Form	99	0
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(Rev	January	2020)
(1164.	January	2020)

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No. 1545-0047

Α	For t	he 2019 calen	dar year, or tax year beginning , 2019, ar	nd ending			,
		if applicable:	C		D Employ	er ident	ification number
	Ad	ddress change	COMMUNITY ENVIRONMENTAL COUNCIL		94-	1728	064
	Na	ame change	26 W. ANAPAMU STREET, 2ND FLOOR		E Telepho		
	_	itial return	SANTA BARBARA, CA 93101		(80	5) 9	63-0583
		nal return/terminated			(00)	5, 5	00 0000
		nended return			G Gross r	occinto	\$ 2,441,661.
	_		E Name and address of principal officers	H(a) Is this	a group retur		
	A	oplication pending	F Name and address of principal officer: SIGRID WRIGHT				100
-	Тан	avanat atatua	SAME AS C ABOVE	If "No	ll subordinates ," attach a list	. (see in	structions)
<u>-</u>		exempt status:	X 501(c)(3) 501(c) () ◄ (insert no.) 4947(a)(1) or	527			
<u>J</u>			W.CECSB.ORG		exemption nu		
ĸ		n of organization:		ar of formation: 197	() M s	State of I	egal domicile: CA
Pa	rt I	Summar					
	1		be the organization's mission or most significant activities:TO_C		CATION,	RES	EARCH AND
ce		POLICY G	UIDANCE ON REGIONAL SOLUTIONS TO CLIMATE	<u>CHANGE.</u>			
an							
'ern	•		ox ► if the organization discontinued its operations or dispose		050/ -6:4-		
<u>Gov</u>	2 3	Check this bo	oting members of the governing body (Part VI, line 1a)			net as	13 sets.
& (4		dependent voting members of the governing body (Fart VI, fine Fa)			4	13
ies	5		of individuals employed in calendar year 2019 (Part V, line 2a).			5	15
Activities & Governance	6		of volunteers (estimate if necessary)			6	350
Act	7a		ed business revenue from Part VIII, column (C), line 12			7a	128,425.
	b	Net unrelated	business taxable income from Form 990-T, line 39			7b	118,595.
				F	Prior Year		Current Year
	8	Contributions	and grants (Part VIII, line 1h)		670,6	519.	777,605.
nue	9	Program serv	vice revenue (Part VIII, line 2g)		641,2	268.	754,254.
Revenue	10	Investment in	ncome (Part VIII, column (A), lines 3, 4, and 7d)		217,3	800.	174,274.
Å	11	Other revenu	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		77,4	74,604.	
	12	Total revenue	e – add lines 8 through 11 (must equal Part VIII, column (A), line	12)	1,606,6	578.	1,780,737.
	13	Grants and s	imilar amounts paid (Part IX, column (A), lines 1-3)				
	14	Benefits paid	to or for members (Part IX, column (A), line 4)				
	15	Salaries, othe	er compensation, employee benefits (Part IX, column (A), lines 5-	-10)	696,8	809.	807,980.
Expenses	16a	Professional	fundraising fees (Part IX, column (A), line 11e)				21,000.
nəc				,366.			
EX	17		ses (Part IX, column (A), lines 11a-11d, 11f-24e)		040 7	101	1 001 014
		•	es. Add lines 13-17 (must equal Part IX, column (A), line 25)		842,7	1,021,914.	
	18				1,539,6		1,850,894.
_ ø	19	Revenue less	s expenses. Subtract line 18 from line 12		67,0		-70,157.
Net Assets or Fund Balances	20	Total accote	(Part X, line 16)		ing of Curren		End of Year
ase Bala	20 21		(Part X, line 10)		<u>3,038,4</u> 118,1		3,276,997. 143,852.
et A Ind	21						•
Z ^D	22		fund balances. Subtract line 21 from line 20		2,920,2	28.	3,133,145.
-	rt II	Signatur					
Unde	er penal	ties of perjury, I de eclaration of prepa	eclare that I have examined this return, including accompanying schedules and statemer arer (other than officer) is based on all information of which preparer has any knowledge	nts, and to the best of r	my knowledge	and bel	ef, it is true, correct, and
~		Signatu	re of officer	D	ate		
Sig He	jn						-
пе	re		RID WRIGHT	CEO/	EXEC D	LREC	ľ
		51		Date		7	PTIN
			1 1 3	Jaie		<u> </u>	
Pai		BRAD A			self-employe	ed	P00241354
Pre	epare				4		
US	e On	Firm's addre	1001 01010 1112102		Firm's EIN		0581023
			LOS OLIVOS, CA 93441		Phone no.	805	6895880

May the IRS discuss this return with the preparer shown above? (see instructions)...... X Yes

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2019)

No

Form	n 990 (2019) COMMUNITY ENVIRONMENTAL COUNCIL	94-1728064	Page 2
Par	rt III Statement of Program Service Accomplishments		V
1	Check if Schedule O contains a response or note to any line in this Part III Briefly describe the organization's mission:	<u></u>	X
·	CEC WORKS TO IDENTIFY, RAISE AWARENESS ABOUT, AND SOLVE PRESSIN AFFECTING THE CALIFORNIA CENTRAL COAST. OUR ENERGY, TRANSPORTAT PROGRAMS PROVIDE REGIONAL SOLUTIONS TO CLIMATE CHANGE.		
2	Did the organization undertake any significant program services during the year which were not listed on the Form 990 or 990-EZ?		X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program If "Yes," describe these changes on Schedule O.	services? Yes	X No
4	Describe the organization's program service accomplishments for each of its three largest program s Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocate and revenue, if any, for each program service reported.	ervices, as measured by e ions to others, the total e	expenses. xpenses,
4 a	a (Code:) (Expenses \$ 545,158. including grants of \$) ENGAGING THE COMMUNITY:	(Revenue \$ 24	9,899.)
	OUR OUTREACH EFFORTS FOCUS ON TOPICS RELATED TO PREVENTING AND CHANGE, CLIMATE JUSTICE, AND OUR ENERGY, FOOD AND PLASTICS INIT SPONSORS MORE THAN 80 FILMS, LECTURES, PANELS AND OTHER EVENTS RELATED TO OUR MISSION. WE SPEAK REGULARLY AT LOCAL AND STATE (WELL AS IN SCHOOL CLASSROOMS TO ENCOURAGE PERSONAL ACTION ON EN ORGANIZE THE SANTA BARBARA EARTH DAY FESTIVAL, WHICH ATTRACTS M ATTENDEES AND 200 ENVIRONMENTAL VENDORS EACH YEAR. WE ALSO ENGA THROUGH SOCIAL MEDIA AND MORE TRADITIONAL MEDIA.	TIATIVES. CEC HOS EACH YEAR ON TOP GOVERNMENT HEARIN IVIRONMENTAL ISSU 40RE THAN 35,000	STS_OR PICS NGS, AS JES. WE
	ENERGY PROMOTING RENEWABLE ENERGY DEVELOPMENT: CEC WORKS TO PLAN FOR A TO ELECTRICITY GENERATION FROM CLEAN, RENEWABLE AND LOCAL SOURC REGION. THIS INCLUDES PROGRAMS AND ADVOCACY EFFORTS TO ADVANCE WIND, AND WAVE POWER, AS WELL AS ENERGY EFFICIENCY, THROUGH INI LOCAL GOVERNMENT POLICIES. PROMOTING ENERGY EFFICIENT TRANSPOH PLAN FOR AND PROMOTE THE SHIFT TOWARD EFFICIENT CARS POWERED BY ELECTRIC VEHICLES AND HYDROGEN FUEL CELL VEHICLES IN THE TRI-CO PROMOTE COMMUNITY PLANS THAT DESIGN COMMUNITIES FOR PEOPLE NOT PEDESTRIAN TRAILS, BIKE LANES, CAR SHARING, BUS SERVICES, AND (METHODS.	AND_PROMOTE_THE_S DES_IN_THE_TRI-CO THE_ADOPTION_OF DIVIDUAL_PROJECTS RTATION: CEC_WORK CLEAN_ENERGY, S DUNTY_REGIONWE CARS, EMPHASIZIN DTHER_TRAFFIC_REI	DUNTY SOLAR, SAND STO SUCH AS ALSO NG
4 c	c (Code:) (Expenses \$316,610. including grants of \$) FOOD PROMOTING A LOW-CARBON, RESILIENT FOOD SYSTEM:CEC WORKS TO PLAN REDUCTION OF GREENHOUSE GAS EMISSIONS FROM THE FOOD SYSTEM IN S VENTURA COUNTIES. THIS INCLUDES PROGRAMS AND ADVOCACY EFFORTS TO OF REGENERATIVE FARMING PRACTICES AND THE USE OF RENEWABLE ENER EFFICIENT TECHNOLOGIES BY FOOD SYSTEM PROVIDERS. WE ALSO PROMOT METHANE-CAUSING FOOD WASTE DISPOSAL IN LANDFILLS.	SANTA BARBARA ANI TO ADVANCE THE AI RGY_AND/OR_ENERGY	DOPTION_
	d Other program services (Describe on Schedule O.) SEE SCHEDULE O (Expenses \$ 53,437. including grants of \$) (Revenue	\$)
4 e BAA	e Total program service expenses ► 1,373,142. TEEA0102L 07/31/19	Form	1 990 (2019)
			· · ·

