-1718834 File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date for filina vour 807 BROADWAY ST., NE, 230 return. See instructions. City, town or post office, state, and ZIP code. For a foreign address, see instructions. MINNEAPOLIS, MN 55413 Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1 Application Is For Return **Application Is For** Return Code Code Form 990 or Form 990-EZ 01 Form 4720 (other than individual) 09 Form 4720 (individual) 03 Form 5227 10 Form 990-PF 04 Form 6069 11 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 8870 12 Form 990-T (trust other than above) 06 Form 5330 (individual) 13 Form 5330 (other than individual) 07 14 Form 990-T (corporation) Form 1041-A 80 Form 990-T (governmental entities) 15 After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330. • If this application is for an extension of time to file Form 5330, you must enter the following information. Plan Name Plan Number Plan Year Ending (MM/DD/YYYY) Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions) The books are in the care of BILL LEMIEUX 807 BROADWAY ST., NE, SUITE 230 - MINNEAPOLIS, MN 55413 Telephone No. (612)425-4929 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) . If this is for the whole group, check this . If it is for part of the group, check this box ... and attach a list with the names and TINs of all members the extension is for. I request an automatic 6-month extension of time until NOVEMBER 15 , 20 25 , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year 20 24 or \_\_\_\_\_ , 20 \_\_\_\_ , and ending \_\_ tax year beginning If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return 2 Change in accounting period 3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. За If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3h Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

using EFTPS (Electronic Federal Tax Payment System). See instructions.

Form 8868 (Rev. 1-2025)

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# 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.

OMB No. 1545-0047

Department of the Treasury

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

A For the 2024 calendar year, or tax year beginning and ending C Name of organization D Employer identification number Check if applicable: Address change ENVIRONMENTAL INITIATIVE Name change 41-1718834 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Final return/ termin-ated 807 BROADWAY ST. NE 230 (612)334-3388 4,592,137. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return MINNEAPOLIS, MN 55413 H(a) Is this a group return Applica-tion pending F Name and address of principal officer: WHITNEY TERRILL Yes X No for subordinates? SAME AS C ABOVE **H(b)** Are all subordinates included? Yes Tax-exempt status: X 501(c)(3) 527 501(c) ( (insert no.) 4947(a)(1) or If "No," attach a list. See instructions WWW.ENVIRONMENTAL-INITIATIVE.ORG H(c) Group exemption number K Form of organization: X Corporation Trust Association Other L Year of formation: 1992 M State of legal domicile: MN Part I Summary Briefly describe the organization's mission or most significant activities: CATALYZE COLLABORATION ACROSS **Activities & Governance** PERSPECTIVES, POWER, AND SYSTEMS FOR SOCIAL EQUITY AND ENVR. HEALTH 2 if the organization discontinued its operations or disposed of more than 25% of its net assets. 16 3 Number of voting members of the governing body (Part VI, line 1a) 3 16 Number of independent voting members of the governing body (Part VI, line 1b) 4 22 5 Total number of individuals employed in calendar year 2024 (Part V, line 2a) 20 Total number of volunteers (estimate if necessary) 6 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a **b** Net unrelated business taxable income from Form 990-T, Part I, line 11 0. 7h **Prior Year Current Year** 4.486.997. 4,424,704. Contributions and grants (Part VIII, line 1h) 8 Revenue 100,517. 135,128. Program service revenue (Part VIII, line 2g) 43,429 25,528. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 2,164 6.777. 11 4,633,107 4,592,137. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 1,851,661. 1,717,044. 15 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. **b** Total fundraising expenses (Part IX, column (D), line 25) 3,311,482. 2,476,464. Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 5,163,143. 4,193,508. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -530,036. 398,629. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year End of Year** 5 3,114,968 3,178,567. Total assets (Part X, line 16) 1,189,043 854,013. 21 Total liabilities (Part X, line 26) 三年 1,925,925. 2,324,554. Net assets or fund balances. Subtract line 21 from line 20 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my 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. Whitney Timll 8/22/2025 Signature rodeoffices446. Date Sign WHITNEY TERRILL. TREASURER Here Type or print name and title Date PTIN Check Preparer's name Preparer's signature STEPHANIE MCCARTHY STEPHANIE MCCARTHY 08/21/25 P01805699 Paid CLIFTONLARSONALLEN LLP 41-0746749 Preparer Firm's name Firm's EIN 600 WASHINGTON AVENUE, SUITE 1800 Use Only Firm's address Phone no. (314) 925-4300 ST. LOUIS, MO 63101 X Yes May the IRS discuss this return with the preparer shown above? See instructions No

