** PUBLIC DISCLOSURE COPY ** Return of Organization Exempt From Income Tax

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

A For the 2022 calenda

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.

Inspection

A	For t	ne 2022 calendar year, or tax year beginning and en	nding		
В	Check applica	NATIONAL ENERGY EDUCATION DEVELOPMENT		D Employer identif	ication number
Ļ	char	PROJECT, INC.			
늗	lchar Initia	Doing business as		54-16466	
	retui Fina retui	8408 KAO CIRCLE	oom/suite	E Telephone numbe	
۳	term atod	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	9,355,629.
Ļ	retur	MANASSAS, VA 20110		H(a) Is this a group r	eturn
L	tion pend	F Name and address of principal officer: MAKI E. SPRUILL		for subordinate:	s? Yes 🗓 No
_		SAME AS C ABOVE		H(b) Are all subordinates i	
		xempt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527		list. See instructions
	Webs			H(c) Group exemption	
	art I	of organization: X Corporation Trust Association Other Summary	L Year o	of formation: 1991	M State of legal domicile: VA
ď	1	Briefly describe the organization's mission or most significant activities: NEED D	ESIG	NS & DELIVE	RS
Activities & Governance		COMPREHENSIVE ENERGY EDUC. CURRICULUM & TRA	AININ	G TO K-12 S	CHOOLS.
Ę	2	Check this box if the organization discontinued its operations or disposed	of more t	han 25% of its net as	sets.
Ž	3	Number of voting members of the governing body (Part VI, line 1a)		3	12
ري ص	4	Number of independent voting members of the governing body (Part VI, line 1b)		4	12
es	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)			20
Viti	6	Total number of volunteers (estimate if necessary)		6	70
Ç	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		7a	0.
_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
	_			Prior Year	Current Year
ē	8	Contributions and grants (Part VIII, line 1h)		4,207,915.	9,116,774.
Revenue	9	Program service revenue (Part VIII, line 2g)		107,540.	132,375.
è	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		1,541.	1,151.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		10,530.	15,354.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		4,327,526.	9,265,654.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		189,635.	1,202,127.
	14	Benefits paid to or for members (Part IX, column (A), line 4)	····	0.	1 500 050
Ses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,440,376.	1,582,852.
Expenses	Iba	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 117,102		0.	0.
Ä	17			1 700 E40	3 000 000
	18	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,780,540. 3,410,551.	3,279,766.
	19	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses. Subtract line 18 from line 12		916,975.	6,064,745.
		Revenue less expenses. Subtract line 18 from line 12		inning of Current Year	3,200,909.
Sts C	20 21 22	Total assets (Part X, line 16)	Degi	4,802,187.	End of Year
ASSK	21	Total liabilities (Part X, line 16)		117,132.	8,671,156.
let.	22	Net assets or fund balances. Subtract line 21 from line 20		4,685,055.	785,192. 7,885,964.
Pé	irt II	Signature Block		±,005,055.	7,000,904.
Und	er pena	lities of perjury, I declare that I have examined this return, including accompanying schedules and	i statemen	ts and to the hest of my	knowledge and holief it is
true.	correc	ct, and complete. Declaration of preserve finer than officer) is based on all information of which	nrenarer h:	as any knowledne	knowledge and belief, it is
		1/1/2/C	proparor in	170-69	-)2
Sign	1	Signature of officer		Date	
Her		MARY E. SPRUILL, EXECUTIVE DIRECTOR			
		Type or print name and title		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
		Print/Type preparer's name Preparer's signature	Da	te Check	PTIN
Paid		AARON M. FOX AARON M. FOX	_ 10	/06/23 if self-employe	P01365820
Prep	arer	Firm's name MARCUM LLP			L-1986323
Use	Only	Firm's address 1899 L STREET, NW, SUITE 850			
	_	WASHINGTON, DC 20036		Phone no. (20	2) 227-4000
May	the IF	RS discuss this return with the preparer shown above? See instructions			X Yes No
		···			

SEE SCHEDULE O FOR CONTINUATION(S)

5,874,746.

232002 12-13-22

4d Other program services (Describe on Schedule O.)

Total program service expenses

1,841,230. Including grants of \$

7,800.) (Revenue \$ 132,375.)

Form 990 (2022)

Form 990 (2022) PROJECT, INC.
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
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		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		1	
	during the tax year? If "Yes," complete Schedule C, Part II	4_		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	_ 5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D.			
	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
•	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
ď	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	-110		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	x	
۵	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		
'	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	x	
100	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	- 11,		
ıza	\cdot	12a	x	
_	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	IZa	-22	
D	-	405		v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		$\frac{x}{x}$
	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	-	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
α	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			37
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
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			v
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		_X_
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		<u>X</u>
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		<u> </u>
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		<u> </u>
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Ţ	_
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
232003	12-13-22	Form	990 (2022)
	વ			

NATIONAL ENERGY EDUCATION DEVELOPMENT 54-1646670 PROJECT, INC. Page 4 Part IV | 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 22 Х Part IX, column (A), line 2? If "Yes." complete Schedule I, Parts I and III 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 Х 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete 24a Schedule K. If "No," go to line 25a 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 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit X 25a transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part 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? If "Yes," complete X 25b Schedule L, Part I 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% X 26 controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 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 X entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? // X 28a "Yes," complete Schedule L, Part IV Х b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28h c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If X "Yes." complete Schedule L. Part IV X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 contributions? If "Yes," complete Schedule M X 31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Х 32 Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations 33 X 33 sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 Х 34 Part V, line 1 _______ 35a 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity 35b within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? X 36 If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization Х 37 and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 38 X Note: All Form 990 filers are required to complete Schedule O 38 Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V			<u></u>			J
					Yes	No	
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	97	*.			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re-	eportable gaming					
	(gambling) winnings to prize winners?			1c	X	L	