1 4			Vee	Na
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	Yes X	No
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 Revenue Procedure 98-19? <i>If 'Yes,' complete Schedule C, Part III.</i>	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? <i>If 'Yes,' complete Schedule D, Part I</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? <i>If 'Yes,' complete Schedule D, Part V.</i>	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.			
ä	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.	11 a	х	
I	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.	11 b	Х	
(bid 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	11 c		Х
(I Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
	Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	Х	
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII.	12a	Х	
I	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV.	14b		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? <i>If 'Yes,' complete Schedule F, Parts II and IV</i>	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 (Å), 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
20 <i>a</i>	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		X
t	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		Х
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94-1728064 Page 3

 Form 990 (2019)
 COMMUNITY
 ENVIRONMENTAL
 COUNCIL

 Part IV
 Checklist of Required Schedules

BAA

Form 990 (2019) COMMUNITY ENVIRONMENTAL COUNCIL Part IV Checklist of Required Schedules (continued)

Pa	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? <i>If 'Yes,' complete Schedule J</i> .	23		х
24 a	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a</i>	24a		х
I	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	-		
(c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
(d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a Section 501(c)(3), 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
I	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? <i>If 'Yes,' complete Schedule L, Part 1</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? <i>If 'Yes,' complete Schedule L, Part II.</i>	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? <i>If 'Yes,' complete Schedule L, Part III.</i>	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
ä	a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> 'Yes,' <i>complete Schedule L, Part IV</i>	28a		Х
I	b A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV.	28b		Х
(c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	contributions? If 'Yes,' complete Schedule M			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 Part V, line 1	34		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
I	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)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	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 in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	х	
Pa	art 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
	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
		<u>)</u>		
(c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Х	
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94-1728064 Page 4

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.
24	a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No. 'go to line 25a.
l	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?
	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?
25	a 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
I	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? <i>If 'Yes,' complete Schedule L, Part I</i>
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? <i>If 'Yes,' complete Schedule L, Part II.</i>
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? <i>If 'Yes,' complete Schedule L, Part III.</i>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):
i	a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> 'Yes,' complete Schedule L, Part IV
l	b A family member of any individual described in line 28a? <i>If 'Yes,' complete Schedule L, Part IV.</i>
	c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes,' complete Schedule L, Part IV.
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservat contributions? <i>If 'Yes,' complete Schedule M</i>
31	Did the organization liquidate terminate or dissolve and cease operations? If 'Yes' complete Schedule N. Part I

Form 990 (2019) COMMUNITY ENVIRONMENTAL COUNCIL 94-1728064 Page 5								
Part V	Statements Regarding Other IRS Filings and Tax Compliance (co	ontinued)						
				Yes	No			
2 a Ente	r the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ts, filed for the calendar year ending with or within the year covered by this return							
				V				
	least one is reported on line 2a, did the organization file all required federal employment		2 b	Х				
	: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see in the organization have unrelated business gross income of \$1,000 or more during the year	•	3a	Х				
	s,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule 0		3 a 3 b	X				
			20	Λ				
finar	ny time during the calendar year, did the organization have an interest in, or a signature or oth ncial account in a foreign country (such as a bank account, securities account, or other t es.' enter the name of the foreign country►	er authority over, a financial account)?	4a		Х			
	instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial	Accounts (ERAD)						
	the organization a party to a prohibited tax shelter transaction at any time during the ta		5a		Х			
	any taxable party notify the organization that it was or is a party to a prohibited tax shell	•	5a 5b		X			
	es,' to line 5a or 5b, did the organization file Form 8886-T?		5 c					
	-		30					
solic	s the organization have annual gross receipts that are normally greater than \$100,000, a it any contributions that were not tax deductible as charitable contributions?		6 a		Х			
b If 'Ye not f	es,' did the organization include with every solicitation an express statement that such contribu ax deductible?	tions or gifts were	6 b					
7 Orga	anizations that may receive deductible contributions under section 170(c).							
a Did i	he organization receive a payment in excess of \$75 made partly as a contribution and r	partly for goods and	_	17				
	ices provided to the payor?		7 a	X				
	es,' did the organization notify the donor of the value of the goods or services provided?		7 b	Х				
c Did t Forn	he organization sell, exchange, or otherwise dispose of tangible personal property for which it n 8282?	was required to file	7 c		Х			
	es,' indicate the number of Forms 8282 filed during the year	1 1						
	to pay premiums on a personal the organization receive any funds, directly or indirectly, to pay premiums on a personal		7 e		Х			
	he organization, during the year, pay premiums, directly or indirectly, on a personal ber		7 f		Х			
	organization received a contribution of qualified intellectual property, did the organization file equired?	Form 8899	7 g					
	, e organization received a contribution of cars, boats, airplanes, or other vehicles, did the 1 1098-C?	e organization file a	7 h					
8 Spor	nsoring organizations maintaining donor advised funds. Did a donor advised fund maintained							
5	nization have excess business holdings at any time during the year?		8					
-	nsoring organizations maintaining donor advised funds.		-					
	the sponsoring organization make any taxable distributions under section 4966?		9 a					
	the sponsoring organization make a distribution to a donor, donor advisor, or related per	rson?	9 b					
	ion 501(c)(7) organizations. Enter:							
	ation fees and capital contributions included on Part VIII, line 12	10a						
	is receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b						
	ion 501(c)(12) organizations. Enter: is income from members or shareholders	11a						
	is income from other sources (Do not net amounts due or paid to other sources	11a						
agai	nst amounts due or received from them.)	11 b						
12 a Sect	ion 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	of Form 1041?	12 a					
b If 'Y	es,' enter the amount of tax-exempt interest received or accrued during the year	12b						
13 Sect	ion 501(c)(29) qualified nonprofit health insurance issuers.							
a Is th	e organization licensed to issue qualified health plans in more than one state?		13a					
	: See the instructions for additional information the organization must report on Schedu	ile O.						
b Ente whic	r the amount of reserves the organization is required to maintain by the states in h the organization is licensed to issue qualified health plans	13b						
	r the amount of reserves on hand	13c						
14 a Did 1	he organization receive any payments for indoor tanning services during the tax year?.		14a		Х			
b If 'Y	es,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on	Schedule O	14b					
	e organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 is parachute payment(s) during the year?		15		Х			
	es,' see instructions and file Form 4720, Schedule N.							
	e organization an educational institution subject to the section 4968 excise tax on net ir	vestment income?	16		Х			
IT Y	es,' complete Form 4720, Schedule O.							

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. Х

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

Sec	tion A. Governing Body and Management									
			Yes	No						
1 a	Enter the number of voting members of the governing body at the end of the tax year 1a 13 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	b Enter the number of voting members included on line 1a, above, who are independent 1b 13									
	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?									
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	5								
-	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		X						
6	Did the organization have members or stockholders?	6		X						
7 a	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?	7 a		Х						
Ł	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		х						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
a	The governing body?	8 a	Х							
Ł	Each committee with authority to act on behalf of the governing body?	8 b	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? <i>If 'Yes,' provide the names and addresses on Schedule Q</i>	9		Х						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	event	ie Co	ode.)						
			Yes	No						
10 a	Did the organization have local chapters, branches, or affiliates?	10 a		Х						
b	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?	10 b								
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O									
	Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Х							
Ł	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х							
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done SEE. SCHEDULE .Q	12 c	Х							
13	Did the organization have a written whistleblower policy?	-	Х							
	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?									
2	The organization's CEO, Executive Director, or top management official. SEE SCHEDULE. O.	15a	Х							
	Other officers or key employees of the organization.	15b		Х						
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions).									
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		X						
L	If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its	104								
Ľ	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?	16 b								
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ► _CA									
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 5 available for public inspection. Indicate how you made these available. Check all that apply.	01(c)(3)s on	ly)						
	X Own website Another's website X Upon request X Other (explain on Schedule O)	EE S	SCH.	0						
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements availate the public during the tax year. SEE SCHEDULE O	ble to								
20	State the name, address, and telephone number of the person who possesses the organization's books and records ►									
	SIGRID WRIGHT 26 W. ANAPAMU ST. 2ND FLOOR SANTA BARBARA CA 93101 805-963-0	583								