Form	1990 (2024) ENVIRONMENTAL INITIATIVE	41-1718834	Page <b>2</b>
Pa	rt III Statement of Program Service Accomplishments		<u> </u>
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	CATALYZE COLLABORATION ACROSS PERSPECTIVES, POWER, AND SYSTEMS FOR		
	SOCIAL EQUITY AND ENVIRONMENTAL HEALTH.		
	Did the organization undertake any significant program services during the year which were not listed o	n the	
_	prior Form 990 or 990-EZ?		Yes X No
	If "Yes," describe these new services on Schedule O.		103110
3	Did the organization cease conducting, or make significant changes in how it conducts, any program se	ervices?	Yes X No
•	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program service.	vices, as measured by expe	nses.
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations		
	revenue, if any, for each program service reported.		
4a		) (Revenue \$	0.)
	MIDWEST ROW CROP COLLABORATIVE: ADMINISTERED BY ENVIRONMENTAL		
	INITIATIVE, THE MIDWEST ROW CROP COLLABORATIVE EXPLORES AND IMPLEMENTS		
	NEW APPROACHES TO AGRICULTURAL CHALLENGES. THE COLLABORATIVE'S MEMBERS		
	WORK TOGETHER TO FIND SOLUTIONS THAT INCREASE PRODUCTIVITY WHILE		
	ENSURING SOIL HEALTH, PROTECTING WATER, ADDRESSING THE FACTORS		
	CONTRIBUTING TO CLIMATE CHANGE, AND SUPPORTING FARM FAMILIES IN THE		
	UPPER MISSISSIPPI RIVER BASIN.		
4b	(Code: ) (Expenses \$ 1,283,342. including grants of \$ 0.	) (Revenue \$	7,800.)
	CLEAN AIR MINNESOTA: CLEAN AIR MINNESOTA IS A DIVERSE COALITION OF AIR		
	QUALITY LEADERS CONVENED BY ENVIRONMENTAL INITIATIVE WORKING TOGETHER		
	TO REDUCE EMISSIONS FROM MOBILE SOURCES, SMALL BUSINESSES, AND WOOD		
	SMOKE. PARTNERS FORM TEAMS THAT COORDINATE, COLLABORATE, AND DEVELOP		
	SPECIFIC PROJECTS TO REDUCE EMISSIONS FROM MINNESOTA'S SMALLER,		
	WIDESPREAD AND LESS REGULATED SOURCES OF AIR POLLUTION WHICH CONTRIBUTE		
	NEARLY 75 PERCENT OF AIR POLLUTION EMISSIONS IN THE STATE. THE		
	ORGANIZATION'S CLEAN AIR WORK INCLUDES: PROJECT GREEN FLEET WHICH		
	REDUCES DIESEL EMISSIONS, PROJECT CAR WHICH PROVIDES AUTOMOBILE REPAIRS		
	FOR LOW-INCOME INDIVIDUALS, PROJECT STOVE SWAP THAT REDUCES EMISSIONS		
	FROM WOOD BURNING APPLIANCES, AND CLEAN AIR ASSISTANCE PROJECT WHICH		
	WORKS WITH SMALL BUSINESSES TO REDUCE AIR POLLUTION.		
4c	(Code:) (Expenses \$ 489,288. including grants of \$ 0.	) (Revenue \$	127,328.
	ENVIRONMENT AND NATURAL RESOURCES TRUST FUND COMMUNITY GRANTS AND		
	COMMUNITY ENGAGEMENT- ENVIRONMENTAL INITIATIVE AND RAINBOW RESEARCH		
	CONVENE A WORKING GROUP OF BIPOC AND RURAL LEADERS AND MAINSTREAM		
	ENVIRONMENTAL ORGANIZATIONS TO ADVOCATE FOR THE APPROXIMATELY \$25		
	MILLION PER YEAR COMMUNITY GRANTS PROGRAM FUNDED BY THE ENVIRONMENT AND		
	NATURAL RESOURCES TRUST FUND. THE WORKING GROUP COLLABORATES WITH THE		
	MINNESOTA DEPARTMENT OF NATURAL RESOURCES TO DESIGN THE COMMUNITY		
	GRANTS PROGRAM AND COORDINATES OUTREACH TO THE BIPOC AND RURAL		
	COMMUNITIES THAT WILL BE ELIGIBLE TO APPLY TO THE PROGRAM ONCE FUNDS		
	ARE AVAILABLE. THROUGH OTHER PARTNERSHIPS AND COMMUNITY ENGAGEMENT,		
	ENVIRONMENTAL INITIATIVE IS WORKING WITHIN ITSELF AND ACROSS DIFFERENCE		
	TO FACILITATE OPENNESS TO ADDRESS ENVIRONMENTAL, ECONOMIC, AND PUBLIC		
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ 510,113. including grants of \$ 0.) (Revenue \$	0.)	
4e	Total program service expenses 3,584,586.	,	

ENVIRONMENTAL INITIATIVE Form 990 (2024) 41-1718834

### Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, 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			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		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		Х
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	l	v	
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Λ	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446	х	
10-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i>	11f	Λ	
ıza	, , ,	12a	х	
h	Schedule D, Parts XI and XII	IZa		
b		12b		x
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional  Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	1-10		
~	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	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
<b>20</b> a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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 1? If "Yes," complete Schedule I. Parts I and II	21		X

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Form **990** (2024)

Page 3

41-1718834 ENVIRONMENTAL INITIATIVE Page 4 Form 990 (2024)

Ра	TTIV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
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		Х
b	71 71 1	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	l		
_	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			.,
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	1		
	Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			-
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	10	х	

	990 (2024) ENVIRONMENTAL INITIATIVE 41-171883	34	Р	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 22			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
За		За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
b	If "Yes," enter the name of the foreign country			
-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
ou	any contributions that were not tax deductible as charitable contributions?	6a		x
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	- Oa		-
b	were not tax deductible?	6b		
7		OD		
7	Organizations that may receive deductible contributions under section 170(c).	7-		х
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		Α.
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	l _		x
	to file Form 8282?	7c		_
d	If "Yes," indicate the number of Forms 8282 filed during the year	ł		v
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		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12	4		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	4		
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans	_		
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17	L	

Form **990** (2024)

If "Yes," complete Form 6069.

Form 990 (2024) ENVIRONMENTAL INITIATIVE 41-1718834 Page 6

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

	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			Х
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a16			
	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 on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 16			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		Х
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	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 on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	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	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	DIII I PMIPILY _ /612\425_4020			

Form **990** (2024)

55413

807 BROADWAY ST., NE, SUITE 230, MINNEAPOLIS,

ENVIRONMENTAL INITIATIVE <u>Page</u> **7** Form 990 (2024)

### 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEĆ) 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.

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

(A)	(B)	(C)						(D)	(E)	(F)
Name and title	Average	(do	Positio (do not check mor				one	Reportable	Reportable	Estimated
	hours per					s both		compensation	compensation	amount of
	week (list any						Ĺ	from the	from related organizations	other compensation
	hours for	direct				-		organization	(W-2/1099-MISC/	from the
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	ndividual trustee or director	Institutional trustee		oyee	Highest compensated employee		1099-NEC)	,	and related
	below	vidua	itutio	Je.	Key employee	nest c	ner			organizations
	line)	Indi	Inst	Officer	Key	High	Former			
(1) MIKE HARLEY	40.00									
EXECUTIVE DIRECTOR				Х				172,368.	0.	1,956
(2) SACHA SEYMOUR-ANDERSON	40.00									
EXECUTIVE LEAD						Х		131,089.	0.	1,956
(3) WILLIAM LEMIEUX	40.00									
FINANCE DIRECTOR				Х				122,369.	0.	1,956
(4) BRIAN COLUMBUS	40.00									
OPERATIONS DIRECTOR						Х		110,137.	0.	1,956
(5) EMILY HALEY	40.00									
SR. COMMUNICATIONS DIRECTOR						Х		106,200.	0.	1,956
(6) WILLIAM DROESSLER	40.00									
SR. PARTNERSHIP DIRECTOR						Х		102,242.	0.	2,172
(7) CHRIS NELSON	1.00									
CHAIR		Х		Х				0.	0.	0
(8) HALSTON SLEETS	1.00									
VICE CHAIR		х		х				0.	0.	0
(9) KATIE SWOR	1.00									
TREASURER		х		х				0.	0.	0
(10) CHRIS TUFTS	1.00									
SECRETARY		Х		х				0.	0.	0
(11) ALISON BRYANT	1.00									
DIRECTOR (THRU 10/24)		Х						0.	0.	0
(12) AMY SENTER	1.00									
DIRECTOR		Х						0.	0.	0
(13) ANITA URVINA DAVIS	1.00									
DIRECTOR		х						0.	0.	0
(14) BOB BLAKE	1.00									
DIRECTOR (THRU 10/24)		х						0.	0.	0
(15) GAIL CEDERBERG	1.00									
DIRECTOR		х						0.	0.	0
(16) JAMES TRICE	1.00									
DIRECTOR		х						0.	0.	0
(17) KRISTIN HEUTMAKER	1.00									
DIRECTOR		х	1	l	l			0.	0.	0