232004 12-13-22

	, (continued)			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	Γ		1100	110
	filed for the calendar year ending with or within the year covered by this return 2a	20			
b			2b	Х	
За	PSYLVE AND A SECOND ASSESSMENT OF THE SECOND ASSESSMENT		За		Х
b			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority or				
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		Х
b	If "Yes," enter the name of the foreign country			l	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (F				
5a			5a	<u> </u>	X
b	, i i i i i i i i i i i i i i i i i i i		5b	L	X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	tion solicit]]
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	3			
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provide	ed to the payor?	7a	<u> </u>	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	<u> </u>	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required				
	to file Form 8282?		7c		X
	7.2				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f			7f		Х
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as		7g		ļ
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a F	orm 1098-C?	7h	<u> </u>	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the				
9	sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.		8		
a	Pid the analysis and in the second of the se	-	 ^-		
b	Did the analysis and in the section of the section		9a 9b	 	
10	Section 501(c)(7) organizations. Enter:		30		
	Initiation fees and capital contributions included on Part VIII, line 12				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b				
11	Section 501(c)(12) organizations, Enter:				
	Gross income from members or shareholders 11a				:
	Gross income from other sources. (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year				
	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans				
C	Enter the amount of reserves on hand				
	Did the organization receive any payments for indoor tanning services during the tax year?	<u>[</u>	14a		X
þ	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or				
	excess parachute payment(s) during the year?		15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.	A.#	/m\ =		
	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		16		X
	If "Yes," complete Form 4720, Schedule O.				
	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			ļ	
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				

Form 990 (2022) 54-1646670 Page 6 Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Sec	tion A. Governing Body and Management					
•					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	12		٠.	
	If there are material differences in voting rights among members of the governing body, or if the governing			1		1
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			. *		. :
b	Enter the number of voting members included on line 1a, above, who are independent	1b	12		İ	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship or			1		
	officer, director, trustee, or key employee?		•	2		X
3	Did the organization delegate control over management duties customarily performed by or under the	direct	supervision			
•	of all and all and a burstons and an analysis and a second a second and a second an		•	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 99		filed?	4	 	X
5	Did the organization become aware during the year of a significant diversion of the organization's asset			5		X
6				6		X
	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or app			_ b		
7a				١ ـ. ا		
	more members of the governing body?			_7a		X
р	Are any governance decisions of the organization reserved to (or subject to approval by) members, stor			l		~~
_	persons other than the governing body?		*	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year		*		~	
	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			_8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reach					
	organization's mailing address? If "Yes." provide the names and addresses on Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Reve	enue (Code.)			
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such char	oters,	affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?		***************************************	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body by	efore	filing the form?	11a	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to			12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes	s," de	scribe			-
	on Schedule O how this was done			12c	_X	
13	Did the organization have a written whistleblower policy?		****	13	Х	
14	Did the organization have a written document retention and destruction policy?			14	X	
15	Did the process for determining compensation of the following persons include a review and approval by					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	•	·			
а	The organization's CEO, Executive Director, or top management official			15a	х	
	Other officers or key employees of the organization			15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions,	•••••	,			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangeme	nt wit	hа			
	taxable entity during the year?			16a		X
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate			700		
~	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization		•			:
	exempt status with respect to such arrangements?		•	16b		
Sec	tion C. Disclosure		***************************************	100	L	
17	List the states with which a copy of this Form 990 is required to be filed NONE					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	990.7	(eaction E01/a)/3)c	onlid (wallah	
10		330-1	(3600011 30 1(0)(0)3	Orny) a	avallau	ne
	for public inspection. Indicate how you made these available. Check all that apply. X Own website Another's website X Upon request Other (explain o					
40			,		:-1	
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict the south for the south	IICT Of	interest policy, and	Tinano	iai	
00	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's books	and	recoras			
	MARY E. SPRUILL - (703) 257-1117					
	8408 KAO CIRCLE, MANASSAS, VA 20110			_	000	00000
232006	12-13-22			Form	990 (ZUZZ)

Form **990** (2022)

Part VII | Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation fundamental compensation was paid.
 - · List all of the organization's current key employees, if any. See the instructions for definition of "key employee,"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

(A) Name and title	(B) Average hours per week	(do	not c	((Pos heck ss per	C) itior more		one h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	(list any hours for related organizations below line)	stee or director	Institutional trustee			Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) MARY E. SPRUILL	40.00								_	
EXECUTIVE DIRECTOR				X				244,486.	0.	13,769.
(2) REBECCA LAMB	40.00	1							_	
PROGRAM DIRECTOR		ļ	<u> </u>			X	<u> </u>	120,287.	0.	6,578.
(3) WAYNE YONKELOWITZ	2.00	1					l			
VICE CHAIRMAN		X		X		<u> </u>		5,375.	0.	0.
(4) MAGGIE DOWNEY	2.00					i				
CHAIRMAN		X		X		<u> </u>		0.	0.	0.
(5) JOHN WEINER	2.00									
SECRETARY		X		X				0.	0.	0.
(6) RETA WHITE	2.00									
TREASURER		X		X		_		0.	0.	0.
(7) LAUREN ALLEN	2.00						ĺ			
DIRECTOR		x					<u> </u>	0.	0.	0.
(8) CARRIE ANNAND	2.00								_	
DIRECTOR	<u> </u>	Х				_	L	0.	0.	0.
(9) PAULA CONRAD	2.00							i _		
DIRECTOR		x						0.	0.	0.
(10) HARMONY JURKASH	2.00									
DIRECTOR		X				_		0.	0.	0.
(11) CLAUDIA KREISLE	2.00									
DIRECTOR		X						0.	0.	0.
(12) DOUG LAWRENCE	2.00									
DIRECTOR		X						0.	0.	0.
(13) DIANE LEAR	2.00									
DIRECTOR		X						0.	0.	0.
(14) STEVE SOLOMON	2.00									
DIRECTOR		X						0.	0.	0.
		_	\square			_				
		ļ								
	<u> </u>						L			G00 (0000)