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Page 6

Form 990 (2019) COMMUNITY ENVIRONMENTAL COUNCIL	94-1728064	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Independent Contractors	Compensated Employe	es, and
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 Compensa	ted Employees	
 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending organization's tax year. List all of the organization's current officers, directors, trustees (whether individuals or organization) 		

rya s), reg compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

			(C)								
	(A) Name and title	(B) Average hours	Pos thar is	ition (d n one b s both a direc	an of	fficer truste	and a e)		(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
		per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	relatéd organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1)	SIGRID WRIGHT	40							100 501	<u>_</u>	0 601
	CEO/EXEC DIRECT	0			Х				123,591.	0.	3,681.
(2)	REBECCA SUMMER	_ <u>40</u> _ 0	•				Х		107,700.	0.	1,874.
(3)	JOHN_STEED PRESIDENT	<u>6</u>	х		Х				0.	0.	0.
(4)	CATHERINE BROZOWSKI	<u>- 4</u> 0	Х		х				0.	0.	0.
(5)	KARL HUTTERER	6	^		Λ				0.	0.	0.
	TREASURER	0	Х		Х				0.	0.	0.
(6)	CHARLES NEWMAN SECRETARY	4	Х		Х				0.	0.	0.
(7)	LAURA CAPPS	2									
	IMM. PAST PRES	0	Х						0.	0.	0.
(8)	LAURA FRANCIS	4	Х						0.	0.	0.
(9)	ADAM GREEN	<u>2</u>	Х						0.	0.	0.
(10)	BRUCE KENDALL	2							0.	0.	0.
	DIRECTOR	0	Х						0.	0.	0.
(11)	KIM KIMBELL	2									
(1.0)	DIRECTOR	0	Х						0.	0.	0.
(12)	KATHY YEUNG DIRECTOR	<u>2</u>	Х						0.	0.	0.
(13)	NADRA EHRMAN	2									
	DIRECTOR	0	Х						0.	0.	0.
(14)	BARBARA LINDEMANN		v						_		
BAA	DIRECTOR	0	X	07/01/	10				0.	0.	0.
БАА		TEEA0	10/L	0//31/	19						Form 990 (2019)

94-1728064 Page 8

Par	t VII Section A. Officers, Directors, Tru	stees,	Key	Em	nplo	bye	es,	and	d Highest Com	pensated Emp	loyees	(continued)
		(B)			(0	•						
	(A) Name and title	Average hours per week	box	, unle	ss pe	erson	e than is botl or/trus	h an	(D) Reportable compensation from	(E) Reportable compensation from	Estimate	(F) ed amount other
		(list any hours	or di	Instit	Officer	Key	High empl	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compens the org	sation from anization
		for related organiza	Individual trustee or director	nstitutional trustee	er	Key employee	est co loyee	ner				related izations
		- tions below	ir I trus	altru		oyee	ompe					
		dotted line)	jee	stee			Highest compensated employee					
(15)	PAT MCELROY	2										
<u>(</u>)	DIRECTOR	0	Х						0.	0.		0.
(16)	CAROLYN FITZGERALD	<u>-4</u> _	v						0	0		0
(17)	DIRECTOR	U	Х						0.	0.		0.
(18)												
(19)												
(20)												
(20)												
(21)												
(22)												
(23)			-									
(24)												
(25)												
<u></u>												
	Subtotal								231,291.	0.		5,555.
	Total from continuation sheets to Part VII, Section Total (add lines 1b and 1c)							•	0. 231,291.	0.		0.
2	Total number of individuals (including but not limited							ved			ensation	57555.
	from the organization 2										,	Vee Ne
3	Did the organization list any former officer, direct	or truste	o ka		mnla		or	hiał	hest compensated	employee		Yes No
Ū	on line 1a? If 'Yes,' complete Schedule J for such										. 3	Х
4	For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	r than \$1	50,00	20'?	lf 'Y	∕es,	con	nple	te Schedule J for		. 4	X
5	Did any person listed on line 1a receive or accrue for services rendered to the organization? If 'Yes	e comper	isatio	n fro	om : Iule	any	unre	late	ed organization or	individual	5	X
	ion B. Independent Contractors	, compre		mea	are	0 10	1 540	<i></i>			· •	21
1	Complete this table for your five highest compens compensation from the organization. Report compension											
	(A) Name and business addr					-			(B) Description of	of services	(C) Compen) sation
									Doscription		Compon	Sution
2	Total number of independent contractors (including b		ited to	o tho	ose l	isteo	l abo	ve)	who received more	than		
	\$100,000 of compensation from the organization	▶ 0										

Form 990 (2019)COMMUNITYENVIRONMENTALCOUNCIL94-1728064Page 9

Part VIII Statement of Revenue

 Check if Schedule O contains a response or note to any line in this Part VIII
 (A)
 (B)
 (C)
 (D)

		(A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from tax
			function	revenue	under sections
(D. (D)	1a Federated campaigns 1a		revenue		512-514
Contributions, Gifts, Grants and Other Similar Amounts	b Membership dues	-			
no Gr	c Fundraising events	-			
ifts, Ir A	d Related organizations 1d				
s, G nila	e Government grants (contributions) 1 e				
Sil	f All other contributions, gifts, grants, and				
buti	similar amounts not included above 1f 614,722. g Noncash contributions included in	-			
1 of	lines 1a-1f 1g 13,827.				
Col	h Total. Add lines 1a-1f	777,605.			
Program Service Revenue	Business Code				
ever	2a <u>GRANTS & CONTRACTS</u>	452,711.	452,711.		
еŘ	<pre>b EARTH_DAY_PROGRAM</pre>	249,899.	249,899.		
vic	C SOLARIZE PROGRAM	51,644.	51,644.		
Se	d				
ram	f All other program service revenue				
rog	g Total. Add lines 2a-2f►				
<u>d</u>	3 Investment income (including dividends, interest, and	754,254.			
	other similar amounts)	131,627.		33.	131,594.
	4 Income from investment of tax-exempt bond proceeds►				
	5 Royalties				
	(i) Real (ii) Personal				
	6 a Gross rents 6a				
	b Less: rental expenses 6b				
	c Rental income or (loss) 6c				
	d Net rental income or (loss)►				
	7 a Gross amount from sales of assets				
	other than inventory 7a 582, 903.				
	b Less: cost or other basis and sales expenses 7b 540,256.				
	c Gain or (loss) 7c 42,647.				
	d Net gain or (loss)	42,647.	42,647.		
¢	8 a Gross income from fundraising events	12/01/1	1270171		
enne	(not including \$ 162,883.				
eve	of contributions reported on line 1c).				
Other Rev	See Part IV, line 18 8a 66, 880.				
hei	b Less: direct expenses 8b 120,668.				
δ	c Net income or (loss) from fundraising events►	-53,788.			-53,788.
	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 and allowances 10a				
	b Less: cost of goods sold 10b				
	c Net income or (loss) from sales of inventory►				
SU	Business Code				
Miscellaneous Revenue	¹¹ ^a <u>UBI_INCOME_FROM_K-1722100</u>	128,392.		128,392.	
scellaneo Revenue	b				
Rev	d All other revenue				
Mis	e Total. Add lines 11a-11d►	128,392.			
	12 Total revenue. See instructions	1,780,737.	796,901.	128,425.	77,806.
BAA		A0109L 07/31/19	, , , , , , , , , , , , , , , , , , , ,	120/120,	Form 990 (2019)

Form 990 (2019) COMMUNITY ENVIRONMENTAL COUNCIL

Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX. Х (D) (A) (B) (C) Do not include amounts reported on lines Total expenses Program service Management and Fundraising 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21..... Grants and other assistance to domestic individuals. See Part IV, line 22 2 Grants and other assistance to foreign 3 organizations, foreign governments, and for-eign individuals. See Part IV, lines 15 and 16 Δ Benefits paid to or for members Compensation of current officers, directors, 5 trustees, and key employees 127,272. 63,636. 31,818 31,818. Compensation not included above to 6 disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)..... 0 0 0 0. 7 Other salaries and wages 32,577 549,630 415,158 101,895. Pension plan accruals and contributions 8 (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 77,121 53,415 2,631 21,075. Payroll taxes 10 53,957 38,513 10,776. 4,668 11 Fees for services (nonemployees): a Management c Accounting..... 84,880 84,880 d Lobbying..... e Professional fundraising services. See Part IV, line 17... 21,000 21,000. f Investment management fees 14,598 14,598 Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0. SCH. q 432,629. 438,062 5,433. Advertising and promotion. 12 13,892. 11,891. 2,001. 13 Office expenses 207,987. 180,830 9,903 17,254. Information technology..... 14 15 Royalties..... Occupancy..... 100,943. 75,796. 17,480. 16 7,667. 17 Travel 7,422 7,306. 116. Payments of travel or entertainment 18 expenses for any federal, state, or local public officials. Conferences, conventions, and meetings.... 19 36,906 18,816 7.010 11,080. 20 Interest 21 Payments to affiliates..... 22 Depreciation, depletion, and amortization.... 1,094. 773. 97. 224. 23 Insurance 12,833. 9,064 1,139. 2,630. 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 O.).... 76,375 a <u>STRATEGIC PLANNING</u> 53,947 6,777 15,651. **b** PRINTING AND PUBLICATIONS 16,413 8,678 7,735. 6,000 6,000 • BAD DEBT d <u>TAXES, LICENSES AND FEES</u> 2,690 2.690 1,819 188 1,631. e All other expenses.....

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ______ if following SOP 98-2 (ASC 958-720).....

25 Total functional expenses. Add lines 1 through 24e. . .

1,373,142

1,850,894

262,366.