Form 990 (2024) ENVIRONMENTAL INITIATIVE 41-1718834 Page **8** 

Part VII Section A. Officers, Directors, Tru			ees.	and	l Hid	ahes	t Co	ompensated Employee	S (continued)	4 Page 0
(A)	(B)		<del>,</del>		<u>.</u> C)	<u> </u>		(D)	(E)	(F)
Name and title	Average hours per week (list any hours for related organizations below	box	not c , unle:	Pos heck ss per id a di	ition more son i irecto	Highest compensated highest compensated employee	an tee)	Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	Estimated amount of other compensation from the organization and related organizations
	line)	Indiv	Insti	Officer	Key	High	Former			
(18) LEVI BROWN	1.00									
DIRECTOR (THRU 10/24)		Х						0.	0.	0.
(19) MAURICIO LEON	1.00									
DIRECTOR		Х						0.	0.	0.
(20) MICHELLE STOCKNESS	1.00									
DIRECTOR		Х						0.	0.	0.
(21) RAJ RAJAN	1.00									
DIRECTOR		Х						0.	0.	0.
(22) WHITNEY TERRILL	1.00									
DIRECTOR		Х						0.	0.	0.
(23) LARRY KRAMKA	1.00									
DIRECTOR		Х						0.	0.	0.
(24) SHIELA UGARGOL KEEFE	1.00									
DIRECTOR		Х						0.	0.	0.
(25) OLIVIA DAWSON-OLSON	1.00									
DIRECTOR		Х						0.	0.	0.
1b Subtotal	1	<u> </u>	<u> </u>	<u> </u>			<u> </u>	744,405.	0.	11,952.
c Total from continuation sheets to Part \							-	0.	0.	0.
d Total (add lines 1b and 1c)								744,405.	0.	11,952.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

			Yes	NO
3	Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on			
	line 1a? If "Yes," complete Schedule J for such individual	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization			
	and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services			
	rendered to the organization? If "Yes." complete Schedule J for such person	5		X

#### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A)	(B)	(C)
Name and business address	Description of services	Compensation
TRUST IN FOOD		
8725 ROSEHILL RD STE 200, LENEXA, KS 66215	RESEARCH AND MEDIA CAMPAIGN	552,500.
THE NATURE CONSERVANCY - VA		
101 E CESAR E CHAVEZ AVE, LANSING, MI 48906	RECRUITMENT AND EDUCATION	150,000.
2 Total number of independent contractors (including but not limited to	o those listed above) who received more than	

Form **990** (2024)

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Form 990 (2024) ENVIRONMENTAL INITIATIVE 41-1718834 Page 9

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Revenuè excluded Total revenue Related or exempt Unrelated from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1a **1 a** Federated campaigns 240,472. 1b **b** Membership dues c Fundraising events 1c d Related organizations 1d 1,033,271 e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above ... 3,150,961 1f g Noncash contributions included in lines 1a-1f 4,424,704. h Total. Add lines 1a-1f **Business Code** 2 a PROGRAM SERVICE FEES 110000 127,328 127,328 Program Service Revenue CONFERENCES & PROJECTS 110000 7,800 7,800 С f All other program service revenue ..... 135,128, g Total. Add lines 2a-2f Investment income (including dividends, interest, and 25,528 25,528 other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties ..... (i) Real (ii) Personal 6 a Gross rents 6b **b** Less: rental expenses ... c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 7a **b** Less: cost or other basis Other Revenue and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 10a and allowances **b** Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** 11 a OTHER INCOME 900099 6.777 6.777. d All other revenue 6,777. e Total. Add lines 11a-11d 4.592.137. 32,305. 135,128, 12 Total revenue. See instructions

432009 12-10-24

Form 990 (2024)

ENVIRONMENTAL INITIATIVE

41-1718834

Page 10

Part IX Statement of Functional Expenses

	Observation of the contract of			nplete column (A).	Х
	Check if Schedule O contains a response not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations		·		·
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	298,649.	223,690.	19,175.	55,784.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,116,906.	731,062.	283,571.	102,273.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	22,918.	16,825.	4,478.	1,615.
9	Other employee benefits	166,151.	121,777.	33,014.	11,360.
10	Payroll taxes	112,420.	82,531.	21,966.	7,923.
11	Fees for services (nonemployees):				
а	Management				
b	Legal	27,617.	27,356.	192.	69.
С	Accounting	5,272.	5,222.	37.	13.
d					
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
	column (A), amount, list line 11g expenses on Sch O.)	1,182,036.	1,170,869.	8,206.	2,961.
12	Advertising and promotion	9,234.	9,230.	3.	1.
13	Office expenses	1,962.	1,619.	252.	91.
14	Information technology	21,417.	17,505.	2,744.	1,168.
15	Royalties				
16	Occupancy	83,129.	61,027.	16,243.	5,859.
17	Travel	22,990.	18,839.	2,821.	1,330.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	16,898.	15,265.	1,200.	433.
23	Insurance	22,129.	16,245.	4,324.	1,560.
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
а	EQUIPMENT	1,032,168.	1,028,530.	3,592.	46.
b	TELECOMMUNICATION	12,938.	9,498.	2,528.	912.
С	BANK FEES	5,659.	5,606.	39.	14.
d	DEVELOPMENT EXPENSES	2,967.			2,967.
е	All other expenses	30,048.	21,890.	4,195.	3,963.
25	Total functional expenses. Add lines 1 through 24e	4,193,508.	3,584,586.	408,580.	200,342.
26	<b>Joint costs</b> . Complete this line only if the organization	-		·	-
	, , ,				
	reported in column (B) joint costs from a combined	J			
	educational campaign and fundraising solicitation.				