Form 990 (2022)

Form 990 (2022) PROJECT,		ح.			10	11	יוכו	ARTOFMENT	54-164	16670 Page 8
Part VII Section A. Officers, Directors, Trus		ploye	es,	and	d Hig	ghes	t C	ompensated Employee	s (continued)	eooro rageo
(A) Name and title	(B) Average hours per week	(do r box, offici	not c unle:	Posi Posi heck r ss per	ition more to son is irector	than c	ne an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Кеу етрюуее	Highest compensated employee	Former	the organization (W-2/1099·MISC/ 1099·NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
4h Calendari								270 140		
Subtotal Total from continuation sheets to Part VII d Total (add lines 1b and 1c) Total number of individuals (including but no	, Section A						_	370,148. 0. 370,148.	0 0	. 0.
Total number of individuals (including but no compensation from the organization	ot limited to the	ose its	stea	abo	ove)	who	rec	ceived more than \$100,0	000 of reportable	Yes No
 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for su For any individual listed on line 1a, is the su 	ıch individual			. .				• • • • • • • • • • • • • • • • • • • •		3 X
and related organizations greater than \$150Did any person listed on line 1a receive or an	,000? <i>If</i> "Yes," ccrue compens	com; sation	plet fro	e So m a	<i>hed</i> ny ui	lule . nrela	<i>l for</i>	<i>r such individual</i> d organization or individu	ual for services	4 X
rendered to the organization? If "Yes." comp Section B. Independent Contractors	nete Scriedule	J IOF	SUC	n pe	ersor	7				5 X
 Complete this table for your five highest con the organization. Report compensation for the 	npensated inde ne calendar yea	epend ar enc	lent ding	con	itrac h or	tors with	tha in tl	at received more than \$1 he organization's tax ve	00,000 of compens	ation from
(A) Name and business a		NON						(B) Description of se		(C) Compensation
							1			
	··································									
Total number of independent contractors (inc \$100,000 of compensation from the organization)		limite	ed t	o th	ose I	liste	d at	bove) who received mor	e than	
, and a second										Form 990 (2022)

Form 990 (2022) PROJECT, INC.
Part VIII Statement of Revenue

	-	Ole and if Cabadula O applains a recognize or	noto to any line	o in this Bart VIII			
	_	Check if Schedule O contains a response or	note to any line	(A) Total revenue	(B) Related or exempt function revenue	(C)	(D) Revenue excluded from tax under sections 512 - 514
Grants	k	Federated campaigns 1a Membership dues 1b Fundraising events 1c					
Contributions, Gifts, Grants and Other Similar Amounts	6	Related organizations 1d Government grants (contributions) 1e 8	861,827. 854,947.				
ontrij De Oriti		Noncash contributions included in lines 1a-1f	15,000.	9,116,774.			No.
OB		Total. Add lines 1a-1f	Business Code	J / 11 G / 17 G /			
		 	900099	132,375.	132,375.		
9	2 a	CONFER. & YOUTH AWARDS	300033	134,373.	132,313.		
ه کِ	k			 . 	<u>-</u>		
Program Service Revenue	•						
e a							
ğα	•						
ď.	f	All other program service revenue					
	,	Total. Add lines 2a-2f		132,375.			
-	3	Investment income (including dividends, interes			-		
	Ü			1,151.			1,151.
	_	other similar amounts) Income from investment of tax-exempt bond pro					
	4			5,184.			5,184.
	5	Royalties(i) Real	(ii) Personal	3,104.		1	0,2021
		\ \ 	(II) Fersonai	•			
	6 a	Gross rents6a					
	ł	Less: rental expenses 6b			ļ:	a .	
		Rental income or (loss) 6c					
		Net rental income or (loss)					
		Gross amount from sales of (i) Securities	(ii) Other				
	٠,٠	assets other than inventory 7a					
41		Less: cost or other basis					
J.		and sales expenses 7b			·		1
-Ke		Gain or (loss) 7c				·	
8		Net gain or (loss)	,		<u> </u>		
Other Revenue	8 8	Gross income from fundraising events (not including \$ of					:
		contributions reported on line 1c). See					
		Part IV, line 18					
		Less: direct expenses 8b					
		Net income or (loss) from fundraising events]	
	9 8	Gross income from gaming activities. See				1	
		Part IV, line 199a		. ·. ·			
		Less: direct expenses9b					
		Net income or (loss) from gaming activities					
	10 :	Gross sales of inventory, less returns		4.0			
			89,975.				
	1	Less: cost of goods sold10b	89,975.				
		Net income or (loss) from sales of inventory		0.			
	<u> </u>		Business Code				
S		OTHER INCOME	900099	6,077.			6,077.
Miscellaneous Revenue	11	DDD30000	900099	4,093.			4,093.
all la		REBATES		2,055.		 	<u> </u>
je se	} '	·					
Σ	1	All other revenue		10 170	 		+
_		Total. Add lines 11a-11d		10,170.	120 275		16 505
	12	Total revenue. See instructions		9,265,654.	132,375.	0.	16,505.