215,386

Form 990 (2019) COMMUNITY ENVIRONMENTAL COUNCIL Part X Balance Sheet

Pa	art X	Balance Sheet Check if Schedule O contains a response or note to	o any line in this Part X			
		· · · · · · · · · · · · · · · · · · ·		(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing		232,997.	1	139,221.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net		60,000.	3	50,649.
	4	Accounts receivable, net		141,530.	4	229,590.
	5	Loans and other receivables from any current or form trustee, key employee, creator or founder, substantial controlled entity or family member of any of these per	er officer, director, contributor, or 35% rsons		5	
	6	Loans and other receivables from other disqualified p	ersons (as defined under			
	-	section 4958(f)(1)), and persons described in section			6	
	7	Notes and loans receivable, net			7	
2	8	Inventories for sale or use	_		8	
Assets	9	Prepaid expenses and deferred charges		3,156.	9	17,259.
As	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	I I F			
		Less: accumulated depreciation		3,955.	10 c	2,861.
		Investments – publicly traded securities		2,246,168.	11	2,506,847.
	12	Investments – other securities. See Part IV, line 11.		290,000.	12	290,000.
	13	Investments – program-related. See Part IV, line 11.			13	
	14	Intangible assets.			14	
	15	Other assets. See Part IV, line 11	F	60,599.	15	40,570.
	16	Total assets. Add lines 1 through 15 (must equal line	33)	3,038,405.	16	3,276,997.
	17	Accounts payable and accrued expenses		103,177.	17	124,581.
	18	Grants payable			18	10.000
	19	Deferred revenue			19	10,000.
6	20	Tax-exempt bond liabilities			20	
ië.	21	Escrow or custodial account liability. Complete Part I			21	
Liabilities	22	Loans and other payables to any current or former off key employee, creator or founder, substantial contribu controlled entity or family member of any of these per	utor. or 35%		22	
	23	Secured mortgages and notes payable to unrelated th	nird parties		23	
	24	Unsecured notes and loans payable to unrelated third	parties		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com	es to related third parties, plete Part X of Schedule D.	15,000.	25	9,271.
	26	Total liabilities. Add lines 17 through 25		118,177.	26	143,852.
Balances		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	ε► <u>Χ</u>			
lar	27	Net assets without donor restrictions		2,679,721.	27	2,911,762.
ñ	28	Net assets with donor restrictions		240,507.	28	221,383.
Fund		Organizations that do not follow FASB ASC 958, che and complete lines 29 through 33.	ck here ►			
S.i.		Capital stock or trust principal, or current funds	F		29	
5	29				30	
ets o	29 30	Paid-in or capital surplus, or land, building, or equipm	nent fund		30	
ssets or					31	
Net Assets of	30	Paid-in or capital surplus, or land, building, or equipm	or other funds	2,920,228.		3,133,145.

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Form 990 (2019)

Form	1 990 (2019) COMMUNITY ENVIRONMENTAL COUNCIL 94-1	728064		Pa	ge 12
Par	t 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	1,7	80,7	37.
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,8	50,8	94.
3	Revenue less expenses. Subtract line 2 from line 1	3		70,1	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,9		
5	Net unrealized gains (losses) on investments	5		83,0	
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,				
		10	3,1	33,1	.45.
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2-	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
20			2 a		Λ
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both:	l on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2 b	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate	9			
	basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
c	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.				
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		Х
h	If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
BAA	TEEA0112L 01/21/20		Form	990 ((2019)

SCH	EDUI	E A	
(Form	990 0	r 990	-F7

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.

OMB No. 1545-0047 2019

Departi Interna	nent I Rev	of the Treasury venue Service	► (orm990 for instructions			nformation.	Open to Public Inspection
Name	of the	e organization						Employer identifi	cation number
COM	MU	NITY ENVI	RONMENTAL	COUNCIL				94-17280	54
Par	t I	Reason fo	r Public Cha	rity Status (All o	rganizations must o	comple	te this	part.) See instru	ctions.
The c	orga	nization is not	a private found	dation because it is: ((For lines 1 through 12,	check o	nly one	box.)	
1					hurches described in sect			i).	
2					Schedule E (Form 990 or				
3					ization described in sec				
4			-	tion operated in conj	unction with a hospital of	describe	d in sec	ction 170(b)(1)(A)(iii).	Enter the hospital's
_		name, city, a							
5		An organizati section 170(b	on operated for b)(1)(A)(iv). (Co	the benefit of a colle mplete Part II.)	ege or university owned	or opera	ated by	a governmental unit o	lescribed in
6		A federal, sta	te, or local gov	ernment or governme	ental unit described in s	ection 1	70(b)(1)	(A)(∨).	
7	Х	An organizatio in section 17	on that normally r 0(b)(1)(A)(vi). (eceives a substantial p Complete Part II.)	part of its support from a	governm	ental un	it or from the general p	ublic described
8		A community	trust described	in section 170(b)(1)	(A)(vi). (Complete Part I	l.)			
9		An agricultura	l research organi	zation described in see	ction 170(b)(1)(A)(ix) oper	ated in c	onjuncti	on with a land-grant col	lege
	-	-	r a non-land-grai	nt college of agriculture	e (see instructions). Enter	the nam	ne, city,	and state of the college	or
		university:							
10		from activities investment in	s related to its e come and unre	exempt functions-su	1 33-1/3% of its support fr bject to certain exceptic le income (less section Part III.)	ons, and	(2) no	more than 33-1/3% of	its support from gross
11					ely to test for public safe	ety. See	sectior	n 509(a)(4).	
12		An organizati	on organized a	nd operated exclusive	ely for the benefit of, to	perform	the fur	ictions of, or to carry of	out the purposes of one
	L	or more publi	cly supported o	rganizations describe	ed in section 509(a)(1) of supporting organization	ir sectio	n 509(a)(2). See section 509(a)(3). Check the box in
а	Г		5	21	ed, or controlled by its sup			, , , ,	
		organization(s) the power to re t IV, Sections A	gularly appoint or elec	t a majority of the director	rs or trus	tees of	the supporting organization	tion. You must
b		Type II. A sup management of	oporting organiz	ation supervised or o organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), by the supported organization	v having control or tion(s). You
	_	1	te Part IV, Sect						
С		organization	onally integrated s) (see instructi	. A supporting organizations). You must com	tion operated in connection plete Part IV, Sections A	n with, ar A, D, an e	nd functi d E.	onally integrated with, its	s supported
d		functionally in	ntegrated. The c	organization generally	ganization operated in cor y must satisfy a distribu 1s A and D, and Part V.	nnection tion requ	with its : uiremen	supported organization(t and an attentiveness	s) that is not s requirement (see
е					ten determination from t		that it is	a Type I, Type II, Ty	pe III functionally
					supporting organization	1.			
				organizations n about the supporte	d organization(s)				
		ame of supported of	-	(ii) EIN	(iii) Type of organization	(iv)	e the	(v) Amount of monetary	(vi) Amount of other
			5		(described on lines 1-10 above (see instructions))	organizat in your g	ion listed	support (see instructions)	support (see instructions)
						docur	nent?		
						Yes	No		
(A)									
(B)									
(C)									
(D)									
<u>(E)</u>									
Total									

Schedule A (Form 990 or 990-EZ) 2019	COMMUNITY	ENVIRONMENTAL	COUNCIL
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Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Cale begi	ndar year (or fiscal year nning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	779,339.	791,902.	369,980.	545,311.	777,605.	3,264,137.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	779,339.	791,902.	369,980.	545,311.	777,605.	3,264,137.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.
6	Public support. Subtract line 5 from line 4						3,264,137.
Sec	tion B. Total Support						
	ndar year (or fiscal year nning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4	779,339.	791,902.	369,980.	545,311.	777,605.	3,264,137.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	98,895.	32,325.	16,122.	48,619.	131,627.	327,588.
9	Net income from unrelated business activities, whether or not the business is regularly carried on			20,350.	68,017.	128,425.	216,792.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11	Total support. Add lines 7 through 10						3,808,517.
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	1,821,644.
	First five years. If the Form 990 is organization, check this box and	stop here		rd, fourth, or fifth t	ax year as a sectio	on 501(c)(3)	► 🗌
Sec	tion C. Computation of Pu	blic Support P	ercentage				
	Public support percentage for 20						85.71%
15	Public support percentage from	2018 Schedule A,	Part II, line 14			15	88.52%
16a	33-1/3% support test—2019. If t and stop here. The organization	he organization di qualifies as a put	d not check the b blicly supported or	ox on line 13, and ganization	d line 14 is 33-1/3	3% or more, check	this box ► X
b	33-1/3% support test-2018. If the and stop here. The organization	e organization dic qualifies as a put	I not check a box plicly supported of	on line 13 or 16a	i, and line 15 is 3	3-1/3% or more, o	check this box ►
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	est-2019. If the or meets the 'facts-a s-and-circumstanc	ganization did not ind-circumstances es' test. The orga	t check a box on s' test, check this nization qualifies	line 13, 16a, or 1 box and stop her as a publicly sup	6b, and line 14 is r e. Explain in Part ported organizatio	10% : VI how on►
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-an	meets the 'facts-a d-circumstances' t	nd-circumstances test. The organiza	s' test, check this tion qualifies as a	box and stop her a publicly support	e. Explain in Parled organization.	t VI how the
18	Private foundation. If the organize	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,	, or 17b, check th	is box and see ins	structions ►

Schedule A (Form 990 or 990-EZ) 2019

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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.)