orm 990 (2024) ENVIRONMENTAL INITIATIVE 41-1718834 Page **11** 

Form 990 (2024)
Part X Balance Sheet

Pal	rt X	Balance Sneet		or the enter the Alexander Don't Man			
		Check if Schedule O contains a response or	note to an	y line in this Part X	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			86,043.	1	966,428.
	2	Savings and temporary cash investments		1,067,552.	2	1,142,774.	
	3	Pledges and grants receivable, net	1,482,884.	3	673,226.		
	4	Accounts receivable, net			185.	4	9.
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, su					
		controlled entity or family member of any of t		5			
	6	Loans and other receivables from other disqu	•				
		under section 4958(f)(1)), and persons descri		,		6	
w	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
As	9	5			25,413.	9	14,863.
		Land, buildings, and equipment: cost or other			·		
		basis. Complete Part VI of Schedule D	l l	117,058.			
	b			106,393.	27,563.	10c	10,665.
	11	Investments - publicly traded securities		·	·	11	
	12	Investments - other securities. See Part IV, lir				12	
	13	Investments - program-related. See Part IV, li		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11	425,328.	15	370,602.		
	16	Total assets. Add lines 1 through 15 (must e			3,114,968.	16	3,178,567.
	17	Accounts payable and accrued expenses			727,790.	17	471,072.
	18	Grants payable				18	
	19	Deferred revenue			34,982.	19	15,163.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple		1		21	
S	22	Loans and other payables to any current or fo	ormer offic				
Liabilities		trustee, key employee, creator or founder, su	ıbstantial (	contributor, or 35%			
abil		controlled entity or family member of any of t	hese pers	ons		22	
Ë	23	Secured mortgages and notes payable to un	related thi			23	
	24	Unsecured notes and loans payable to unrela	ated third	oarties		24	
	25	Other liabilities (including federal income tax,	payables	to related third			
		parties, and other liabilities not included on li	nes 17-24	. Complete Part X			
		of Schedule D			426,271.	25	367,778.
	26	Total liabilities. Add lines 17 through 25			1,189,043.	26	854,013.
		Organizations that follow FASB ASC 958, or	check her	e X			
ses		and complete lines 27, 28, 32, and 33.					
<u>a</u>	27	Net assets without donor restrictions	325,719.	27	324,551.		
Ва	28	Net assets with donor restrictions		1,600,206.	28	2,000,003.	
pur		Organizations that do not follow FASB AS6	C 958, ch	eck here			
Ę		and complete lines 29 through 33.					
Net Assets or Fund Balances	29	Capital stock or trust principal, or current fun				29	
set	30	Paid-in or capital surplus, or land, building, or	r equipme	nt fund		30	
As	31	Retained earnings, endowment, accumulated				31	
Ret	32	Total net assets or fund balances			1,925,925.	32	2,324,554.
	33	Total liabilities and net assets/fund balances			3,114,968.	33	3,178,567.

Form	1990 (2024) ENVIRONMENTAL INITIATIVE	41-17188	34	Pa	ge 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4	592,	137.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4	193,	508.
3	Revenue less expenses. Subtract line 2 from line 1	3		398,	629.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1	925,	925.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	2	324,	554.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				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 on Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	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	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3а	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	000	
			Form	990	(2024)

#### **SCHEDULE A**

(Form 990)

Total

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization **Employer identification number** ENVIRONMENTAL INITIATIVE 41-1718834 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

### 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.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
	Gifts, grants, contributions, and	, ,	, ,	, ,	•	ì	· · · · · · · · · · · · · · · · · · ·
	membership fees received. (Do not						
	include any "unusual grants.")	4,400,793.	7,295,028.	2,886,625.	4,486,997.	4,424,704.	23,494,147.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	4,400,793.	7,295,028.	2,886,625.	4,486,997.	4,424,704.	23,494,147.
	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						3,985,555.
6	Public support. Subtract line 5 from line 4.						19,508,592.
Sec	ction B. Total Support		•	•			
Cale	ndar year (or fiscal year beginning in)	(a) 2020	<b>(b)</b> 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
	Amounts from line 4	4,400,793.	7,295,028.	2,886,625.	4,486,997.	4,424,704.	23,494,147.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	6,207.	1,870.	5,686.	43,429.	25,528.	82,720.
9	Net income from unrelated business	·	·	·	•	,	
_	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)			3,121.	2,164.	6,777.	12,062.
11	Total support. Add lines 7 through 10			,	•	,	23,588,929.
	Gross receipts from related activities,	etc. (see instruction	ns)			12	253,420.
	First 5 years. If the Form 990 is for th	•	,	ourth, or fifth tax ve	ear as a section 5		· · · · · · · · · · · · · · · · · · ·
	organization, check this box and stor	J	, , ,				
Sec	ction C. Computation of Publi						
14	Public support percentage for 2024 (li	ine 6, column (f), di	vided by line 11, co	olumn (f))		14	82.70 %
15	Public support percentage from 2023	Schedule A, Part II	I, line 14	* * * * * * * * * * * * * * * * * * * *		15	88.50 %
	33 1/3% support test - 2024. If the c					ore, check this box	and
	stop here. The organization qualifies						
b	33 1/3% support test - 2023. If the o						
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts	-					
	meets the facts-and-circumstances te		•	-			
b	10% -facts-and-circumstances test	-	•				
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	organization meets the facts-and-circu		*		•		
18	Private foundation. If the organization						
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Schedule A (Form 990) 2024

Schedule A (Form 990) 2024

ENVIRONMENTAL INITIATIVE

41-1718834

Page 3

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

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

Calledary part (or fiscal year beginning in)  1 Gilts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  2 Giross nearbips from admissions, formed, or facilities furnished in any activity that is related to the organization's tax exempt purpose of Giross nearbips from admissions, formed, or facilities furnished in any activity that is related to the organization's tax exempt purpose of Giross nearbips from admissions and any activity that is related to the organization's tax exempt purpose of Giross receipts from activities that are not an unrelated trade or business under services or facilities furnished by a governmental unit to the organization without charge to the organization of services or facilities furnished by a governmental unit to the organization without charge to the organization of services or head of services or the services of property organization of the state of the services or the services of the state of the services or the services of the state of the services or the services of the state of the services or the services of the state of the services or the services of the services or the services or the services or the services of the services or the services	Section A. Public Support	now, please comp	Diete Fart II.)				
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Section C. Computation of Public Support Percentage  15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))  16 Public support percentage from 2023 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))  18 Investment income percentage from 2023 Schedule A, Part III, line 17  19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	_	· ·			•		
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16 Public support percentage from 2023 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))  18 Investment income percentage from 2023 Schedule A, Part III, line 17  19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	-			column (f))		45	
Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))  18 Investment income percentage from 2023 Schedule A, Part III, line 17  19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							
17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f))  18 Investment income percentage from 2023 Schedule A, Part III, line 17  19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization						10	
18 Investment income percentage from 2023 Schedule A, Part III, line 17  19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	•			ine 13 column (f)		17	(
19a 33 1/3% support tests - 2024. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							(
more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization <b>b 33 1/3</b> % <b>support tests - 2023.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization							
b 33 1/3% support tests - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							, 13 HUL
line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							L
The state of the s							

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Schedule A (Form 990) 2024

### Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on 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 on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Yes No 1 2 За 3b Зс 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9с 10a 10b

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Sche	dule A (Form 990) 2024 ENVIRONMENTAL INITIATIVE			41-1718834	Page 6
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organ	izations		
1	Check here if the organization satisfied the Integral Part Test as a qualify	ring trust on N	Nov. 20, 1970 ( <i>explain</i>	in Part VI). See inst	ructions.
	All other Type III non-functionally integrated supporting organizations mu	st complete	Sections A through E.		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current (optiona	
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or				
	maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current (optiona	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
a	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
С	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
е	Discount claimed for blockage or other factors				
	(explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,				
	see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Y	'ear
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
	emergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-function	ally integrate	d Type III supporting or	ganization (see	

Schedule A (Form 990) 2024

instructions).