Form 990 (2022) PROJECT, INC. Part IX Statement of Functional Expenses

ection 501(c)(3) and 501(c)(4) organizations must comple Check if Schedule O contains a respons	e or note to any line in th	is Part IX	,	
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	415,235.	415,235.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	786,892.	786,892.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign				
individuals. See Part IV, lines 15 and 16				· · · · · · · · · · · · · · · · · · ·
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	263,631.	215,157.	24,237.	24,237.
6 Compensation not included above to disqualified				
persons (as defined under section 4958(f)(1)) and		1		
persons described in section 4958(c)(3)(B)	1,193,019.	1,161,671.	18,311.	13,037.
7 Other salaries and wages				
section 401(k) and 403(b) employer contributions)	38,542.	36,661.	1,099.	782.
9 Other employee benefits	07.660	81,763.	3,150.	2,747.
10 Payroll taxes	87,660.	от,/оз.		<u> </u>
11 Fees for services (nonemployees):			1	
a Management	10,850.	10,271.	481.	98,
b Legalc Accounting	29,454.	25,358.	3,405.	691
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25,	198,405.	196,950.	868.	587
column (A), amount, list line 11g expenses on Sch O.)	1,000.	1,000.		
12 Advertising and promotion	652,068.	632,073.	6,916.	13,079
13 Office expenses	19,907.	16,341.	1,043.	2,523
15 Royalties				
16 Occupancy	141,996.	133,318.	7,214.	1,464
17 Travel	390,632.	376,589.	446.	13,597
18 Payments of travel or entertainment expenses				
for any federal, state, or local public officials	997,027.	960,149.		36,878
19 Conferences, conventions, and meetings	991,041.	200,142.		
20 Interest				
21 Payments to affiliates	6,475.	5,574.	749.	152
23 Insurance	28,370.	25,167.	2,662.	541
Other expenses, Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
amount, list line 24e expenses on Schedule 0.)	398,301.	398,301.		
a KIT PURCHASES b STIPENDS	238,304	233,764.		4,540
CUID DICITI IM DIDCHACEC	88,633.	88,633.		
d OTHER EXPENSES	78,344.	73,879.	2,316.	2,149
e All other expenses				445 400
25 Total functional expenses. Add lines 1 through 24e	6,064,745.	5,874,746.	72,897.	117,102
26 Joint costs. Complete this line only if the organization				
reported in column (B) joint costs from a combined	1			
educational campaign and fundraising solicitation.				
Check here if following SOP 98-2 (ASC 958-720)			<u> </u>	Form 990 (202

232010 12-13-22

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or no	te to ar	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			754,324.	1	227,469.
	2	Savings and temporary cash investments			3,359,509.	2	4,545,660.
	3	Pledges and grants receivable, net			398,768.	3	3,143,639
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current of			* - N		
	1	trustee, key employee, creator or founder, sub-	stantial o	contributor, or 35%			
		controlled entity or family member of any of the		5			
	6	Loans and other receivables from other disqua			The second secon		
		under section 4958(f)(1)), and persons describe	d in sec	tion 4958(c)(3)(B)		6	
Σ	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use			229,289.	8	207,077
ď	9	D 11			35,806.	9	48,615
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D					
	b	Less: accumulated depreciation	10b	79,675.	24,491.	10c	28,294
i	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line			12		
	13	Investments - program-related. See Part IV, line	11			13	
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11	0.	15	470,402		
	16	Total assets. Add lines 1 through 15 (must equ		4,802,187.	16	8,671,156.	
	17	Accounts payable and accrued expenses			114,798.	17	306,225.
	18	Grants payable	*********			18	
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete	Part IV	of Schedule D		21	
တ္က	22	Loans and other payables to any current or for	ner offic	er, director,			
ij		trustee, key employee, creator or founder, subs	tantial c	ontributor, or 35%			and the second of the second of
Liabilities		controlled entity or family member of any of the	se pers	ons		22	
_	23	Secured mortgages and notes payable to unrel				23	
	24	Unsecured notes and loans payable to unrelate	d third ş	parties		24	
	25	Other liabilities (including federal income tax, page 1)	•				
		parties, and other liabilities not included on line	s 17-24)	. Complete Part X			
		of Schedule D			2,334.	25	478,967.
	26	Total liabilities. Add lines 17 through 25			117,132.	26	785,192.
,,		Organizations that follow FASB ASC 958, ch	eck her	e X	4 - N		
š		and complete lines 27, 28, 32, and 33.]			
la la	27				348,293.	27	153,221.
ä	28				4,336,762.	28	7,732,743.
ŭ		Organizations that do not follow FASB ASC 9	958, che	ck here			
느		and complete lines 29 through 33.			Service of American		
ţş	29	Capital stock or trust principal, or current funds				29	
SSe	30	Paid-in or capital surplus, or land, building, or e				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in			4 605 055	31	7 005 064
ž		Total net assets or fund balances			4,685,055.	32	7,885,964.
	33	Total liabilities and net assets/fund balances			4,802,187.	33	8,671,156.