Sec	tion A. Public Support						
Calend 1	lar year (or fiscal year beginning in) ► Gifts, grants, contributions, and membership fees	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	any 'unusual grants.')						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is						
	related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513.						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	Amounts from line 6						()
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
с 11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 organization, check this box and	is for the organiz	ation's first, secor	nd, third, fourth, c	or fifth tax year as	a section 501(c)(3	³⁾ ▶□
Sec	tion C. Computation of Pu	blic Support F	Percentage				
15	Public support percentage for 20	019 (line 8, colum	n (f), divided by li	ne 13, column (f))	15	010
16	Public support percentage from	2018 Schedule A,	Part III, line 15.			16	olo
Sec	tion D. Computation of Inv	estment Incor	ne Percentage	e		• •	
17	Investment income percentage f	or 2019 (line 10c,	column (f), divide	ed by line 13, col	umn (f))	17	0\0
18	Investment income percentage f	rom 2018 Schedu	lle A, Part III, line	17		18	0\0
19a	33-1/3% support tests—2019. If is not more than 33-1/3%, check						
b	33-1/3% support tests – 2018. If Inne 18 is not more than 33-1/3%	the organization c	lid not check a bo	x on line 14 or lir	ne 19a, and line 1	6 is more than 33-	1/3%, and
20	Private foundation. If the organi						
20	i invate iounuation. It the organi			יד, ישמ, טו ושט, נ	LIGGER UNS DUX dIIC		····· ·

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

No Yes Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 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. 1 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 2 described in section 509(a)(1) or (2). 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below. 3a **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. 3b 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. 3c 4a Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below. 4a **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. Δh **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. 4c 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by 5a 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? 5b c Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c 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 6 or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of 6 the filing organization's supported organizations? If 'Yes,' provide detail in Part VI. 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ). 7 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' 8 complete Part I of Schedule L (Form 990 or 990-EZ). 8 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. 9a **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If 'Yes,' provide detail in Part VI.* 9b c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If 'Yes,' provide detail in Part VI*. 9c 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below. 10a **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.)

10b

		Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?			
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b A family member of a person described in (a) above?	11b		
c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		

Section B. Type I Supporting Organizations

- Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint 1 or elect at least a majority of the organization's directors or trustees at all times during the tax year? If No, describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

Section C. Type II Supporting Organizations

	_	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>	1		

Section D. All Type III Supporting Organizations

Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the 1 organization's governing documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played 3 in this regard.

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
 - The organization satisfied the Activities Test. Complete line 2 below. а
 - The organization is the parent of each of its supported organizations. Complete line 3 below. b
 - The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions). С

2 Activities Test. Answer (a) and (b) below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- **b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in **Part VI** the role played by the organization in this regard.

No

Yes

2a

2b

3a

3h

Yes

1

2

No

Schedule A (Form 990 or 990-EZ) 2019 COMMUNITY ENVIRONMENTAL COUNCIL Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

94-1728064

Page 6

1 Check here if the organization satisfied the instructions. All other Type III non-function	Integral Part Test as a qualifying trust on nally integrated supporting organizations	on Nov s must	20, 1970 (explain ir complete Sections A	n Part VI). See through E.
ection A – Adjusted Net Income			(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain		1		
2 Recoveries of prior-year distributions		2		
3 Other gross income (see instructions)		3		
4 Add lines 1 through 3.		4		
5 Depreciation and depletion		5		
6 Portion of operating expenses paid or incurred for income or for management, conservation, or m 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		
ection B – Minimum Asset Amount			(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt- tax year or assets held for part of year):	use assets (see instructions for short			
a Average monthly value of securities		1a		
b Average monthly cash balances		1b		
c Fair market value of other non-exempt-use ass	sets	1c		
d Total (add lines 1a, 1b, and 1c)		1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):				
2 Acquisition indebtedness applicable to non-exe	empt-use assets	2		
3 Subtract line 2 from line 1d.		3		
4 Cash deemed held for exempt use. Enter 1-1/2 see instructions).	2% of line 3 (for greater amount,	4		
5 Net value of non-exempt-use assets (subtract	line 4 from line 3)	5		
6 Multiply line 5 by .035.		6		
7 Recoveries of prior-year distributions		7		
8 Minimum Asset Amount (add line 7 to line 6)		8		
ection C – Distributable Amount				Current Year
1 Adjusted net income for prior year (from Section	on A, line 8, Column A)	1		
2 Enter 85% of line 1.		2		
3 Minimum asset amount for prior year (from Se	ction 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 temporary reduction (see instructions).	e 4, unless subject to emergency	6		
				•

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

BAA

Schedule A (Form 990 or 990-EZ) 2019

Part V Type III Non-Functionally Integrated 509(a)(3) Su	pporting Organiza	tions (continued)	
Section D – Distributions			Current Year
1 Amounts paid to supported organizations to accomplish exempt pu	rposes		
2 Amounts paid to perform activity that directly furthers exempt purposes of in excess of income from activity	of supported organization	S,	
3 Administrative expenses paid to accomplish exempt purposes of su	pported organizations		
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval required)			
6 Other distributions (describe in Part VI). See instructions.			
7 Total annual distributions. Add lines 1 through 6.			
8 Distributions to attentive supported organizations to which the organization in Part VI). See instructions.	on is responsive (provide	details	
9 Distributable amount for 2019 from Section C, line 6			
10 Line 8 amount divided by line 9 amount			
Section E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required – explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, 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 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015			
b Excess from 2016			
c Excess from 2017			
d Excess from 2018			
e Excess from 2019			

BAA

Schedule A (Form 990 or 990-EZ) 2019

SCI	HEDULE D	Sun	plemental Financial St	atomonte		OMB No. 1545-0047
	rm 990)	2019				
Depar Intern	tment of the Treasury al Revenue Service	► Go to www.irs	Attach to Form 990. gov/Form990 for instructions and	d the latest information.		Open to Public Inspection
Name	of the organization				Employer in	dentification number
	2010 (INITE)		mott		04 176	00004
Par		(ENVIRONMENTAL CO	or Advised Funds or Other	Similar Funds or Acc	94-172 counts.	8064
r ai	Complete	if the organization ans	wered 'Yes' on Form 990, P	Part IV, line 6.	ountsi	
			(a) Donor advised fund	ds (b) F	unds and	other accounts
1		end of year				
2		ntributions to (during year)				
3 4		at end of year				
5	Did the organizati	ion inform all donors and do	nor advisors in writing that the ass organization's exclusive legal cor	sets held in donor advised	funds	Yes No
6	Did the organizati	ion inform all grantees, donc poses and not for the benefi	rs, and donor advisors in writing t t of the donor or donor advisor, or	hat grant funds can be use for any other purpose cor	ed only]Yes
Par		tion Easements.			L	
			wered 'Yes' on Form 990, F			
1			y the organization (check all that a	apply). Preservation of a histo	ricolly imp	artant land area
		f land for public use (for exam natural habitat		Preservation of a certif		
		of open space				
2		through 2d if the organization	neld a qualified conservation contribu	ution in the form of a conser	vation ease	ement on the
					leld at the	End of the Tax Year
			·····			
	0	2	ments fied historic structure included in (
			n (c) acquired after 7/25/06, and r			
	structure listed in	the National Register		2 d		
3	Number of conserv tax year ►	vation easements modified, trai	nsferred, released, extinguished, or t	erminated by the organizatio	n during th	le
4	· · · · ·	where property subject to conse	ervation easement is located >			
5			garding the periodic monitoring, in			
6			nts it holds? inspecting, handling of violations, an			Yes No
7	Amount of expense ►\$	es incurred in monitoring, inspe	ecting, handling of violations, and en	forcing conservation easeme	ents during	the year
8	Does each conser and section 170(h	rvation easement reported o n)(4)(B)(ii)?	n line 2(d) above satisfy the requi	rements of section 170(h)(4)(B)(i)	Yes No
9	In Part XIII, descr include, if applica conservation ease	able, the text of the footnote	oorts conservation easements in it to the organization's financial stat	s revenue and expense st ements that describes the	atement a organizati	nd balance sheet, and ion's accounting for
Par	t III Organizat Complete	tions Maintaining Colle if the organization ans	ctions of Art, Historical Tre wered 'Yes' on Form 990, F	easures, or Other Sin Part IV, line 8.	ıilar Ass	ets.
1 a	historical treasure	es, or other similar assets he	r FASB ASC 958, not to report in Id for public exhibition, education, Il statements that describes these	, or research in furtherance	balance s e of public	heet works of art, service, provide in
ł	following amounts	s relating to these items:	r FASB ASC 958, to report in its r or public exhibition, education, or res			t works of art, provide the
			line 1			
2						lowing
			historical treasures, or other similar a ASC 958 relating to these items:			lowilly

b Assets included in Form 990, Part X	
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.	TEEA3301L 8/22/19

