## Fr.m 990

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047 Open to Public Inspection

D Employer Identification number

23-7327537

E Tolophono number

202)452-1100

ck if app Addres: change

return

Internal Revenue Service A For the 2004 calendar year, or tax year beginning Please uno IRS label or print o type. Soo nacific Instruc

Website: WWW.NAHEE.ORG

Name of organization THE NATIONAL ASSOCIATION FOR HUMANE AND ENVIRONMENTAL EDUCATION

Organization type (check only one) ► X 501(c) (3 ) (insert no)

Contributions, gifts, grants, and similar amounts received

Number and street (or P O box if mail is not delivered to street address) 2100 L STREET, NW

City or town, state or country, and ZIP + 4 WASHINGTON, DC 20037

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

H and I are not applicable to section 827 organizations. H(a) is this a group ratum for affiliates?

2004, and ending

H(b) If "Yes," enter number of affiliates H(c) Are all affiliates included? (If "No," attach a fist. See instructions H(d) Is this a separate return filed by an

52,161.

1,068,110

If the organization's gross receipts are normally not more than \$25,000. The organization need not file a rotum with the IRS; but if the organization received a Form 990 Package In the mail, it should file a return without financial data. Some states require a complete return

Group Exemption Number if the organization is not required

organization covered by a group ruling?

17

18 19

Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 Part I Revenue, Expenses, and Changes In Net Assets or Fund Balances (See page 18 of the instructions.)

Direct public support . .

b Indirect public support.

1,900,129.

to attach Sch B (Form 990, 990-EZ, or 990-PF)

С	Government contributions (grants)		. 1c					
d	Total (add lines to through tc) (cash \$1, 12				) 1d	1,120,271		
2	Program service revenue including governmen		_			779,858		
3	Membership dues and assessments ,				3_			
4	Interest on savings and temporary cash investment	nents			. 4			
5	Dividends and interest from securities							
6 a	Gross rents							
ь	Less. rental expenses				]]			
С	Net rental income or (loss) (subtract line 6b fro				6c			
7	Other investment income (describe				) 7			
8 a	Gross amount from sales of assets other	(A) Securities		(B) Other				
	than inventory		8a		•			
b	Less cost or other basis and sales expenses		8ь					
С	Gain or (loss) (attach schedule)		8c					
d	Net gain or (loss) (combine line 8c, columns (A)	) and (B))		<u></u>	8d			
9		cial events and activities (attach schedule). If any amount is from gaming, check here						
а	contributions reported on the 1a)	of			<b> </b>			
	contributions reported on tine 1a)		. 9a		•			
b	Less direct expenses other than be draising ex	penses	. [9b]					
С	NewscomAdGlo4s) இரைந்து பெடு ents (subti	ract line 9b from line 9	a) · · ·	· · · · · · · · · · · · · · · · · · ·	· · <mark>9c</mark>			
10 a	Gross sales of inventory, less reluces and allows	ances	. 10a					
þ	Cross projit of (loss) from sales of inventory (		. 106					
С	Gross profit of (loss) from sales of inventory (	attach schedule) (subti	ract line 1	Ob from line 10a)	10c			
11	Other revenue (from Part VII, line 103)							
12	Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7	, 8d, 9c, 10c, and 11)		· · · · · · · · · · · · · · · · · · ·	12	1,900,129		
13	Program services (from line 44, column (B))				13	1,514,560		
14	Management and general (from line 44, column	n (C))			14	205,577		
15	Fundraising (from line 44, column (D))				15	179,992		
16	Payments to affiliates (attach schedule)				16			

Net assets or fund balances at end of year (combine lines 18, 19, and 20) For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Total expenses (add lines 16 and 44, column (A))......... Excess or (deficit) for the year (subtract line 17 from line 12) . . . . . .

Net assets or fund balances at beginning of year (from line 73, column (A)) Other changes in net assets or fund balances (attach explanation) . . .

Form 990 (2004)