Form 990 (2022)

b 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

232012 12-13-22

Form 990 (2022)

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ,

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

NATIONAL ENERGY EDUCATION DEVELOPMENT

OMB No. 1545-0047

Open to Public

Employer identification number

PROJECT INC. 54-1646670 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s) (i) Name of supported (iv) Is the organization listed (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other organization (described on lines 1-10 support (see instructions) support (see instructions) above (see instructions)) Total

(Form 990) 2022 PROJECT, INC. 54-1646 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support		·-				*
Cale	endar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and		1-7-2-15	15,2025	14) 2021	(6) 2022	(i) IOtal
	membership fees received. (Do not		İ				
	include any "unusual grants.")	5204521.	4259938.	4446355.	4207915.	9116774	27235503.
2	Tax revenues levied for the organ-			1110000	12075150	<u> </u>	2/233303.
	ization's benefit and either paid to						
	or expended on its behalf	1					
2	The value of services or facilities						
٠	furnished by a governmental unit to						
	the organization without charge						
	• •••	5204521.	4259938.	4446255	4000015	0444	
4	Total. Add lines 1 through 3	3204321.	4459938.	4446355.	4207915.	9116774.	27235503.
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)						13217806.
6	Public support. Subtract line 5 from line 4.						14017697.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	5204521.	4259938.	4446355.	4207915.		27235503.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,				İ		
	and income from similar sources	14,506.	22,674.	10,097.	3,062.	6,335.	56,674.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on	,				į	
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	5,318.	5,106.	10,853.	6,305.	6,077.	33 650
	Total support. Add lines 7 through 10	3,5101	3,1000	10,033.	0,303.		33,659. 27325836.
	Gross receipts from related activities,	etc (see instruction	nel		· · · · · · · · · · · · · · · · · · ·		,493,210.
13	First 5 years. If the Form 990 is for th	e organization's fire	et second third for	and a fifth town		12 1	,493,ZIU.
	organization, check this box and stop						
	tion C. Computation of Public		entage				
	Public support percentage for 2022 (li			olumn (f)		14	51.30 %
	Public support percentage from 2021						F 4 0.4
16a	33 1/3% support test - 2022. If the o	ragnization did not	chack the hey on	line 10 and time 1	4 i= 00 1 (00/	15	
	stop here. The organization qualifies a						
	33 1/3% support test - 2021. If the o				: 45 i- 00 4 (00)		<u>X</u>
~	and stop here. The organization quali-	figa as a publiclus	CHECK A DOX OF RE	ie io orioa, ano i	ine 15 is 33 1/3% (or more, check this	s box
179	and stop here. The organization quali	2000 If the area	ipported organizat	ion	40.4040		
	10% -facts-and-circumstances test						
	and if the organization meets the facts	and-circumstance	s test, check this b	ox and stop here	e. Explain in Part V	'I how the organiza	ation
	meets the facts-and-circumstances tes						
D	10% -facts-and-circumstances test	- 2021. If the orga	nization did not ch	eck a box on line	13, 16a, 16b, or 17	a, and line 15 is 1	0% or
	more, and if the organization meets the	e iacts-and-circums	stances test, checl	tnis box and sto	p here. Explain in	Part VI how the	
	organization meets the facts-and-circu						<u> </u>
18	Private foundation. If the organization	aid not check a b	ox on line 13, 16a,	16b, 17a, or 17b,	check this box an		
						Schedule A (Form 990) 2022

Schedule A (Form 990) 2022 PROJECT, INC.

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.)

Se	ction A. Public Support	_						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021		(e) 2022	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")							
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose		:					
3	Gross receipts from activities that							
	are not an unrelated trade or bus-			i		1		
	iness under section 513		i			ŀ		
4	Tax revenues levied for the organ-							
	ization'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					ł		
6	Total. Add lines 1 through 5					†		
	Amounts included on lines 1, 2, and							<u> </u>
1 4	3 received from disqualified persons							
b	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							
	Public support. (Subtract line 7c from line 6.)							
	tion B. Total Support	/						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6		"					
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975							
С	Add lines 10a and 10b							
	Net income from unrelated business activities not included on 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							
13	assets (Explain in Part VI.)							
	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third.	fourth, or fifth tax	vear as a section !	501(c)(3) organizatio	on,
	check this box and stop here							
Sec	tion C. Computation of Publi							
	Public support percentage for 2022 (I			column (fi)		15		%
16	Public support percentage from 2021				***************************************	16		%
	tion D. Computation of Inves				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 10 1		
	Investment income percentage for 20			ing 12 column (f)		17		%
	-					18		% %
	Investment income percentage from			an line 14 and line		-		
19a	33 1/3% support tests - 2022. If the						o, and line 1	L IS LIOI
_	more than 33 1/3%, check this box ar							
b	33 1/3% support tests - 2021. If the	-						по ———
	line 18 is not more than 33 1/3%, che							
	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	nis box and see in:	structio		/=
23202	3 12-09-22						Schedule A	(Form 990) 2022

2022.04030 NATIONAL ENERGY EDUCATION 193192_1

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes." explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
	-	
1		
	T	
2		
3a_	 	_
]		1
		ŀ
3b	 	<u> </u>
3c		
	1	
4a	**************************************	
4b	<u> </u>	
4c	<u> </u>	ļ <u>.</u>
5a		
	.	
<u>5b</u>		
5c		
6		
7		
8		
9a		
9b		
9с		
		:
40		
10a		-
10b	J	

the supported organization(s) to which the organization was responsive: If Yes, their in the violenting
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.
Did the activities described on line 2a, above, 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 lines 3a and 3b 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? If "Yes" or "No" 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.

3b Schedule A (Form 990) 2022

2a

2b

За

b

1 2

3

4

5

6

Schedule A (Form 990) 2022

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

Section C - Distributable Amount

Enter greater of line 2 or line 3.

instructions).