►\$ EA3301L 8/22/19 Schedule D (Form 990) 2019

Schedule D (Form 990) 2019 COMMU				94-1728	
Part III Organizations Maintai	ning Collections	of Art, Histori	cal Treasures, or (Other Similar Asse	ets (continued)
3 Using the organization's acquisition items (check all that apply):	, accession, and other	records, check any	of the following that mak	ke significant use of its o	collection
a Public exhibition			exchange program		
b Scholarly research		e Other			
c Preservation for future gener					
4 Provide a description of the organiz Part XIII.			-		
5 During the year, did the organiza to be sold to raise funds rather the	tion solicit or receive	donations of art, I	nistorical treasures, or	other similar assets	Yes No
Part IV Escrow and Custodia					
line 9, or reported an a	amount on Form	990, Part X, lir	ne 21.		in soo, raitiv,
1 a Is the organization an agent, trus on Form 990, Part X?	tee, custodian or oth	er intermediary fo	r contributions or other	assets not included	Yes No
b If 'Yes,' explain the arrangement				L L	
				/	Amount
c Beginning balance				. 1c	
d Additions during the year				. 1d	
e Distributions during the year				. 1 e	
f Ending balance				. 1f	
2 a Did the organization include an a				L	
b If 'Yes,' explain the arrangement	in Part XIII. Check h	ere if the explanat	ion has been provided	on Part XIII	
Part V Endowment Funds. C				· · · · · · · · · · · · · · · · · · ·	
1 a Beginning of year balance	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
b Contributions	2,580,037.	2,917,222	2. 3,161,221 5,000		3,798,357.
			5,000	•	
c Net investment earnings, gains, and losses	490,942.	-51,260). 123,473	. 125,365.	-27,501.
d Grants or scholarships					
e Other expenditures for facilities and programs	250,292.	285,92	5. 351,777	. 360,000.	375,000.
f Administrative expenses	200,202.	200,92	20,695		373,000.
q End of year balance	2,820,687.	2,580,03			3,395,856.
2 Provide the estimated percentage					0,000,0001
a Board designated or quasi-endowm	ent ► 95	.37 %			
b Permanent endowment ►	4.63 %				
c Term endowment ►	010				
The percentages on lines 2a, 2b, ar	nd 2c should equal 100	1%.			
3a Are there endowment funds not in t	he possession of the o	rganization that are	held and administered f	or the	
organization by:					Yes No
(i) Unrelated organizations					3a(i) X
(ii) Related organizations					3a(ii) X
b If 'Yes' on line 3a(ii), are the rela	-	•			3b
4 Describe in Part XIII the intended		ation's endowment	funds. SEE PART	XIII	
Part VI Land, Buildings, and Complete if the organi		'Yes' on Form	990 Part IV line	11a See Form 990) Part X line 10
Description of property		or other basis	(b) Cost or other	(c) Accumulated	(d) Book value
	(in	vestment)	basis (other)	depreciation	
1 a Land					
b Buildings					
c Leasehold improvements			307,429.	307,429.	0.
d Equipment			19,376.	19,318.	58.
e Other Total. Add lines 1a through 1e. (Column		m 990 Part V and	<u>25,419.</u>	22,616.	2,803.
BAA	in (u) must equal For	тээо, ган л, сог	unni (D), nne 100.)	Schedu	2,861. Ile D (Form 990) 2019
				Julieut	

Part VII		 Other Securities. 			
				0, Part IV, line 11b. See Form 9	
(a) Desc	ription of security or cat	tegory (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-o	of-year market value
(1) Financ	ial derivatives				
(2) Closely	y held equity intere	ests			
(3) Other	INVESTMENT	IN_WEST_BEACH_INV	290,000.	END OF YEAR MARKET VALU	Ξ
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
(I)					
		990, Part X, column (B) line 12.) 🕨	290,000.		
Part VIII	Investments	– Program Related.			
	(a) Description of			0, Part IV, line 11c. See Form 9	
	(a) Description d	of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)	nn (h) must squal Form	990, Part X, column (B) line 13.) 🕨			
Part IX	Other Assets		N/A		
	Complete if th	ne organization answered	'Yes' on Form 990), Part IV, line 11d. See Form 9	90, Part X, line 15.
		(a) Des	scription		(b) Book value
(1)					
(2)					
(3) (4)					
(5)					· · · · · · · · · · · · · · · · · · ·
(6)					
(7)					
(8)					
(9)					
(10)					
Total. (Co			3) line 15.)	· · · · · · · · · · · · · · · · · · ·	
Part X	Other Liabiliti	ies.			
	Complete if the o			1e or 11f. See Form 990, Part X, line 25	
1.	ral income taxes	(a) Descr	iption of liability		(b) Book value
(1) Tede					9,271.
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
				••••••	9,271.
2. Liability fo				nancial statements that reports the organization's SE	
	under EACD ACC 740 0	book hara if the tast of the featuret - 1	boon provided in Dart VIII		

94-1728064

Page 3

Schedule D (Form 990) 2019 COMMUNITY ENVIRONMENTAL COUNCIL	94-1728	064 Page 4
Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	ber Return.	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	2,049,213.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments	074.	
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d	2e	283,074.
3 Subtract line 2e from line 1	3	1,766,139.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		, ,
a Investment expenses not included on Form 990, Part VIII, line 7b 4a 14,	598.	
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b	4c	14,598.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,780,737.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses	s per Return	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	•	
1 Total expenses and losses per audited financial statements	1	1,836,296.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		· · · · ·
a Donated services and use of facilities 2a		
b Prior year adjustments		
c Other losses.		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2e	
3 Subtract line 2e from line 1	3	1,836,296.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a 14,	598.	
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b		14,598.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,850,894.
Part XIII Supplemental Information.		

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

PART V, LINE 4 - INTENDED USES OF ENDOWMENT FUND

THE INTENDED USE OF THE ENDOWMENT FUND IS TO SUPPORT THE PROGRAMS OF THE

ORGANIZATION.

PART X - FASB ASC 740 FOOTNOTE

THE ORGANIZATION EVALUATES UNCERTAIN TAX POSITIONS, WHEREBY THE EFFECT OF THE

UNCERTAINTY WOULD BE RECORDED IF THE OUTCOME WAS CONSIDERED PROBABLE AND REASONABLY

ESTIMABLE. AS OF DECEMBER 31, 2019, THE ORGANIZATION HAD NO UNCERTAIN TAX POSITIONS

REQUIRING ACCRUAL.

BAA

Schedule D (Form 990) 2019

	Supplem	ental Informa	ition Reg	jarding F	undraising or Gami	ng Activities	OMB No. 1545-0047			
SCHEDULE G (Form 990 or 990-EZ)	Comple	2019								
Department of the Treasury Internal Revenue Service	► G	Open to Public Inspection								
Name of the organization		Employer ide								
COMMUNITY ENVI	-		ation answe	ared 'Yes' (on Form 990, Part IV, line	94-172806	4			
Fart Form 990-E2	Z filers are not re	equired to comp	lete this p	art.						
 Indicate whether a X Mail solicitation 	-	raised funds thr	rough any		owing activities. Check					
	email solicitation	s		e f	X Solicitation of gove	0 0				
c X Phone solicita		5		-	X Special fundraising	-				
d X In-person soli				9	[] - p - c - c - c - c - c - c - c - c - c					
employees listed	in Form 990, Pa	rt VII) or entity i	in connect	tion with p	including officers, director rofessional fundraising	services?	XYes No			
b If 'Yes,' list the 10 compensated at l	0 highest paid in east \$5,000 by th	dividuals or enti he organization.	ties (fund	raisers) pu	ursuant to agreements ι	under which the fundra	iser is to be			
(i) Name and addres or entity (fundr		(ii) Activity	have custo	fundraiser dy or control ibutions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization			
THE KELLOGG O	RGANIZATION		Yes	No						
1 825 E. SPEER 1 DENVER CO 8023		CAMPAIGN CONSULTING		х	20,000.	21,000.				
2										
3										
4										
5										
6										
7										
8										
9										
10										
Total 3 List all states in whor licensing.					20,000. ontributions or has been	21,000. notified it is exempt from	0.			
<u>CA</u>										