1,900,129

17

19

71499G 649C 08/

۲a	Functional Expenses and sec	ction	1947(a)(1) nonexempt charl	table trusts but optional for ot	hers. (See page 22 of the in:	structions.)
	Do not include emounts reported on line 6b, 8b, 9b, 10b, or 16 of Pert I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)					
	(cash \$ noncash \$10,799.)	22	10,799.	10,799.	EFFER S	
23	Specific assistance to individuals (attach schedule)	23		_ <del></del> _		
24	Bonofits paid to or for members (attach schedule)	24			<u> </u>	
25		25	76,877.	66,717.	6,181.	3,979.
26	Other salaries and wages	26	544,635.	472,649.	43,793.	28,193.
27	Pension plan contributions	27				
28	Other employee benefits	28	19,514.		10,737.	8,777.
29	Payroll taxes	29	5,609.	<del></del>	3,512.	2,097.
30	Professional fundralsing fees	30				
31	Accounting fees	31		<del></del>	·	
32	Legal fees	32	20.067	26 156	2.060	851.
33	Supplies	34	39,067.	36,156.	2,060. 2,147.	639
34 35	Telephone	35	21,707.	18,921. 378,207.	1,419.	3,458
36	Occupancy	36	383,084. 34,405.	28,508.	5,266.	631
37	Equipment rental and maintenance	37	34,403.	20,300.	5,200.	
38	Printing and publications	38				
39	Travel	39	41,822.	26,536.	11,828.	3,458.
40	Conferences, conventions, and meetings	40	32/0221	20,3301		
41	Interest	41				
42	Depreciation, depletion, etc. (attach schedule)	42	5,962.		5,178.	784
		43a	716,648.	476,067.	113,456.	127,125
	>	43b				
c		43c				
c		43d				
e	)	43e				
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	1,900,129.	1,514,560.	205,577.	179,992
	nt Costs. Check ► if you are follow	ina i	1,300,123.  SOP 98-2	1,314,360.	203,377.	113,334
	any joint costs from a combined educational			citation reported in (B) Prod	gram services?	Yes X No
	'es," enter (i) the aggregate amount of these jo					
	the amount allocated to Management and gen			_ , and (iv) the amount al	located to Fundraising \$	
	art III Statement of Program Service			e page 25 of the ins	structions.)	
Wha	at is the organization's primary exempt purpose	? ▶	HUMANE & ENVIR	ONMENTAL EDUCAT	ION	Program Service Expenses
All of	organizations must describe their exempt po- clients served, publications issued, etc. Disc anizations and 4947(a)(1) nonexempt charital	urpos zuss	e achievements in a cleachievements that are i	ear and concise manner not measurable (Section	State the number of 501(c)(3) and (4)	(Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others)
a	SEE ATTACHMENT 2					
				and allocations \$	10,799.)	1 514 560
b			(Grains a	inu anocations #	10,733.)	1,514,560
U						
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		(Grants a	and allocations \$		
С				ina anocatorio v		
·						
			Grants a	and allocations \$	·	
d				unocations w		
u						
						1
			(Grante s	and allocations \$	,	
e	Other program services (attach schedule	<u> </u>		and allocations \$		
f	Total of Program Service Expenses (sho	_			<u> </u>	1,514,560
-	Con Control Control Capelloes (SIII	2010	Squar into 44, column	1-71 1 10grain 301 11063)	<u> </u>	

Р	art IV	Balance Sheets (See page 25 of the instructions.)			
1	lote;	Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.	(A) Beginning of year		(B) End of year
	45	Cash - non-interest-bearing		45	
	46	Savings and temporary cash investments		46	
				1	
	47a	Accounts receivable			
	Ь	Less: allowance for doubtful accounts 47b		47c	<del></del>
	1				
		Pledges receivable			
	)	Less: allowance for doubtful accounts	<del></del>	48c	<del></del>
	49	Grants receivable		49	
	50	Receivables from officers, directors, trustees, and key employees		150	
		(attach schedule)	<del></del>	50	<del></del>
	518	Other notes and loans receivable (attach			
ţ	١ ,	schedule)		51c	
Assets	52	Inventories for sale or use		52	
4	53	Prepaid expenses and deferred charges		53	<del> </del>
	54	Investments - securities (attach schedule)		54	<del></del>
	1	Investments - land, buildings, and			<del> </del>
		equipment: basis			
	Ь	Less: accumulated depreciation (attach			
	-	schedule)55b		55c	
	56	Investments - other (attach schedule)		56	
	57a	Land, buildings, and equipment: basis		1000	- <del></del>
		Less: accumulated depreciation (attach			
		schedule)		57c	
	58	Other assets (describe ▶)		58	
	ļ			1 1	
_	59	Total assets (add lines 45 through 58) (must equal line 74)		59	<del></del>
	60	Accounts payable and accrued expenses		60	
	61	Grants payable		61	<del> </del>
	62	Deferred revenue		62	<del></del>
ties	63	Loans from officers, directors, trustees, and key employees (attach			
Liabilities		schedule)		63 64a	
۳		Tax-exempt bond liabilities (attach schedule)		64b	
	65	Other liabilities (describe >)	· · · · · · · · · · · · · · · · · · ·	65	
	""	Other habilities (describe)		+ • •	
	66	Total liabilities (add lines 60 through 65)		66	
	Orga	anizations that follow SFAS 117, check here ▶ and complete lines			
		67 through 69 and lines 73 and 74.		据是一	
S	67	Unrestricted		67	
ဋ	68	Temporarily restricted		68	
ala	69	Permanently restricted		69	
ā	Orga	anizations that do not follow SFAS 117, check here ▶ x and			
or Fund Balances		complete lines 70 through 74.			
5	70	Capital stock, trust principal, or current funds		70	
ts	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
Net Assets	72	Retained earnings, endowment, accumulated income, or other funds		72	
Ž	73	Total net assets or fund balances (add lines 67 through 69 or lines			
Ž		70 through 72,			
		column (A) must equal line 19; column (B) must equal line 21)		73	<del></del>
_	74	Total liabilities and net assets / fund balances (add lines 66 and 73)		74	Ļ