Income tax imposed in prior year

Enter 0.85 of line 1.

2

Adjusted net income for prior year (from Section A, line 8, column A)

Minimum asset amount for prior year (from Section B, line 8, column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

Schedule A (Form 990) 2022

8 Breakdown of line 7:
 a Excess from 2018
 b Excess from 2019
 c Excess from 2020
 d Excess from 2021
 e Excess from 2022

NATIONAL ENERGY EDUCATION DEVELOPMENT

Schedule A (Form 990) 2022 PROJECT, INC. 54-1646670 Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Se Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME: OTHER INCOME 2018 AMOUNT: 5,318. 5,106. 2019 AMOUNT: \$ 2020 AMOUNT: 10,853. 2021 AMOUNT: 6,305. 2022 AMOUNT: \$ 6,077.

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization

NATIONAL ENERGY EDUCATION DEVELOPMENT PROJECT, INC.

Employer identification number

54-1646670

Organiz	ation type (check o	ne):
Filers o	f:	Section:
Form 98	00 or 990-EZ	X 501(c)(3) (enter number) organization
		4947(a)(1) nonexempt charitable trust not treated as a private foundation
		527 political organization
Form 99	0-PF	501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
	nly a section 501(c)(covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
Jenerai	nuie	
	-	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special	Rules	
X	sections 509(a)(1) a contributor, during	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; line 1. Complete Parts I and II.
	contributor, during	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, nal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering
	-	instead of the contributor name and address), II, and III.
	year, contributions is checked, enter he purpose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., applete any of the parts unless the General Rule applies to this organization because it received nonexclusively except, etc., contributions totaling \$5,000 or more during the year \$
answer '	'No" on Part IV, line	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 2, of its Form 990; or check the box on line H of its Form 990·EZ or on its Form 990·PF, Part I, line 2, to certify requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022) Name of organization Employer identification number NATIONAL ENERGY EDUCATION DEVELOPMENT PROJECT, INC. 54-1646670 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution 1 Person Payroll 4,700,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 2 X Person Payroll 491,000. Noncash

			noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	-	\$ 450,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$250,611.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6		\$\$	Person X Payroll

Name of organization

NATIONAL ENERGY EDUCATION DEVELOPMENT

54-1646670

Employer identification number

PROJECT, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$215,878.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$ <u>183,600.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
223452 11-15		\$	Person Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (2022)

Name of organization
NATIONAL ENERGY EDUCATION DEVELOPMENT
PROJECT, INC.

Employer identification number

54-1646670

Part II I	Noncash Property (see instructions). Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. From	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_		\$	
(a) No. rom art i	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
a) lo. om art l	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
a) lo. om ort l	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
i3 11-15-22			Schedule B (Form 990) (20

Schedule B (Form 990) (2022) Name of organization Employer identification number NATIONAL ENERGY EDUCATION DEVELOPMENT PROJECT, INC. 54-1646670 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift Part (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (d) Description of how gift is held from (b) Purpose of gift (c) Use of gift Part I (e) Transfer of gift Relationship of transferor to transferee

Schedule B (Form 990) (2022)

Transferee's name, address, and ZIP + 4

SCHEDULE D

Supplemental Financial Statements

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

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

Inspection

OMB No. 1545-0047

NATIONAL ENERGY EDUCATION DEVELOPMENT

PROJECT. INC. Employer identification number 54-1646670

Pai	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds or Ac	counts. Complete if the
	organization answered "Yes" on Form 990, Part IV, Iin	ne 6.	
		(a) Donor advised funds ((b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year	·	
5	Did the organization inform all donors and donor advisors in		ds
	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose confern	ing
	impermissible private benefit?		
Pai	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recrea	ation or education) Preservation of a histo	orically important land area
	Protection of natural habitat	Preservation of a certi	fied historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form of a co	nservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	after July 25,2006, and not on a	
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel	leased, extinguished, or terminated by the organi	zation during the tax
	year		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conservation	n easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation eas	sements during the year
			m
8	Does each conservation easement reported on line 2(d) above	•	
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footr	note to the organization's financial statements the	at describes the
Dos	organization's accounting for conservation easements. t III Organizations Maintaining Collections of	Art Historical Treasures or Other S	imilar Assets
Par			1111101 A330101
_	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under FASB ASC 95		
	of art, historical treasures, or other similar assets held for put		ice or public
	service, provide in Part XIII the text of the footnote to its finar		- the at works of
b	If the organization elected, as permitted under FASB ASC 95		
	art, historical treasures, or other similar assets held for public	e exhibition, education, or research in turtherance	or public service,
	provide the following amounts relating to these items:		•
	(i) Revenue included on Form 990, Part VIII, line 1		
		the state of the s	
2	If the organization received or held works of art, historical tre		provide
	the following amounts required to be reported under FASB A		Ф.
а	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instructions	s tor Form 990.	Schedule D (Form 990) 2022