Schedule G (Form 990 or 990-EZ) 2019 COMMUNITY ENVIRONMENTAL COUNCIL

94-1728064 Page **2**

Part II Fundraising Events. Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

R			(a) Event #1 <u>GREEN GALA</u> (event type)	(b) Event #2	(c) Other events NONE (total number)	(d) Total events (add column (a) through column (c))
REVENUE	1	Gross receipts	229,763.			229,763.
Ĕ	2	Less: Contributions	162,883.			162,883.
	3	Gross income (line 1 minus line 2)	66,880.			66,880.
	4	Cash prizes				
_	5	Noncash prizes				
DIRECT	6	Rent/facility costs	26,291.			26,291.
ĊŢ	7	Food and beverages	75,513.			75,513.
E X P	8	Entertainment	8,600.			8,600.
EXPENSES	9	Other direct expenses	10,264.			10,264.
S	10		0 ()			120,668.
	11	Net income summary. Subtract line 10 fr				-53,788.
Par	t III	Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a.	tion answered 'Yes	s' on Form 990, Pai	rt IV, line 19, or rep	ported more than
REVENUE			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add column (a) through column (c))
U E	1	Gross revenue				
F	2	Cash prizes				
EXPENSE PENSE	3	Noncash prizes				
CS TE S	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes%	Yes% No	Yes [%] No	
	7	Direct expense summary. Add lines 2 thr	ough 5 in column (d)		►	
	8	Net gaming income summary. Subtract li	ne 7 from line 1, colum	ın (d)		
t 10 a	IS the second se	re any of the organization's gaming license	g activities in each of th	nese states?		
ł) IT 'Y 	′es,' explain:				

Schedule G (Form 990 or 990-EZ) 2019

Schedule G (Form 990 or 990-EZ) 2019 COMMUNITY ENVIRONMENTAL COUNCIL 9	4-1728064	Page 3
11 Does the organization conduct gaming activities with nonmembers?	· · · · · · Yes	No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?		No
13 Indicate the percentage of gaming activity conducted in:		
a The organization's facility.		010
 b An outside facility. 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records 		010
Name ►		
Address ►		
 15 a Does the organization have a contract with a third party from whom the organization receives gaming revenue b If 'Yes,' enter the amount of gaming revenue received by the organization ► \$ and the of gaming revenue retained by the third party ► \$ c If 'Yes,' enter name and address of the third party: 	ue? Yes he amount	No
Name ►		
Address ►		'
16 Gaming manager information:		
Name ►		
Gaming manager compensation ► \$		
Description of services provided		
Director/officer Employee Independent contractor		
17 Mandatory distributions:		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the	
organization's own exempt activities during the tax year ► \$ Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, co	lumps (iii) and (<u></u>
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, co and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide an information. See instructions.		.∨J,

SCHEDULE O (Form 990 or 990-EZ)

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

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

94-1728064

Department of the Treasury Internal Revenue Service Name of the organization

COMMUNITY ENVIRONMENTAL COUNCIL

FORM 990, PART III, LINE 4D - OTHER PROGRAM SERVICES DESCRIPTION

PLASTICS

REDUCING THE USE OF PLASTICS: CEC WORKS TO PLAN FOR AND PROMOTE THE EDUCTION OF SINGLE USE PLASTICS IN SANTA BARBARA COUNTY. THIS INCLUDES PROGRAMS AND ADVOCACY EFFORTS TO REDUCE THE USE OF SINGLE USE PLASTIC BAGS, WATER BOTTLES AND STRAWS THROUGH PARTNERSHIPS WITH GROCERY STORES, SCHOOLS AND RESTAURANTS. WE ALSO EDUCATE STUDENTS AND THE BROADER COMMUNITY ABOUT REDUCING OTHER FORMS OF CONSUMER WASTE.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

THE BOARD OF DIRECTORS HAS DELEGATED REVIEW AND APPROVAL OF THE FORM 990 TO THE AUDIT COMMITTEE OF THE ORGANIZATION. AFTER THE AUDIT COMMITTEE REVIEWS AND APPROVES THE 990, THE FORM 990 IS THEN DISTRIBUTED TO THE FULL BOARD FOR REVIEW PRIOR TO FILING.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

ANNUALLY THE BOARD OF DIRECTORS MUST SIGN A CONFLICT OF INTEREST QUESTIONNAIRE THAT IDENTIFIES AND EXPLAINS ANY CONFLICT OF INTEREST THAT A BOARD MEMBER MAY HAVE. IF A CONFLICT OF INTEREST ARISES DURING THE YEAR TO A MATTER REQUIRING ACTION BY THE BOARD, THE BOARD MEMBER MUST IMMEDIATELY DISCLOSE THIS TO THE BOARD, RETIRE FROM THE ROOM IN WHICH THE BOARD IS MEETING AND SHALL NOT PARTICIPATE IN THE FINAL DELIBERATION OR DECISION REGARDING THE MATTER UNDER CONSIDERATION. THE MINUTES OF THE MEETING SHALL REFLECT THE CONFLICT OF INTEREST AND STATE THAT THE BOARD MEMBER WAS NOT PRESENT DURING THE FINAL DISCUSSION OR VOTE AND DID NOT VOTE.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS HAS CONTRACTED FOR A TWO YEAR TERM WITH THE EXECUTIVE DIRECTOR THAT DETERMINES HER COMPENSATION AND BENEFITS PACKAGE.

Schedule O (Form 990 or 990-EZ) (2019)	Page 2
Name of the organization	Employer identification number
COMMUNITY ENVIRONMENTAL COUNCIL	94-1728064

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT (CON DETERMINED BY LOOKING AT SALARY SURVEYS IN THE AREA OF SIMILAR SIZE NON-PROFITS AS WELL AS AT 990S OF SIMILAR ORGANIZATIONS NATIONWIDE. THE CONTRACT IS THEN APPROVED BY THE FULL BOARD OF DIRECTORS. ALL OTHER COMPENSATION FOR EMPLOYEES IS APPROVED AT THE TIME THE ANNUAL BUDGET IS APPROVED AND ACCEPTED BY THE BOARD OF DIRECTORS. FORM 990, PART VI, LINE 18 - EXPLANATION OF OTHER MEANS FORMS AVAILABLE FOR PUBLIC INSPECTION THE ORGANIZATION'S FORM 990 IS AVAILABLE AT WWW.CECSB.ORG/DONATE/FINANCIALS. THE FORM 990 IS ALSO AVAILABLE FROM THE ORGANIZATION UPON WRITTEN REQUEST TO THE ORGANIZATION AT THE ADDRESS LOCATED ON THIS RETURN.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AVAILABLE TO THE PUBLIC UPON REQUEST BY WRITING TO THE ADDRESS LOCATED ON THIS RETURN. IN ADDITION, THE ORGANIZATION'S DONOR PRIVACY POLICY CAN BE FOUND AT WWW.CECSB.ORG/DONATE/FINANCIALS.

FORM 990, PART IX, LINE 11G OTHER FEES FOR SERVICES

		(A)	(B) PROGRAM	(C) MANAGEMENT	(D) FUND-
		TOTAL	SERVICES	& GENERAL	RAISING
CONTRACT SERVICES		438,062.	432,629.	5,433.	
	TOTAL \$	438,062.	\$ 432,629.	\$ 5,433.	\$0.

12/31/19 2019 FEDERAL BOOK SUMMARY DEPRECIATION SCHEDULE

COMMUNITY ENVIRONMENTAL COUNCIL

94-1728064

PAGE 1

5/08/20

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<u>NO.</u>	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179/ SDA	PRIOR 179/ SDA/ DEPR.	METHOD	LIFE .	CURRENT DEPR.
ORN	∕I 990∕990-PF									
FU	RNITURE AND FIXTURES									
18	DANICA TABLE	10/01/84		96			96	S/L	12	0
19	DANICA TABLE	10/01/84		96			96	S/L	12	0
20	DANICA TABLE	10/01/84		96			96	S/L	12	0
21	DANICA TABLE	10/01/84		96			96	S/L	12	0
22	DRAWER FILING CABINET	2/01/90		121			121	S/L	12	0
23	BOWEN 4 DRAWER FILING CAB	10/01/86		100			100	S/L	12	0
24	OAK VENEER 6 DRAWER DESK	5/01/90		128			128	S/L	10	0
25	5 TIER OAK VENEER BOOK CA	3/15/89		65			65	S/L	10	0
26	2 DRAWER LETTER VERT FILE	3/26/93		90			90	S/L	10	0
27	2 DRAWER FILING CABINET	7/22/93		95			95	S/L	10	0
28	WALL OF HONOR	3/23/94		954			954	S/L	10	0
29	2 FILE CABINETS	5/31/94		258			258	S/L	10	0
30	OFFICE CHAIR	7/31/94		97			97	S/L	10	(
31	EXECUTIVE CHAIR	7/26/94		645			645	S/L	10	0
	4 2 DRAWER VERT FILES	9/30/94		383			383	S/L		C
	EVERYDAY STENO CHAIR	9/30/94		325			325	S/L		C
34	DESK	9/30/94		188			188	S/L		(
35	FILING CABINET	6/30/95		50			50	S/L	10	(
	FILING CABINET	6/30/95		50			50	S/L	10	(
	FRONT DESK WORK STATION	7/31/15		4,534			4,534	S/L		(
	WORKSTATION	10/01/97		226			226	S/L		(
39	EXEC BLACK LEATHER CHAIR	2/28/99		673			673	S/L		(
	EXEC CHAIR	4/30/99		1,199			1,199	S/L		(
	4 CHAIRS EXEC OFFICE	4/30/99		690			690	S/L		(
	OFFICE FURNITURE	8/31/01		1,393			1,393	S/L		(
	4 DRAWER LATERAL FILE	8/08/05		652			652	S/L		(
44	ULTIMATE BLINDS	9/30/05		3,105			3,105	S/L		(
	CONFERENCE ROOM CHAIRS	8/27/07		3,664			3,664	S/L		(
	FURNITURE	5/18/16		5,350			1,783	S/L		764
	TOTAL FURNITURE AND FIXTURE			25,419			21,852		-	764
IM	PROVEMENTS						-			
47	LEASEHOLD IMPROVEMENTS	9/30/05		307,429			307,429	S/L	10	(
	TOTAL IMPROVEMENTS			307,429		0	307,429		-	0