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Page 4

Part I	Return (See page 27 of the	instructions.)	Par	t IV-B	Reconciliation Financial State Return NOT	of Expense ements with APPLICAB	S DO EX LE	er Audited penses per
a To	otal revenue, gains, and other support	MA THE HOLD	a	Total e	xpenses and lo			A CARL THE REAL PROPERTY.
ре	er audited financial statements 🔒 🕨	а		audited t	financial statemen	ıts ▶	a	
	mounts included on line a but not on		ь	Amount	s included on line	a but not		
line	ne 12, Form 990:	17	İ	on line 1	7, Form 990:		,	
(1) Ne	et unrealized gains NOT APPLICABLE	32 N X 7	(1)	Donated:	services			1 35 h 4 4 2 m
	investments , \$	· · · · · · · · · · · · · · · · · · ·		and use o	of facilities \$			
(2) Do	onatod services	30	. (2)	Prior year	r adjustments		1.3	The second
and	nd use of facilities \$			reported	on lino 20,			
(3) Re	ecoveries of prior	al and	1	Form 990	) <u>\$</u>			To W. Ave. D. M. Th.
yes	par grants \$		(3)	Lossos re	ported on		1 1	
	ther (specify):		٠. ا	lino 20, F	orm 990 \$			
			i (4)	Other (sp	eclfy).		1 1	
	\$	<u>}</u> *						<del>                                      </del>
Ad	dd amounts on lines (1) through (4) ▶	b			s			, ,
	,, , ,			Add amo	unts on lines (1) thro	ough (4) >	ь	
c Lir	ine a minus line b	С	c		inus line b		С	
d An	mounts included on line 12,	rolls.	d	Amount	s included on line	17,		يه دي ري در د
Fo	orm 990 but not on line a:	·**		Form 99	90 but not on line	a:	·	
	vestment expenses		(1)		nt expenses			
	ot included on line		'		ded on line			
	b, Form 990 \$				990 \$			
	ther (specify)	1	12	Other (sp	• • •		,	
(2) 0	ther (speary)	,	\*-	Other (sp	ecity)		,	
	•		}		•			
<u> </u>	dd amounts on lines (1) and (2) >	d		Add am	ounts on lines (1)	and (2)	4	
	otal revenue per line 12, Form 990		е е		penses per line 17		┝	
	ine c plus line d)		•		lus line d) · · · ·		اما	
Part \							ensa	ted; see page 27 of
	(A) Name and address			per wook to position	(If not paid, enter -0)	amployee benefit deferred compa		
SEE S	STATEMENT 3				76,877.	10,	473	3. NONI
			<u> </u>					
	-	<del></del>						
		<del></del>	<u> </u>			<del> </del>		
			<u> </u>					
			<u> </u>					
			<del> </del>	<del>-</del> ··		<del>                                     </del>		<del>                                     </del>
75 Di	old any officer, director, trustee, or key emp	loyee receive aggregation	ate compe	ensation of r	more than \$100,000	from your		
	rganization and all related organizations, of "Yes," attach schedule - see page 28 of the			s provided i <b>EMENT</b>	•	ations?		X Yes No
					<del></del>	<del></del>	_	Form <b>990</b> (2004

Form 990 (2004) 23-7327537			P <u>age 5</u>
Part VI Other Information (See page 28 of the instructions.)		Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76		х
77 Were any changes made in the organizing or governing documents but not reported to the IRS?	77	<u> </u>	x
If "Yes," attach a conformed copy of the changes.	<b>2.3</b>	经验	
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?			X
b If "Yes," has it filed a tax return on Form 990-T for this year?		N/	<u>A</u>
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	. 79	<u> </u>	X
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common		1.55	
membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	800	X	10.35.3
bif "Yes," enter the name of the organization SEB ATTACHMENT 1	200	4	4.25
and check whether it is x exempt or nonexempt.	\$6. *	1.2	**
	E May h	1	
b Did the organization file Form 1120-POL for this year?	81b	ļ	X_
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge	1		
or at substantially less than fair rental value?	. <u>82a</u>		X
b If "Yes," you may indicate the value of these items here. Do not include this amount	İ	,	
as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	<b></b>		أستنا
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?		X	<del> </del> -
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?		X	├
84 a Did the organization solicit any contributions or glfts that were not tax deductible?	84a	N/	<del> </del>
b If "Yes," did the organization include with every solicitation an express statement that such contributions	<u> </u>	<u> </u>	
or gifts were not tax deductible?	84b	N/	$\overline{}$
85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		N/	
b Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	N/	A
If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization	'	i	
received a waiver for proxy tax owed for the prior year	1	jà,	300
c Dues, assessments, and similar amounts from members 85c N/A	ق ⊹ أ	3.	Pant.
d Section 162(e) lobbying and political expenditures	-l ´	''	****
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	┥	}	[·*''-
f Taxable amount of lobbying and political expenditures (line 85d less 85e)  g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	<del></del>		
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable	85g	N/	<u> </u>
entimete of dues allegable to good duetible labbuilde and activities and activities and activities and activities and activities and activities and activities and activities and activities and activities are determined as a second activities and activities are determined as a second activities and activities are determined as a second activities and activities are determined as a second activities are determi	85h	, NT /	
86 501(c)(7) orgs Enter: a initiation fees and capital contributions included on line 12 86a N/A	141,5	N	10 No.
b Gross receipts, included on line 12, for public use of club facilities 86b N/A	$\exists \ \exists$	7	
87 501(c)(12) orgs Enter a Gross Income from members or shareholders 87a N/A	$\dashv$		57 . 04
b Gross income from other sources. (Do not net amounts due or paid to other	⊣		
sources against amounts due or received from them.) 87b N/A		3	* 15 P
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or	_		
partnership, or an entity disregarded as separate from the organization under Regulations sections			
301.7701-2 and 301.7701-37 If "Yes," complete Part IX	88	N/	
89 a 501(c)(3) organizations. Enter Amount of tax imposed on the organization during the year under	1,		
section 4911 ► N/A ; section 4912 ► N/A , section 4955 ► N/A	'	Ι.	l . l
b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction			
during the year or did it become aware of an excess benefit transaction from a pnor year? If "Yes," attach			
a statement explaining each transaction	89b	N/	A
c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under			
sections 4912, 4955, and 4958		N/A	
d Enter Amount of tax on line 89c, above, reimbursed by the organization		N/A	
90 a List the states with which a copy of this return is filed ▶DISTRICT OF COLUMBIA		-,	
b Number of employees employed in the pay period that includes March 12, 2004 (See instructions )	90b	0	
91 The books are in care of ► CONTROLLER Telephone no ► 202-4			
Located at ▶ 2100 L STREET, NW, WASHINGTON, DC ZIP+4 ▶ 20037			
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here			lacksquare
and enter the amount of tax-exempt interest received or accrued during the tax year		N/A	