232051 09-01-22

NATIONAL ENERGY EDUCATION DEVELOPMENT

	edule D (Form 990) 2022 PROJECT	, INC.					<u>54-16</u>	<u>46670</u>	Page 2
Pa	rt III Organizations Maintaining C	collections of A	t, Historica	l Treasures, o	r Other	Simila	r Assets	continue (ed)
3	Using the organization's acquisition, accessi	on, and other record	is, check any o	f the following tha	t make si	gnificant i	use of its		
	collection items (check all that apply):		-	•		=			
а	Public exhibition	(d Loan o	or exchange progr	am				
b	Scholarly research								
c	Preservation for future generations	`	01101						
4		alla astawa awat awala:	- L					200	
	Provide a description of the organization's co						se in Part	XIII.	
5	During the year, did the organization solicit of						_	7	r—
Da	to be sold to raise funds rather than to be mi	aintained as part of t	he organization	n's collection?		**********		Yes	No
Ра	rt IV Escrow and Custodial Arran	gements. Compl	ete if the organ	ization answered	"Yes" on	Form 990), Part IV,	line 9, or	
	reported an amount on Form 990, Pa								
1a	Is the organization an agent, trustee, custod								
	on Form 990, Part X?	*,	*******************			***********		Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII								
								Amount	
С	Beginning balance					1c			
d	Additions during the year								
	Distributions during the year								
f							•		
	Ending balance							٦٧ ا	
	-	•						」Yes ∣	No
Pai	If "Yes," explain the arrangement in Part XIII. † V Endowment Funds. Complete in								
I al	Lindowine it i dinds. Complete		1					/ 1 Canada	
		(a) Current year	(b) Prior ye	ar (c) Two yea	rs back	(d) Three y	ears back	(e) Four ye	ars back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs				1				
f	Administrative expenses					-			
	End of year balance								
2	Provide the estimated percentage of the curr	ent year end balance	e ffine 1a. colur	nn (a)) hald as:					
_	Board designated or quasi-endowment	citt your ond balance	%	ini (a)) noid as.					
a		0/							
b	Permanent endowment	%							
С		%							
	The percentages on lines 2a, 2b, and 2c show	•							
За	Are there endowment funds not in the posses	ssion of the organiza	ition that are he	eld and administer	ed for the)			
	organization by:							Ye	s No
	(i) Unrelated organizations							3a(i)	
	(ii) Related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	ed on Schedule	₹R?				_3b	
4	Describe in Part XIII the intended uses of the	organization's endo	wment funds.						
Par	t VI Land, Buildings, and Equipm	ent.							
	Complete if the organization answered	d "Yes" on Form 990	, Part IV, line 1	1a. See Form 990	, Part X, li	ine 10.			
	Description of property	(a) Cost or o	1	Cost or other		cumulate	d T	(d) Book va	alue
	becompast of property	basis (investn	' '	asis (other)		reciation	٦	(a) Dook ve	1,00
	Land	···-		(0.11.01)					
	Land								
b	Buildings								
	Leasehold improvements			40 030		21 47	10		420
	Equipment			40,839.		$\frac{31,40}{40000000000000000000000000000000000$			439.
	Other			67,130.		48,27	/5.		855.
<u>Total</u>	. Add lines 1a through 1e. (Column (d) must et	gual Form 990. Part	X. column (B). Ii	ine 10c.)				<u>28,</u>	294.

Schedule D (Form 990) 2022

	NATIONAL E	NERGY EDUCATIO	N DEVELOPMENT	
Schedule D (Form 990) 2022	PROJECT, I	NC.		54-1646670 Page
Part VII Investments - Oth				<u> </u>
Complete if the organiz	ation answered "Yes	s" on Form 990, Part IV, line	11b. See Form 990, Part X, line 12	
(a) Description of security or category			(c) Method of valuation: Cost	or end-of-year market value
(1) Financial derivatives	,			
(2) Closely held equity interests				
(3) Other				
(A)				
(B)	· · · · · · · · · · · · · · · · · · ·			
(C)				
(D)		<u> </u>		
(E)				
(F)				
(G)		<u> </u>		
(H)				
Total. (Col. (b) must equal Form 990, Par	t X, col. (B) line 12.)	<u> </u>	1	
Part VIII Investments - Pro	-			
(a) Description of inve			11c. See Form 990, Part X, line 13	
	sinent	(b) Book value	(c) Method of valuation: Cost	or end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				 .
(8)		 		
(9)	A.V. and (D) line 40.)			
Total. (Col. (b) must equal Form 990, Part Part IX Other Assets.	(A, col. (B) line 13.)		L	
	ation answered "Vee'	on Form 990 Part IV line	11d. See Form 990, Part X, line 15.	
Complete ii the organize) Description	11d. Geet Gill 990, Part X, line 19.	(b) Book value
(1) RIGHT-OF-USE AS				470,402.
(2)	OHI - OHK	WITING		470,402.
(3)				
(4)	· · · · · · · · · · · · · · · · · · ·		····	
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 9.	90 Part X col (R) lin	0 15)		470,402.
Part X Other Liabilities.	30, 7 art 7, con (2) iii 1	C 10.)	***************************************	17072021
Complete if the organiza	tion answered "Yes"	on Form 990, Part IV, line 1		ne 25.
	otion of liability			(b) Book value
(1) Federal income taxes				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(2) OPERATING LEASE	LIABILITI	ES		478,967.
(3)				,
(4)				
(5)				-
(6)				

478,967. Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... X

Schedule D (Form 990) 2022

(7) (8)