12/31/19 2019 FEDERAL BOOK SUMMARY DEPRECIATION SCHEDULE

COMMUNITY ENVIRONMENTAL COUNCIL

94-1728064

PAGE 2

5/08/20

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<u>NO.</u>	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179/ SDA	PRIOR 179/ SDA/ DEPR.	METHOD	LIFE.	CURRENT DEPR.
MA	ACHINERY AND EQUIPMENT									
1	SAMSUNG SMART HDTV	4/07/15		1,021			765	S/L	5	204
2	SERVER	5/20/11		3,844			3,844	S/L	5	0
3	COMPUTER	3/31/12		2,164			2,158	S/L	5	0
4	COMPUTER	8/15/14		1,076			950	S/L	5	126
5	DESKTOP COMPUTER W/ MONIT	4/30/07		821			821	S/L	5	0
6	ENPOWER COMPUTER	5/31/17		908			908	S/L	5	0
7	ENPOWER COMPUTER	5/31/17		908			908	S/L	5	0
8	DELL 120 MP DLP PROJECTOR	9/06/07		637			637	S/L	5	0
9	HP DV2410US LAPTOP	10/01/07		857			857	S/L	5	0
10	HP S3300F COMPUTER	3/01/08		1,237			1,237	S/L	5	0
11	DELL COMPUTER & MONITOR	7/01/08		1,234			1,234	S/L	5	0
12	EMPOWER NITRO 8 COMPUTER	3/01/08		1,145			1,145	S/L	5	0
13	HP LASERJET 1200	12/01/02		563			563	S/L	5	0
14	HP LASERJET 1200	12/01/02		563			563	S/L	5	0
15	HP LASERJET 1200	12/01/02		563			563	S/L	5	0
16	IBM COMPUTER	12/01/02		1,000			1,000	S/L	5	0
17	REFRIGERATOR	1/01/01		835			835	S/L	10	0
	TOTAL MACHINERY AND EQUIPME			19,376		0	18,988			330
	TOTAL DEPRECIATION			352,224		0	348,269		=	1,094
	GRAND TOTAL DEPRECIATION			352,224		0	348,269		-	1,094

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12/31/19

2019 FEDERAL BOOK DEPRECIATION SCHEDULE

COMMUNITY ENVIRONMENTAL COUNCIL

PAGE 1

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<u>_NO.</u>	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS 	DEPR. BASIS	PRIOR DEPR.	METHOD	<u>life_ra</u>	CURRENT TEDEPR.
FOR	M 990/990-PF														
FL	JRNITURE AND FIXTURES														
18	DANICA TABLE	10/01/84		96	6						96	96	S/L	12	0
19	DANICA TABLE	10/01/84		96	6						96	96	S/L	12	0
20	DANICA TABLE	10/01/84		96	6						96	96	S/L	12	0
21	DANICA TABLE	10/01/84		96	6						96	96	S/L	12	0
22	DRAWER FILING CABINET	2/01/90		121	1						121	121	S/L	12	0
23	BOWEN 4 DRAWER FILING CAB	10/01/86		100	0						100	100	S/L	12	0
24	OAK VENEER 6 DRAWER DESK	5/01/90		128	8						128	128	S/L	10	0
25	5 TIER OAK VENEER BOOK CA	3/15/89		65	5						65	65	S/L	10	0
26	2 DRAWER LETTER VERT FILE	3/26/93		90	0						90	90	S/L	10	0
27	2 DRAWER FILING CABINET	7/22/93		95	5						95	95	S/L	10	0
28	WALL OF HONOR	3/23/94		954	4						954	954	S/L	10	0
29	2 FILE CABINETS	5/31/94		258	8						258	258	S/L	10	0
30	OFFICE CHAIR	7/31/94		97	7						97	97	S/L	10	0
31	EXECUTIVE CHAIR	7/26/94		645	5						645	645	S/L	10	0
32	4 2 DRAWER VERT FILES	9/30/94		383	3						383	383	S/L	10	0
33	EVERYDAY STENO CHAIR	9/30/94		325	5						325	325	S/L	10	0
34	DESK	9/30/94		188	8						188	188	S/L	10	0
35	FILING CABINET	6/30/95		50	0						50	50	S/L	10	0
36	FILING CABINET	6/30/95		50	0						50	50	S/L	10	0
37	FRONT DESK WORK STATION	7/31/15		4,534	4						4,534	4,534	S/L	10	0
38	WORKSTATION	10/01/97		226	.6						226	226	S/L	10	0
39	EXEC BLACK LEATHER CHAIR	2/28/99		673	3						673	673	S/L	10	0
40	EXEC CHAIR	4/30/99		1,199	9						1,199	1,199	S/L	10	0

12/31/19

2019 FEDERAL BOOK DEPRECIATION SCHEDULE

PAGE 2

CLIENT CEC

COMMUNITY ENVIRONMENTAL COUNCIL

				v	U									~	
5/08/2	0														02:12PM
<u>NO.</u>	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE RATE	CURRENT DEPR.
41	4 CHAIRS EXEC OFFICE	4/30/99		690	0						690	690	S/L	10	0
42		8/31/01		1,393							1,393	1,393	S/L	10	0
43	4 DRAWER LATERAL FILE	8/08/05		652							652	652	S/L	10	0
44	ULTIMATE BLINDS	9/30/05		3,10	5						3,105	3,105	S/L	10	0
45	CONFERENCE ROOM CHAIRS	8/27/07		3,664							3,664	3,664	S/L	7	0
46	FURNITURE	5/18/16		5,350	C						5,350	1,783	S/L	7	764
	TOTAL FURNITURE AND FIXTURE		-	25,419	9	0	0	(0 (0 0	25,419	21,852			764
IN	IPROVEMENTS														
47	LEASEHOLD IMPROVEMENTS	9/30/05		307,429	9				<u> </u>		307,429	307,429	S/L	10	0
	TOTAL IMPROVEMENTS			307,429	Э	0	0	(0 (0 0	307,429	307,429			0
М	ACHINERY AND EQUIPMENT														
1	SAMSUNG SMART HDTV	4/07/15		1,02	1						1,021	765	S/L	5	204
2	SERVER	5/20/11		3,844	4						3,844	3,844	S/L	5	0
3	COMPUTER	3/31/12		2,164	4						2,164	2,158	S/L	5	0
4	COMPUTER	8/15/14		1,076	6						1,076	950	S/L	5	126
5	DESKTOP COMPUTER W/ MONIT	4/30/07		82	I						821	821	S/L	5	0
6	ENPOWER COMPUTER	5/31/17		908	3						908	908	S/L	5	0
7	ENPOWER COMPUTER	5/31/17		908	8						908	908	S/L	5	0
8	DELL 120 MP DLP PROJECTOR	9/06/07		637	7						637	637	S/L	5	0
9	HP DV2410US LAPTOP	10/01/07		857	7						857	857	S/L	5	0
10	HP S3300F COMPUTER	3/01/08		1,232	7						1,237	1,237	S/L	5	0
11	DELL COMPUTER & MONITOR	7/01/08		1,234	4						1,234	1,234	S/L	5	0
12	EMPOWER NITRO 8 COMPUTER	3/01/08		1,14	5						1,145	1,145	S/L	5	0

12/31/19

2019 FEDERAL BOOK DEPRECIATION SCHEDULE

PAGE 3

CLIENT CEC

COMMUNITY ENVIRONMENTAL COUNCIL

5/08/20)															02:12PM
<u>_NO.</u>	DESCRIPTION	DATE <u>ACQUIRED</u>	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	Prior 179/ Bonus/ SP. Depr.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE.	RATE	CURRENT DEPR.
13	HP LASERJET 1200	12/01/02		563							563	563	S/L	5		0
14	HP LASERJET 1200	12/01/02		563							563	563	S/L	5		0
15	HP LASERJET 1200	12/01/02		563							563	563	S/L	5		0
16	IBM COMPUTER	12/01/02		1,000							1,000	1,000	S/L	5		0
17	REFRIGERATOR	1/01/01		835							835	835	S/L	10		0
	TOTAL MACHINERY AND EQUIPME			19,376		0	0	C) ()) 0	19,376	18,988				330
	TOTAL DEPRECIATION			352,224		0	0	() (00	352,224	348,269				1,094
	GRAND TOTAL DEPRECIATION			352,224		0	0		<u>)</u> 0	00	352,224	348,269			:	1,094