Form **990** (2004)

Form 990 (200		· · · · · · · · · · · · · · · · · · ·	10		-7327537	Page 6
Part VII	Analysis of Income-Produc		lated business inco		UONS.)	(E)
indicated.	gross amounts unless otherwise	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	Related or exempt function
	im service revenue.					income
	KSHOPS	<del></del>				600.
	ERATURE	<u></u>	<u> </u>			39,914.
	SCRIPTIONS					739,344.
0					<del></del>	
	re/Medicaid payments					<del> </del>
	nd contracts from government agencies .					
	ership dues and assessments					
95 Interest	on savings and temporary cash investments -					
96 Divide	nds and interest from securities					
97 Net rei	ntal incomo or (loss) from real estate:					
a debt-fi	inanced property					
b not de	bt-financed property				 	<del></del>
	al income or (loss) from personal property					<u> </u>
99 Other	investment income	ļ		<del></del>		<del> </del>
	(loss) from sales of assets other than inventory	<del></del>	<del> </del>		 	<del> </del>
	come or (loss) from special events .	<del></del>	-	<del></del>		<del></del>
•	profit or (loss) from sales of inventory	<del></del>		<del></del>		<del> </del>
	revenue a		<del> </del>			<del></del>
					[	<del></del>
			<del></del>		<del></del>	<del>                                     </del>
е —						
104 Subtot	tal (add columns (B), (D), and (E))					779,858.
105 Total (	(add line 104, columns (B), (D), and (E	E))			· · · · · · · <b>&gt;</b>	779,858.
	05 plus line 1d, Part I, should equal to					
	Relationship of Activities					
Line No.	Explain how each activity for which of the organization's exempt purpor					complishment
		ses (other tr	ian by providing fun	us for such purposes	<u>)</u>	
	STMT 5	<del> </del>	<del></del>			
		<del></del>				
Part IX	Information Regarding Taxa	ble Subsi	diaries and Dis	regarded Entitie	s (See page 34 of th	ne instructions.)
	(A)		(B)	(C)	(D)	(E) End-of-year
	Name, address, and EIN of corporation, partnership, or disregarded entity		Percentage of ownership interest	Nature of activities	Total income	End-of-year essets
N/A			%			
			%			
			- %			<u></u>
			%			
Part X	Information Regarding Tra					——————————————————————————————————————
(b) Did th	e organization, during the year, receive a the organization, during the year	r, pay prem	nums, directly or	•		t? Yes X No
Note: //	Yes" to (b), file Form 8870 and F			including accompanies	a schodules and statements, or	ad to the hest of my knowledge
	and belief, it is true, correct and					
Please			1 1	<b>X</b>	1 41,	2/1<
Sign	Signature of officer		عرب	<u> </u>	Date	5/03
Here	G. Thomas W	aute Ti	T Tronge	COC	Date	
	(7) (1)				,	
			$\sim \wedge^{7}$	Date /	Check if F	Preparer's SSN or PTIN (See Gen Inst W)
			(, 1)	4   <u>}</u>	S self- employed ▶	•
				<del></del>	<del></del>	

## SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)
(Except Private Foundation) and Section 501(e), 501(f), 501(k),

501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Supplementary Information - (See separate instructions.) ▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

Name of the organization THE NATIONAL ASSOCIATION FOR HUMANE AND ENVIRONMENTAL EDUCATION

Employer Identification number

23-7327537

Compensation of the Five Highe (See page 1 of the instructions. List e	st Pald Employ each one. If there	rees Other Thai are none, enter "	n Officers, Directo 'None.")	ors, and Trustees
(a) Name and address of each employee pald more than \$50,000	(b) Title and average hours per week devoted to position	(c) Componsation	(d) Contributions to omployee benefit plans & deferred compensation	(o) Exponse account and other allowances
NONE	•			
otal number of other employees paid over	NONE		1	, and the second
Compensation of the Five Highe (See page 2 of the instructions. List	est Paid Indeper each one (wheth	ndent Contract er individuals or f	ors for Profession irms). If there are no	nal Services one, enter "None.")
(a) Name and address of each independent contractor paid	more than \$50,000	(b) Typ	e of service	(c) Compensation
NONE				
			-	