ENVIRONMENTAL INITIATIVE 41-1718834 Schedule A (Form 990) 2024 Page 7 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D - Distributions **Current Year** 1 Amounts paid to supported organizations to accomplish exempt purposes Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 6 6 Other distributions (describe in Part VI). See instructions. 7 7 Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions. 8 9 Distributable amount for 2024 from Section C, line 6 10 Line 8 amount divided by line 9 amount 10 (i) (ii) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2024 Amount for 2024 Distributable amount for 2024 from Section C, line 6 2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2024 a From 2019 **b** From 2020 c From 2021 **d** From 2022 e From 2023 f Total of lines 3a through 3e g Applied to under distributions of prior years h Applied to 2024 distributable amount i Carryover from 2019 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2024 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2024 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. 5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions 6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2025. Add lines 3i and 4c. 8 Breakdown of line 7: a Excess from 2020 **b** Excess from 2021 c Excess from 2022

Schedule A (Form 990) 2024

d Excess from 2023e Excess from 2024

Schedule A	(Form 990) 2024	ENVIRONMEN	TAL INI	<b>TIATIVE</b>			41-1718834	Page 8
Part VI	(Form 990) 2024  Supplemental Info Part IV, Section A, lines line 1; Part IV, Section D Section D, lines 5, 6, and (See instructions.)	rmation. Pro 1, 2, 3b, 3c, 4b ), lines 2 and 3; d 8; and Part V,	ovide the o o, 4c, 5a, 6 Part IV, S , Section I	explanations require 5, 9a, 9b, 9c, 11a, 1 ection E, lines 1c, 2 E, lines 2, 5, and 6.	ed by Part II, line 10; 1b, and 11c; Part IV 2a, 2b, 3a and 3b; Pa Also complete this p	; Part II, line 17a or 7 , Section B, lines 1 a art V, line 1; Part V, part for any addition	17b; Part III, line 12; and 2; Part IV, Sectio Section B, line 1e; Pa al information.	

Schedule A (Form 990) 2024

Schedule B (Form 990)

**Schedule of Contributors** 

OMB No. 1545-0047

(Rev. December 2024) Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

ENVI	RONMENTAL INITIATIVE	41-1718834				
rganization type (check one):						
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)( <sup>3</sup> ) (enter number) organization					
[	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
1	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
I	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
,	covered by the <b>General Rule</b> or a <b>Special Rule.</b> ), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	e. See instructions.				
	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling ne contributor. Complete Parts I and II. See instructions for determining a contributor's	•				
Special Rules						
sections 509(a)(1) an contributor, during the	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support to 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Fine 1. Complete Parts I and II.	d that received from any one				
contributor, during the literary, or education	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a he year, total contributions of more than \$1,000 exclusively for religious, charitable, so all purposes, or for the prevention of cruelty to children or animals. Complete Parts I (ernstead of the contributor name and address), II, and III.	ientific,				
year, contributions <sub>e</sub> is checked, enter he purpose. Don't comp	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from a exclusively for religious, charitable, etc., purposes, but no such contributions totaled more the total contributions that were received during the year for an exclusively religious polete any of the parts unless the <b>General Rule</b> applies to this organization because it retc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box s, charitable, etc., received <i>nonexclusively</i>				
answer "No" on Part IV, line 2	t isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (For, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, requirements of Schedule B (Form 990).					

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

Schedule B (Form 990) (Rev. 12-2024)

Page 2

Name of o	rganization			Emplo	yer identification number
ENVIRONM	ENTAL INITIATIVE			4:	1-1718834
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	ıl space	e is needed.		
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributior	ıs	(d) Type of contribution
1		\$_	1,499,	924.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributior	าร	(d) Type of contribution
2		\$_	887,	610.	Person X Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributior	ıs	(d) Type of contribution
3		\$	750,	000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	,	(c) Total contributior	าร	(d) Type of contribution
4		\$	94,	341.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributior	าร	(d) Type of contribution
		\$_			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contributior	าร	(d) Type of contribution
		\$			Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

ENVIRONMENTAL INITIATIVE

41-1718834

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art 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. 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
		<u> </u>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

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Schedule B (Form 990) (Rev. 12-2024)

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

#### SCHEDULE D (Form 990)

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

# **Supplemental Financial Statements**

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

ENVIRONMENTAL INITIATIVE

Employer identification number

41-1718834

Pai			s or Accounts. Complete if the				
	organization answered "Yes" on Form 990, Part IV, line	e 6.					
		(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in v		sed funds				
	are the organization's property, subject to the organization's	_					
6	Did the organization inform all grantees, donors, and donor ad						
	for charitable purposes and not for the benefit of the donor or						
Pai		ganization answered "Yes" on Form 990,					
1	Purpose(s) of conservation easements held by the organization		<u> </u>				
	Preservation of land for public use (for example, recreat	`	of a historically important land area				
	Protection of natural habitat	· —	of a certified historic structure				
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form	of a conservation easement on the last				
_	day of the tax year.		Held at the End of the Tax Year				
а			2a				
b	<b>-</b>		•				
	Number of conservation easements on a certified historic stru						
d							
u	on a historic structure listed in the National Register		2d				
3	Number of conservation easements modified, transferred, rele						
J	year	casea, extinguished, or terminated by th	e organization during the tax				
4		ement is located					
5							
Ū	violations, and enforcement of the conservation easements it						
6	Staff and volunteer hours devoted to monitoring, inspecting, I						
·			isonianon cacomento caming and year				
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserva	ation easements during the year				
	3, ··		,				
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 1700	h)(4)(B)(i)				
	•						
9	In Part XIII, describe how the organization reports conservation						
	balance sheet, and include, if applicable, the text of the footn	•					
	organization's accounting for conservation easements.						
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or O	ther Similar Assets.				
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.					
1a	If the organization elected, as permitted under FASB ASC 956	8, not to report in its revenue statement	and balance sheet works				
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research in f	urtherance of public				
	service, provide in Part XIII the text of the footnote to its finan	ncial statements that describes these iter	ms.				
b	If the organization elected, as permitted under FASB ASC 958	8, to report in its revenue statement and	balance sheet works of				
	art, historical treasures, or other similar assets held for public	·					
	provide the following amounts relating to these items.	,	•				
	(i) Revenue included on Form 990, Part VIII, line 1		\$				
2	If the organization received or held works of art, historical trea						
_	the following amounts required to be reported under FASB A		g, <b>p. 0</b>				
а	Revenue included on Form 990, Part VIII, line 1	· ·	\$				
	Assets included in Form 990, Part X						

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

Schedule D (Form 990) (Rev. 12-2024)

Sche	dule D (Form 990) (Rev. 12-2024) ENVIRONME							41-171		P	age 2
Pai	t III   Organizations Maintaining C	Collections of Ar	t, Histe	orical Tre	easures, or	Othe	r Simila	r Assets	(contin	nued)	
3	Using the organization's acquisition, accessi	on, and other record	s, check	any of the t	following that	make s	ignificant i	use of its			
	collection items (check all that apply).										
а	Public exhibition	d	i	Loan or exc	hange progra	ım					
b	Scholarly research	е	• 🔲	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explair	n how th	ey further th	ne organizatio	n's exer	npt purpo	se in Part	XIII.		
5	During the year, did the organization solicit of	or receive donations of	of art, his	storical treas	sures, or othe	r similar	assets		_		_
_	to be sold to raise funds rather than to be ma								Yes		No
Pai	t IV Escrow and Custodial Arran		te if the	organizatior	n answered "\	res" on	Form 990	, Part IV, li	ne 9, or		
	reported an amount on Form 990, Pa										
1a	Is the organization an agent, trustee, custod							_	_		_
	on Form 990, Part X?							L	Yes		_ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	llowing t	able:				I			
									Amoun	t	
С	Beginning balance										
d	Additions during the year										
е	Distributions during the year										
f	Ending balance						. <u>  1f</u>		٦		٦
	Did the organization include an amount on F						ity?	L	_ Yes	F	∐ No
Pai	If "Yes," explain the arrangement in Part XIII.  TV Endowment Funds Complete if										
ı aı	Endownient i dida Complete ii	(a) Current year		rior year	(c) Two year			years back	(e) Four	r veare	hack
4.	Designing of year belongs	· , , , , , , , , , , , , , , , , , , ,	(D)	Tioi yeai	(C) TWO year	5 Dack	(u) Tillee	years back	(e) i oui	years	Dack
1a	Beginning of year balance										
D	Contributions										
C	Net investment earnings, gains, and losses										
a	Grants or scholarships										
е	Other expenditures for facilities										
	and programs										
· ·	Administrative expenses										
g	End of year balance  Provide the estimated percentage of the current.	ront voor and balance	l (line 1e	a column (o	)) hold oo:						
2	Board designated or quasi-endowment	•	0/ 0/	y, coluitiit (a	)) Helu as.						
a	Permanent endowment	%	<sup>70</sup>								
0											
·	The percentages on lines 2a, 2b, and 2c sho	-* -									
32	Are there endowment funds not in the posse		ation tha	t are held ar	nd administer	ed for th	10				
ou	organization by:	osion of the organiza	ation tha	t are riola ar	ia aarriiriiotor	00 101 11				Yes	No
	(i) Unrelated organizations?								3a(i)		
	(ii) Related organizations?								3a(ii)		
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requir	ed on S	chedule R?					3b		
4	Describe in Part XIII the intended uses of the										
Pai	t VI   Land, Buildings, and Equipm										
	Complete if the organization answere	d "Yes" on Form 990	), Part IV	/, line 11a. S	See Form 990	, Part X,	line 10.				
	Description of property	(a) Cost or o			or other		ccumulate	ed	(d) Boo	k valu	e
		basis (investr			(other)		preciation		. ,		
1a	Land										
	Buildings										
	Leasehold improvements										
	Equipment				62,183.		51,	518.		10,	665.
	Other	<b>I</b>			54,875.		54,	875.			0.
	I. Add lines 1a through 1e. (Column (d) must e		X. line 1	0c. column	(B))					10,	665.

Schedule D (Form 990) (Rev. 12-2024)

Schedule D (Form 990) (Rev. 12-2024) ENVIRONMENTAL I	NITIATIVE		41-1718834	Page 3
Part VII Investments - Other Securities				<u> </u>
Complete if the organization answered "Yes"				
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or	end-of-year market	value
(1) Financial derivatives				
(2) Closely held equity interests				
(3) Other				
(A)				
(B)				
(C)				
(D)				
<u>(E)</u>				
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))  Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	on 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 o	 end-of-vear market	value
	(b) Book value	(c) Mothed of Valuation. Cost of V	sha or your market	· value
<u>(1)</u>				
(2)				
(6)				
(0) (7)				
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))				
Part IX Other Assets				
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.		
(a)	Description		(b) Book	value
(1) RIGHT OF USE ASSET				370,602.
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, line 15, co.	I. (B))			370,602.
Part X Other Liabilities				
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line		
1. (a) Description of liability			(b) Book	value
(1) Federal income taxes				
(2) LEASE LIABILITY				367,778.
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, line 25, co.	<i>l. (B))</i>			367,778.

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

Schedule D (Form 990) (Rev. 12-2024)

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Sche	dule D (Form 990) (Rev. 12-2024) ENVIRONMENTAL INITIATIVE		41-1718834	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Stateme	ents With Revenu	ue per Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	a.		
1	Total revenue, gains, and other support per audited financial statements		1	4,592,137.
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			
d	Other (Describe in Part XIII.)			
е	Add lines 2a through 2d		2e	0.
3	Subtract line 2e from line 1		3	4,592,137.
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	4,592,137.
Par	rt XII Reconciliation of Expenses per Audited Financial Statem	nents With Expen	ses per Return	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.		
1	Total expenses and losses per audited financial statements		1	4,193,508.
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			
С	Other losses			
d	Other (Describe in Part XIII.)	2d		
е	Add lines 2a through 2d	· · · · ·	2e	0.
3	Subtract line 2e from line 1			4,193,508.
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 4a and 4b		4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.)			4,193,508.
Par	rt XIII Supplemental Information			
Provi	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par	t IV, lines 1b and 2b; F	Part V, line 4; Part X, line 2; I	Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	ditional information.		
PART	'X, LINE 2:			
THE	INTERNAL REVENUE SERVICE HAS DETERMINED THAT ENVIRONMENTAL IN	NITIATIVE		
IS E	EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE	INTERNAL		
REVE	NUE CODE. ENVIRONMENTAL INITATIVE IS ALSO EXEMPT FROM STATE 1	INCOME		
TAXE	S. HOWEVER, ANY UNRELATED INCOME MAY BE SUBJECT TO TAXATION.			
THE	ORGANIZATION FOLLOWS THE ACCOUNTING STANDARDS FOR CONTINGENCY	IES IN		
EVAL	UATING UNCERTAIN TAX POSITIONS. THIS GUIDANCE PRESCRIBES RECO	OGNITION		
THRE	SHOLD PRINCIPLES FOR THE FINANCIAL STATEMENT RECOGNITION OF T	TAX		
POSI	TIONS TAKEN ON A TAX RETURN THAT ARE NOT CERTAIN TO BE REALIZED	ZED. NO		
LIAB	BILITY HAS BEEN RECOGNIZED BY THE ORGANIZATION FOR UNCERTAIN T	TAX		
POSI	TIONS AS OF DECEMBER 31, 2024 AND 2023.			