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

Schedule A (Form 990 or 990-EZ) 2004

professional services

Total number of others receiving over \$50,000 for

NONE

4E 1220 1 000

Schedule A (Form 990 or 990-EZ) 2004

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Cale	endar year (or fiscal year beginning in)	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
15	Gifts, 'grants, and contributions received. (Do					
•	not include unusual grants. See line 28.)	2,428,536.	2,300,416.	2,375,912.	2,291,345.	9,396,209.
16	Membership fees received	-7				
	Gross receipts from admissions, merchandise					
	sold or services performed, or furnishing of					
	facilities in any activity that is related to the				'	
	organization's charitable, etc., purpose	4,637.				4,637.
18	Gross Income from interest, dividends,	4,037.				4,037.
	amounts received from payments on securities					
	loans (section 512(a)(5)), rents, royalties, and					
	, , , , , , , , , , , , , , , , , , , ,					
	unrolated business taxable income (less					
	section 511 taxes) from businesses acquired					
40	by the organization after June 30, 1975		<del></del>			
19	Not income from unrelated business					
	activities not included in line 18					
20	Tax revenues levied for the organization's					
	benefit and either paid to it or expended on					
	its behalf					<u> </u>
21	The value of services or facilities furnished to					
	the organization by a governmental unit					
	without charge Do not include the value of				•	
	services or facilities generally furnished to the					
	public without charge					
22	Other Income. Attach a schedule Do not	STMT 6				
	include gain or (loss) from sale of capital assets		15.	39.	10,862.	10,916.
23	Total of lines 15 through 22	2,433,173.	2,300,431.	2,375,951.		1
24	Line 23 minus line 17					1
25	Enter 1% of line 23	24,332.			23,022.	18%
26				·		188,143.
	Prepare a list for your records to show the					1
	governmental unit or publicly supported organ		•			N. A.
	amount shown in line 26a Do not file this ii		-			1
c	: Total support for section 509(a)(1) test: Enter line 24	-				9,407,125.
ď	Add: Amounts from column (e) for lines: 18	19				, , , , , ,
		10,916. 26		<del></del>	▶ 26d	10,916.
	Public support (line 26c minus line 26d total)					9,396,209.
•	Public support percentage (line 26e (numerator) o		onominatori)		200	
	Organizations described on line 12: a For					
	person," prepare a list for your records to she	ow the name of,	and total amounts			
	Do not file this list with your return. Enter the sum	of such amounts for	each year			
	(2002)		(2004)	WOM 1 DEC 761	DT = (2000)	
	(2003) (2002)					
D	For any amount included in line 17 that was r show the name of, and amount received for each					
	(Include in the list organizations described in line	es 5 through 11, a	s well as individuals	s) Do not file this	list with your retu	ırn. After computing
	the difference between the amount received ar	nd the larger amou	int described in (1	) or (2), enter the	sum of these diff	erences (the excess
	amounts) for each year					
	(2003) (2002)		. <b></b> - <sup>(2001)</sup>		<sup>(2000)</sup>	
С	Add Amounts from column (e) for lines 15	1	6		i	1
	17 20	2	1		▶ 27c	
d	Add Line 27a total Public support (line 27c total minus line 27d total)	and line 27b total .			▶ 27d	
e	Public support (line 27c total minus line 27d total)				▶ 27e	
f	Total support for section 509(a)(2) test Enter amou	nt from line 23, colum	nn (e)	▶ 27f		The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s
g	Public support percentage (line 27e (numerator)	divided by line 27f (d	enominator))		▶ 27g	%
_ h	Investment income percentage (line 18, column (	e) (numerat <u>or) d</u> ivide	ed by line 27f (denom	ninator))	▶ 27h	%
28	Unusual Grants: For an organization describe	ed in line 10, 11	, or 12 that rec	erved any unusual	grants during 20	000 through 2003,
	prepare a list for your records to show, for description of the nature of the grant Do not file thi					grant, and a brief
		, ,	55 1.5. 11101000 11			

Page 4

Par	Private School Questionnaire (See page 7 of the instructions.)  NOT APPLICATION (To be completed ONLY by schools that checked the box on line 6 in Part IV)	ABLE	3	
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws,		Yes	No
	other governing instrument, or in a resolution of its governing body?	29		
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its		- , ,,,	
	brochures, catalogues, and other written communications with the public dealing with student admissions,		* ****	
	programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during		物	
	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way	_ ' '	بهد.	
	that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)	~, **	2	
			1	Solve
			1,7,75	1
				13.77
32	Does the organization maintain the following:			<u></u>
	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a		
D	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory	206		
_	basis?  Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	32b		
C	· · · · · · · · · · · · · · · · · · ·	32c		
d	with student admissions, programs, and scholarships?  Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
u	Copies of all material used by the organization of office benall to solicit contributions:	320		, ,
	If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement.)	'	٠,	
			,	18.
			ŀ	
33	Does the organization discriminate by race in any way with respect to		, ,	1 18 18 00
			.1	\$100 B
а	Students' rights or privileges?	33a		
				1
b	Admissions policies?	33b		
		:		
С	Employment of faculty or administrative staff?	33c		
		 		1
d	Scholarships or other financial assistance?	<u>33d</u>		ļ
_	Educational policies?			
•	Educational policies?	33e	<del> </del>	
f	Use of facilities?	   33f		
•	Use of facilities?	331	<del>                                     </del>	
a	Athletic programs?	33g		
J				
h	Other extracurricular activities?	33h		1
		į. ·		,
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)	·.	· -	
		, `	,	***
		, .	,	. '
				1
			ŀ	
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a	ļ	<u> </u>
			1	1
b	Has the organization's right to such aid ever been revoked or suspended?	34b	<u> </u>	┼
	If you answered "Yes" to either 34a or b, please explain using an attached statement.	[: · .	1: 7	.
		تتستة	· · ·	
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05			
	of Rev Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	<u> </u>	<u></u>

Pa	rt VI-A		xpenditures by Elec pleted ONLY by an	_				-	ICAF	ole	_
Che	ck ▶a		zation belongs to an affil							trol" provisions app	īy.
		L	imits on Lobbying	Expenditures			(a Affiliate tot	d grou	p	(b) To be completed for ALL electing	
		(The term	"expenditures" means	amounts paid or incui	rred.)					organizations	
36			tures to influence publ			36					_
37			tures to influence a leg			37				· · · · · · · · · · · · · · · · · · ·	_
38			tures (add lines 36 an			38					
39	Other ex	empt purpose	expenditures	. <b></b> .		39					_
40			expenditures (add line			40					
41	Lobbying	nontaxable a	mount. Enter the amo	_		17	4.54	• ,	, '	4 分别	yr.
		ount on line		bbying nontaxable an	•	. * .	:	<i>i</i> , ;	:		73
			20% of (				. +	4			
	Over \$500.	,000 but not over	\$1,000,000 \$100,00	00 plus 15% of the excess o	ovor \$500,000					1800	-
			or \$1,500,000 \$175,00		E .	41					
			er \$17,000,000 \$225,00		ľ	*					-
	Over \$17,0	000.000	\$1,000,	.000	ノ	ļ	<u> </u>			, , , , , , , , , , , , , , , , , , ,	
42			amount (enter 25% o			42					_
43			ine 36. Enter -0- if line			43					
44	Subtract	line 41 from I	ine 38. Enter -0- if line	41 is more than line :	38	44	<b> </b>				
										1	Į
	Caution:	If there is an	amount on either line				<u> </u>				
	(Sc	ome organizati	ions that made a secti		not have to com	plete	all of the fi		umns	below.	
			See the instruction	ons for lines 45 throug	n su on page i i	or th	e instructio	ns.)		<u> </u>	_
				Lobbying Expendi	tures During 4	-Yea	Averagin	g Pe	riod		_
	_	year (or fiscal	(a)	(b)	(c)		(	d)		(e)	
	ear begir	nning in) ▶	2004	2003	2002		20	01_		Total	
		nontaxable	i								
<u>45</u>	amount -	<u> </u>								· · · · · · · · · · · · · · · · · · ·	
	Lobbying	ceiling amount				, '		:			
<u>46</u>	(150% of	line 45(e))				<del></del>		<del></del>			
<u>47</u>	Total lobby	ing expenditures					<u> </u>				
		ts nontaxable									
<u>48</u>	amount '	· · · · · · · ·									
		ceiling amount		, '			ŀ				
<u>49</u>		ne 48(o)) · ·	· · · · · · · · · · · · · · · · · · ·	<u> </u>	·						
		ts lobbying									
_		res	Lactivity by Nonelecti	inn Dublic Charities	L		L				
Fe	irt VI-B		• •	•		۸۱/۵	NOT				
	on the year		ing only by organiza					1 01	<u> </u>	Structions j	_
	-	_	lization attempt to influer inion on a legislative mat		_	ing an	,	Yes	No	Amount	
	Voluntee								<del> </del> -	_ , , = 1 ,	<del>.</del>
_									<del> </del>		
b									<del>                                     </del>		
C	Media a	to mant				• • •			<del> </del>		
d			legislators, or the pub						<del> </del>	<del></del>	—
e			hed or broadcast state						<del> </del>		_
Ť			zations for lobbying pu								
g			ıslators, their staffs, g							<del> </del>	
h			is, seminars, conventi						ا	<del> </del>	
i			itures (Add lines c thro							L	
<del></del>	If "Yes"	to any of the a	ibove, also attach a si	tatement giving a deta	iled description	of the	lobbying ac				
JSA 4E1	240 1 000							Sche	Jule A	(Form 990 or 990-EZ) 20	J04