Schedule D (Form 990) (Rev. 12-2024) ENVIRONMENTAL INITIATIVE	41-1718834	Page <b>5</b>
Schedule D (Form 990) (Rev. 12-2024) ENVIRONMENTAL INITIATIVE  Part XIII Supplemental Information (continued)		<u> </u>

### SCHEDULE J (Form 990)

(Rev. December 2024) Department of the Treasury Internal Revenue Service

# **Compensation Information**

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

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

ENVIRONMENTAL INITIATIVE

ENVIRONMENTAL INITIATIVE

41-1718834

Part I Questions Regarding Compensation

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

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

Schedule J (Form 990) (Rev. 12-2024)

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

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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

		(B) Breakdown of W	V-2 and/or 1099-MISo compensation	C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) MIKE HARLEY	(i)	172,368.	0.	0.	1,500.	456.	174,324.	0.
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)						<u>I</u>	<u> </u>

Schedule J (Form 990) (Rev. 12-2024) ENVIRONMENTAL INITIATIVE	41-1718834	Page 3
Part III Supplemental Information		
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this	is part for any additional information.	
PART I, LINE 3:		
THE BOARD OF DIRECTORS ANNUALLY APPROVES THE FISCAL YEAR BUDGET, WHICH		
INCLUDES THE EXECUTIVE DIRECTOR SALARY AND BENEFITS. THE COMPENSATION IS		
ADDITIONALLY CONFIRMED BY THE BOARD CHAIR IN WRITING.		

Schedule J (Form 990) (Rev. 12-2024)

#### **SCHEDULE 0** (Form 990)

(Rev. December 2024) Department of the Treasury

## Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service **Employer identification number** Name of the organization ENVIRONMENTAL INITIATIVE 41-1718834 FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS: HEALTH ISSUES BETWEEN DIVERSE STAKEHOLDERS AND WORKING TOWARDS SOCIAL EQUITY AND ENVIRONMENTAL HEALTH FOR ALL. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: SUSTAINABLE GROWTH COALITION: A BUSINESS-LED PARTNERSHIP WITH NEARLY 20 BUSINESSES AND ORGANIZATIONS ADMINISTERED BY ENVIRONMENTAL INITIATIVE HARNESSING MEMBER EXPERTISE TO ADVANCE THE NEXT FRONTIER OF CORPORATE SUSTAINABILITY - THE CIRCULAR ECONOMY. DETERMINING PROJECTS THAT MOVE TOWARD A CIRCULAR ECONOMY, THE COALITION MEMBERS EVALUATE OPTIONS THROUGH STAKEHOLDER, ENVIRONMENTAL, ECONOMIC, SOCIAL WELLNESS, LIFE-CYCLE LENSES. COLLABORATIVE PROJECTS ADVANCE CLEAN ENERGY, CONVERT ORGANIC WASTE INTO VALUABLE RESOURCES. AND PROTECT OR RESTORE THE NATURAL WATER CYCLE WITH AN EVER-GROWING EQUITY FRAMEWORK. HEADWATERS AGRICULTURAL SUSTAINABILITY PROJECT AND OTHER AGRICULTURAL PROGRAMS A UNIQUE COLLABORATION OF PARTNERS IN CENTRAL MINNESOTA ACCELERATING THE DEVELOPMENT AND IMPLEMENTATION OF FARMER-LED SOLUTIONS THAT BENEFIT THE ENVIRONMENT. ECONOMIC VIABILITY OF FARMERS. VITALITY OF RURAL COMMUNITIES. CONVENED BY ENVIRONMENTAL INITIATIVE THE PARTNERSHIP OFFERS INNOVATIONS TO ACCELERATE CONTINUOUS IMPROVEMENTS IN OUR ENVIRONMENT, PARTICULARLY FOR WATER QUALITY. AND CLIMATE PROTECTION. ENVIRONMENTAL INITIATIVE HABITAT MANAGES OTHER PARTNERSHIPS ADVANCING SUSTAINABLE AGRICULTURE. SOURCE WATER PROTECTION COLLABORATIVE - A MINNESOTA-BASED STATEWIDE INITIATIVE, THE SOURCE WATER PROTECTION COLLABORATIVE BRINGS TOGETHER INDIVIDUALS WHO HAVE EXPERTISE IN SOURCE WATER. COMMUNITY OUTREACH OR PUBLIC HEALTH TO DEVELOP WAYS TO PROMOTE LAND USE WHICH ENGAGEMENT PROTECTS DRINKING WATER SOURCES ROOTS FOR THE FUTURE (FORMERLY KNOW AS NORTHSIDE SAFETY NET) -ENVIRONMENTAL JUSTICE INTERNSHIP WITH ROOTS FOR THE FUTURE (FORMERLY KNOWN AS NORTHSIDE SAFETY NET (NEIGHBORHOODS EMPOWERING TEENS)) IS AN INTERNSHIP PROGRAM FOR NORTH MINNEAPOLIS YOUTH. THE PROGRAM IS LED BY ENVIRONMENTAL INITIATIVE AND HAS BEEN DEVELOPED IN PARTNERSHIP WITH PUBLIC PRIVATE AND NONPROFIT PARTNERS. THE INNOVATIVE PROGRAM MODEL PLACES INTERNS AT THE CENTER OF A ROBUST LEARNING ENVIRONMENT DESIGNED TO SUPPORT CONSISTENT LONG-TERM RELATIONSHIPS WITH AND BETWEEN YOUTH PARTICIPANTS AND PROGRAM PARTNERS ENVIRONMENTAL INITIATIVE AWARDS - THIS IS OUR ANNUAL RECOGNITION PROGRAM CELEBRATING PEOPLE AND PROJECTS WORKING IN PARTNERSHIP AT THE NEXUS OF A HEALTHY ENVIRONMENT. A PROSPEROUS ECONOMY. AND AN EQUITABLE WE BRING TOGETHER PARTNERS FROM ACROSS THE ENVIRONMENTAL COMMUNITY AND OUR ORGANIZATIONAL WORK TO HONOR AWARD RECIPIENTS DURING AN INSPIRING EVENT OF CELEBRATION AND NETWORKING. EXPENSES \$ 510,113. INCLUDING GRANTS OF \$ 0. FORM 990, PART VI, SECTION A. LINE 1A:

MOTIONS ON BEHALF OF THE ENTIRE BOARD. THE EXECUTIVE COMMITTEE IS MADE UP For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

THE EXECUTIVE COMMITTEE HAS THE AUTHORITY TO MAKE DECISIONS AND VOTE ON

Schedule O (Form 990) (Rev. 12-2024)