		r or indirectly engage in any of the folic n 501(c)(3) organizations) or in section			n sect	ion
		n 501(c)(3) organizations) or in section ition to a noncharitable exempt organiz		) <b>T</b>	Yee	No
	_			51a(i)	. 55	x
				a(ii)		x
b Other trans						
		ith a noncharitable exempt organization		b(i)_		x
(ii) Purci	hases of assets from a nor	charitable exempt organization		b(II)		х
(III) Rent	al of facilities, equipment, o	r other assets		P(III)		x
(iv) Reim	bursement arrangements			b(lv)		х
(v) Loan	s or loan guarantees			b(v)		x
(vi) Perfo	ormance of services or men	mbership or fundraising solicitations		b(vI)		x
		ng lists, other assets, or paid employees		С		х
		complete the following schedule Column		of the		
goods, othe	er assets, or services given by	the reporting organization. If the organization	n received less than fair market value in any			
transaction	or sharing arrangement, show	v in column (d) the value of the goods, other	assets, or services received			
(a)	(b)	(c)	(d)			
Line no.	Amount involved	Name of noncharitable exempt organization	Description of transfers, transactions, and sh	aring arra	ngeme	nts
					—	
N/A						
			•			
described	d in section 501(c) of the C complete the following sche		n section 527? ▶ [	Yes	s x	ои [ <u>]</u>
Nan	(a) me of organization	(b) Type of organization	(c) Description of relations	nip		
NI / B		AH				
N/A						
	<del></del>					
<del></del>				<del></del>		
<del></del>						
		<u> </u>				
	······································					
			Schedule A (Form	990 or 9	990-F7	2) 2004

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ASSOCIATION
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23-7327537

FORM 990, PART II - GRANTS AND ALLOCATIONS PAID DURING THE YEAR 

PURPOSE OF GRANT OR CONTRIBUTION RELATIONSHIPS HOME RECIPIENT NAME AND ADDRESS GRANTS PAID 000000000000 CAFTA

10,799. TOTAL CONTRIBUTIONS PAID

000000000000

10,799.

EDUCATIONAL

AEOUST

18

STATEGER 1

71499G 649C 08/04/2005 10:17:14

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
CONSULTANTS & CONTRACTED SERV. INVESTMENT EXPENSES	127,291.	74,829.	42,951.	9,511.
INSURANCE PROPERTY TAXES	1,890. 1,835.		1,890. 1,792.	43.
EDUCATIONAL PUBLICATIONS MAILING COSTS	414,329. 136,848.	401,238.	7,317.	5,774.
PROFESSIONAL FEES	3,208.		3,029.	179.
TOTALS	716,648.	476,067.	113,456.	127,125.

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES 

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
WAYNE PACELLE 2100 L STREET, NW WASHINGTON, DC 20037	VP/DIRECTOR 0-10	NONE	NONE	NONE
G. THOMAS WAITE, III 2100 L STREET, NW WASHINGTON, DC 20037	TREASURER/DIRECTOR 0-10	NONE	NONE	NONE
PATRICIA FORKAN 2100 L STREET, NW WASHINGTON, DC 20037	PRESIDENT/DIRECTOR 0-10	NONE	NONE	NONE
MURDAUGH S. MADDEN 2100 L STREET, NW WASHINGTON, DC 20037	SECRETARY/DIRECTOR 0-10	NONE	NONE	NONE
WILLIAM DEROSA 2100 L STREET, NW WASHINGTON, DC 20037	EXECUTIVE DIRECTOR 40	76,877.	10,473.	NONE
PATRICIA A. GATONS 2100 L STREET, NW WASHINGTON, DC 20037	ASSISTANT SECRETARY 0-10	NONE	NONE	NONE
	GRAND TOTALS	76,877.	10,473.	NONE

0164463

# FORM 990, PART V - COMPENSATION PROVIDED BY RELATED ORGANIZATION

NAME AND ADDRESS	Ϋ́i	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
THE HUMANE SOCIETY OF THE US 53-0225390				
WAYNE PACELLE 2100 L STREET, NW WASHINGTON, DC 20037		107,692.	2,957.	NONE
THE HUMANE SOCIETY OF THE US 53-0225390				
G. THOMAS WAITE, III 2100 L STREET, NW WASHINGTON, DC 20037		157,978.	15,319.	NONE
THE HUMANE SOCIETY OF THE US 53-0225390				
PATRICIA FORKAN 2100 L STREET, NW WASHINGTON, DC 20037		179,449.	15,217.	NONE
	GRAND TOTALS	445,119.	33,493.	NONE

0164463

## FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES

	EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME
LINE	IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED
NO.	IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES
93A	WORKSHOPS TO SPREAD NAHEE'S EXEMPT PURPOSE
93B	SALE OF LITERATURE AND OTHER MERCHANDISE THAT PROMOTES
93B	NAHEE'S EXEMPT PURPOSE
93C	KIDS IN NATURE DEFENSE NEWSLETTER EDUCATES ELEMENTARY
93C	STUDENTS

# SCHEDULE A, PART IV-A - OTHER INCOME

TOTAL	! ! !	10,916.		.10,916.	11 13 13 13 13 13 13 13 13 13 13 13 13 1
2000	!	10,862.		10,862.	11 11 11 11 11 11 11 11 11
2001	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	39.		39.	0 0 0 0 0 0 0 0 0 0
2002	 	15.	1 1 1 1 1 1 1 1 1	15.	11 13 13 13 14 16 16 16 16 16 16 16 16 16 16 16 16 16
2003	!!!!!				
DESCRIPTION	; ; ; ; ; ; ; ; ;	MISCELLANEOUS		TOTALS	