Schedule O (Form 990) 2024 Name of the organization **Employer identification number** ENVIRONMENTAL INITIATIVE 41-1718834 AS THE BOARD'S CHAIR, VICE CHAIR, TREASURER, SECRETARY AND UP TO THREE AT LARGE MEMBERS; ALL EXECUTIVE COMMITTEE MEMBERS ARE VOTED INTO THEIR SEATS BY THE BOARD EACH FEBRUARY. FORM 990, PART VI, SECTION B, LINE 11B: THE FINANCE COMMITTEE WILL FIRST REVIEW THE AUDIT FINDINGS AND 990 IN DETAIL, AND UPON THEIR AGREEMENT WILL RECOMMEND APPROVAL TO THE FULL BOARD OF DIRECTORS AT THE NEXT MEETING. THE REPORTS WILL THEN BE MADE AVAILABLE TO ALL BOARD MEMBERS FOR INDEPENDENT REVIEW PRIOR TO THE NEXT FULL BOARD MEETING. AT WHICH TIME HIGHLIGHTS AND KEY ELEMENTS OF THE AUDIT WILL BE SHARED. THE AUDIT WILL THEN BE THE TOPIC OF OPEN DISCUSSION FOR ALL BOARD MEMBERS, UNTIL A MOTION IS MADE AND SECONDED TO ACCEPT AND FINALIZE THE REPORT, AT WHICH TIME A VOTE WILL BE CONDUCTED AND THE RESULTS RECORDED. FORM 990, PART VI, SECTION B, LINE 12C: ENVIRONMENTAL INITATIVE PROVIDES COPIES OF THE POLICY TO ALL INCOMING BOARD MEMBERS AND REVIEWS THE POLICY WITH THEM. ENVIRONMENTAL INITATIVE ALSO MONITORS ALL SITUATIONS WHERE THERE IS A POSSIBILITY OF A CONFLICT OF INTEREST USING THE POLICY AS A GUIDE IF THERE IS A SITUATION WHICH MIGHT CONSTITUTE A CONFLICT OF INTEREST. AFTER DISCLOSURE OF THE RELATIONSHIP OR MATERIAL FINANCIAL INTEREST AND ALL MATERIAL FACTS. AND AFTER ANY DISCUSSION WITH THE INTERESTED PERSON. THE INTERESTED PERSON SHALL LEAVE THE BOARD OR COMMITTEE MEETING WHILE THE DETERMINATION OF A CONFLICT OF INTEREST IS DISCUSSED AND VOTED UPON. WHICH IS DOCUMENTED IN THE BOARD MINUTES. THE REMAINING BOARD OR COMMITTEE MEMBERS SHALL DECIDE WHETHER A CONFLICT OF INTEREST EXISTS. AN INTERESTED PERSON MAY MAKE A PRESENTATION AT THE BOARD OR COMMITTEE MEETING AT WHICH THE TRANSACTION WILL BE DISCUSSED. BUT AFTER SUCH PRESENTATION. HE OR SHE SHALL LEAVE THE MEETING DURING THE DISCUSSION OF THE TRANSACTION OR ARRANGEMENT THAT RESULTS IN THE AND THE VOTE ON, CONFLICT OF INTEREST. AN INTERESTED PERSON SHALL NOT OTHERWISE ATTEMPT TO EXERT HIS OR HER POTENTIAL INFLUENCE WITH RESPECT TO THE MATTER, EITHER AT OR OUTSIDE THE MEETING. AFTER EXERCISING DUE DILIGENCE. THE BOARD OR COMMITTEE SHALL DETERMINE WHETHER ENVIRONMENTAL INITIATIVE CAN OBTAIN A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT WITH REASONABLE EFFORTS FROM A PERSON OR ENTITY THAT WOULD NOT GIVE RISE TO A CONFLICT OF INTEREST. IF A MORE ADVANTAGEOUS TRANSACTION OR ARRANGEMENT IS NOT REASONABLY ATTAINABLE UNDER CIRCUMSTANCES THAT WOULD NOT GIVE RISE TO A CONFLICT OF THE BOARD OR COMMITTEE SHALL DETERMINE BY A MAJORITY VOTE OF THE DISINTERESTED DIRECTORS WHETHER THE TRANSACTION OR ARRANGEMENT IS IN ENVIRONMENTAL INITIATIVE'S BEST INTEREST AND FOR ITS OWN BENEFIT AND WHETHER THE TRANSACTION IS FAIR AND REASONABLE TO ENVIRONMENTAL INITIATIVE AND SHALL MAKE ITS DECISION AS TO WHETHER TO ENTER INTO THE TRANSACTION OR ARRANGEMENT IN CONFORMITY WITH SUCH DETERMINATION, FORM 990, PART VI, SECTION B, LINE 15A: THE CHAIR AND VICE-CHAIR OF THE BOARD OF DIRECTORS SETS THE EXECUTIVE DIRECTOR'S SALARY AND PROVIDES THE POSITION'S REVIEW. THE FINANCE DIRECTOR PREPARES CURRENT COMPARABILITY DATA AND REVIEWS THE RESULTS WITH THE CHAIR AND VICE-CHAIR. THE CHAIR AND VICE-CHAIR THEN CONDUCT THE REVIEW WITH THE EXECUTIVE DIRECTOR. THIS REVIEW WAS LAST DONE IN 2024. ANY RESULTING CHANGE

Schedule O (Form 990) 2024

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Schedule O (Form 990) 2024	Page 2
Name of the organization	Employer identification number
ENVIRONMENTAL INITIATIVE	41-1718834
IN THE EXECUTIVE DIRECTOR'S COMPENSATION IS THEN INCORPORATED AS A PART OF	
THE ANNUAL ORGANIZATION BUDGET CALCULATIONS. ONCE THE ORGANIZATION'S	
OVERALL BUDGET IS COMPLETED, IT IS REVIEWED AND APPROVED BY THE BOARD OF	
DIRECTORS.	
FORM 990, PART VI, SECTION C, LINE 19:	
ENVIRONMENTAL INITATIVE CURRENTLY PLACES COPIES OF THE CURRENT AUDIT ON	
THEIR WEBSITE AND ON CHARITIES REVIEW COUNCIL'S SITE, ENVIRONMENTAL	
INITATIVE'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICIES ARE	
AVAILABLE UPON REQUEST.	
FORM 990, PART IX, LINE 11G, OTHER FEES:	
PROFESSIONAL CONTRACTS:	
PROGRAM SERVICE EXPENSES 1,170,290.	
MANAGEMENT AND GENERAL EXPENSES 8,202.	
FUNDRAISING EXPENSES 2,960.	
TOTAL EXPENSES 1,181,452.	
1,101,432.	
PAYROLL SERVICES:	
PROGRAM SERVICE EXPENSES 579.	
MANAGEMENT AND GENERAL EXPENSES 4.	
FUNDRAISING EXPENSES 1.  TOTAL EXPENSES 584.	
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A 1,182,036.	
FORM 990, PART XII, LINE 2C:	
THE PROCESS FOR OVERSIGHT AND SELECTION OF AN INDEPENDENT ACCOUNTANT	
HAS NOT CHANGED FROM THE PRIOR YEAR.	

432212 01-29-25 Schedule O (Form 990) 2024