9

STATEMENT

## THE NATIONAL ASSOCIATION FOR HUMANE AND ENVIRONMENTAL EDUCATION EIN. 23-7327537 12/31/2004

NAME OF ORGANIZATION	ЕХЕМРТ	NONEXEMPT
THE HUMANE SOCIETY OF THE UNITED STATES	X	
HUMANE SOCIETY INTERNATIONAL	X	
CENTER FOR RESPECT OF LIFE AND THE ENVIRONMENT	X	
EARTHVOICE INTERNATIONAL	X	
EARTHKIND USA	X	
MEADOWCREEK, INC.	X	
THE HSUS FUND FOR ANIMALS	X	
HUMANE SOCIETY OF HONG KONG LIMITED	X	
THE HUMANE SOCIETY INTERNATIONAL UK	X	
THE HUMANE SOCIETY INTERNATIONAL GERMANY	X	
THE HUMANE SOCIETY INTERNATIONAL FRANCE	X	
HUMANE SOCIETY INTERNATIONAL, INC. (AUSTRALIA)	X	
THE HUMANE SOCIETY OF THE US WILDLIFF LAND TR	Y	

The National Association for Humane and Environmental Education

EIN: 23-7327537

Form 990 12/31/04

Attachment 2

Please note that this 990 covers the activities of the entity incorporated as The National Association for Humane and Environmental Education (NAHEE). The organization is an affiliate of The Humane Society of the United States. For a combined report of the financial activities and status of The Humane Society of the United States and its affiliates, interested persons may look at the organization's Annual Report on <a href="https://www.hsus.org">www.hsus.org</a>.

## THE NATIONAL ASSOCIATION FOR HUMANE ENVIRONMENTAL EDUCATION PROGRAMS

NAHEE is the youth education division of the HSUS, which continues its commitment to ensure that youth are instructed in humane education, including an appreciation for environmental problems and their impact on both people and animals NAHEE distributes a million copies of its humane education newspaper (Kind News) every month to over ten percent of the elementary schools in the nation. Polls of the teachers who receive this newspaper reveal that over 90% welcome the newspaper and make use of it in their classrooms every month.

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Program Expense: 1,514,560 Gifts and Grants: 10,799

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No 1545-1709

· If you are	filing for an Automatic 3-Month Extension, complete only Part I and check this box filing for an Additional (not automatic) 3-Month Extension, complete only Part II (or letter Part II unless you have already been granted an automatic 3-month extension on a property of the property of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of the complete of t	n page 2 of this form).				
Part I	Automatic 3-Month Extension of Time—Only submit original (no copies nee	ded)				
Form 990-T	corporations requesting an automatic 6-month extension—check this box and comple	ete Part I only ▶ □				
	porations (including Form 990-C filers) must use Form 7004 to request an extension of s, REMICs, and trusts must use Form 8736 to request an extension of time to file Form					
returns note (not automa	Filing (e-file). Form 8868 can be filed electronically if you want a 3-month automatic extended below (6 months for corporate Form 990-T filers). However, you cannot file it electronic ic) 3-month extension, instead you must submit the fully completed signed page 2 (File electronic filing of this form, visit www.irs.gov/efile.	ically if you want the additional				
Type or	Name of Exempt Organization	Employer identification number				
print	THE NATIONAL ASSOCIATION FOR HUMANE AND ENVIRONMENTAL EDUCATION	23-7327537				
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, see instructions. 2100 L STREET, NW					
return. See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions.					
	WASHINGTON, DC 20037					
	of return to be filed (file a separate application for each return):	C 5 4700				
▼ Form 99		☐ Form 4720				
☐ Form 990-BL ☐ Form 990-T (sec. 401(a) or 408(a) trust) ☐ Form 5227						
☐ Form 990-EZ ☐ Form 990-T (trust other than above) ☐ Form 6069 ☐ Form 990-PF ☐ Form 1041-A ☐ Form 8870						
☐ Form 9:	10-PF	□ Form 8870				
Telephone • If the org • If this is is for the w	s are in the care of ► THE ORGANIZATION  No. ► 202-452-1100  FAX No. ►  anization does not have an office or place of business in the United States, check this for a Group Return, enter the organization's four digit Group Exemption Number (GEN thole group, check this box ►	N) If this				
to file	est an automatic 3-month (6-months for a Form 990-T corporation) extension of time untituded exempt organization return for the organization named above. The extension is for the calendar year $20\underline{0}4$ or					
▶ 🗆	tax year beginning, 20, and ending	, 20				
2 If this	tax year is for less than 12 months, check reason:   Initial return   Final return	Change in accounting period				
	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative ta fundable credits. See instructions					
	application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax. Include any prior year overpayment allowed as a credit					
with	ce <b>Due.</b> Subtract line 3b from line 3a. Include your payment with this form, or, if require FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment Syctions	stem). See				
Caution. If	you are going to make an electronic fund withdrawal with this Form 8868, see Form 84 t instructions.					
For Privacy	Act and Paperwork Reduction Act Notice, see Instructions.	Form <b>8868</b> (Rev 12-2004)				