NATIONAL ENERGY EDUCATION DEVELOPMENT

Schedule D (Form 990) 2022 PROJECT, INC. Part XI Reconciliation of Revenue per Audited Financial Statement		54-	1646670	Page 4
The state of the s		er 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			0.050	100
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			9,359,	129.
a Net unrealized gains (losses) on investments	2a			
b Donated services and use of facilities	2b 3,5	500.		
c Recoveries of prior year grants	2c			
d Other (Describe in Part XIII.)	2d 89,9	75.		
e Add lines 2a through 2d		2e	93,	475.
3 Subtract line 2e from line 1		3	9,265,	
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				
b Other (Describe in Part XIII.)				
c Add lines 4a and 4b		4c		0.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.) Part XII Reconciliation of Expenses per Audited Financial Stateme	nto With Evacues	5	9,265,	<u>654.</u>
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		-	1.	
Total expenses and losses per audited financial statements	·		C 150	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	*******************************	1	6,158,	<u> </u>
a Donated services and use of facilities	2a 3,5	:nn		
b Prior year adjustments	2b	-		
c Other losses	2c			
d Other (Describe in Part XIII.)		75.		
e Add lines 2a through 2d	<u> </u>	2e	93.	475.
3 Subtract line 2e from line 1		3	6,064,	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:	***************************************		<u>-, </u>	
a Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b Other (Describe in Part XIII.)	_4b			
c Add lines 4a and 4b		4c		0.
5 Total expenses. Add lines 3 and 4c. This must equal Form 990, Part I, line 18.)	,	5	6,064,	745.
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 additi	onal information.			
				
PART X, LINE 2:				
NEED PERFORMED AN EVALUATION OF UNCERTAINTY IN	INCOME TAXE	S FOR T	HE YEAR	
	1 111001111 1111111	D I OIL I	HU LEMIC	
ENDED DECEMBER 31, 2022, AND DETERMINED THAT T	HERE WERE NO	MATTER	S THAT	
WOULD REQUIRE RECOGNITION IN THE FINANCIAL STA	TEMENTS OR T	HAT MAY	HAVE AN	1X
EFFECT ON ITS TAX-EXEMPT STATUS, AND THERE ARE	CURRENTLY N	O EXAMI	NATIONS	
DEMOTIO OF THE PROGRESS				
PENDING OR IN PROGRESS.				
PART XI, LINE 2D - OTHER ADJUSTMENTS:				
THE THE PERSON AND TH				
COST OF GOODS SOLD			89,97	5 -
				
PART XII, LINE 2D - OTHER ADJUSTMENTS:				
TO THE OT GOOD G ST. T.				
COST OF GOODS SOLD	···	,	<u>89,</u> 97	<u>5.</u>
32054 09-01-22		Schedu	le D (Form 990) 2022

NATIONAL ENERGY EDUCATION DEVELOPMENT Schedule D (Form 990) 2022 PROJECT, IN Part XIII Supplemental Information (continued) 54-1646670 Page 5 PROJECT, INC.

SCHEDULE (Form 990)

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Open to Public 2022

OMB No. 1545-0047

Attach to Form 990.

Employer identification number 54-1646670 Inspection Go to www.irs.gov/Form990 for the latest information. NATIONAL ENERGY EDUCATION DEVELOPMENT General Information on Grants and Assistance INC PROJECT, Name of the organization Department of the Treasury Internal Revenue Service Part

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	Yes art IV, line 21, for any

1 (a) Name and address of organization	(p) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(a) Description of	(h) Purpose of grant
or government		(if applicable)	cash grant	noncash assistance	valuation (book, FMV, appraisal, other)	noncash assistance	or assistance
SA SOLAR HOLDCO 2022, LLC							SCHOOL SOLAR
11 E. BEVERLY STREET, SUITE 19 STAUNTON, VA 24401	87-3599212	N/A	125,000.	0			INSTALLATIONS AND CLIMATE EDUCATION
SECURE FUTURES LLC							SCHOOL SOLAR
11 E. BEVERLY STREET, SUITE 19 STAUNTON, VA 24401	73-1690793 N/A	N/A	88,673.	0.			INSTALLATIONS AND CLIMATE EDUCATION
AFTER SCHOOL ALL STARS							
1501 CHERRY STREET							
PHILADELPHIA, PA 19102	95-4441208	501(C)(3)	30,000.	0			STEM TRAINING AND SUPPORT
CENTER FOR ENERGY WORKFORCE							
DEVELOPMENT - 701 PENNSYLVANIA AVE							
NW, 3RD FLOOR - WASHINGTON, DC							
20004	20-4504014	501(c)(3)	30,000.	0.			STEM TRAINING AND SUPPORT
BOYS & GIRLS CLUB OF CHESTER							
201 E. 7TH STREET							
CHESTER, PA 19013	23-1490049	501(C)(3)	18,500.	0			STEM TRAINING AND SUPPORT
EDUCATIONWORKS							
ACOUNTY AND MINISTER ACCOUNTY							
AND SPATING GARDEN ST. #601							
31	22-3798916 501(C)	501(C)(3)	15,000.	0			STEM TRAINING AND SUPPORT
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	nd government or	ganizations listed in the	line 1 table				11.

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2022

NATIONAL ENERGY EDUCATION DEVELOPMENT

Page 1 STEM TRAINING AND SUPPORT STEM TRAINING AND SUPPORT STEM TRAINING AND SUPPORT STEM TRAINING AND SUPPORT STEM TRAINING AND SUPPORT STEM TRAINING AND SUPPORT STEM TRAINING AND SUPPORT (h) Purpose of grant or assistance 54-1646670 (g) Description of non-cash assistance Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (f) Method of valuation (book, FMV, appraisal, other) 。 0 ٥. (e) Amount of noncash assistance Ö ö o. ٥, (d) Amount of cash grant 12,000. 8,180. 10 000 10,000 10,000 10,000 7,000. (c) IRC section if applicable 23-1747032 501(C)(3) 23-2235948 501(C)(3) 23-2943764 501(C)(3) 23-1360867 501(C)(3) 94-3141287 501(C)(3) 23-2323488 S01(C)(3) 501(c)(3) 23-1607172 (P) EIN GIRLS INC, OF GREATER PHILADELPHIA LEGACY YOUTH TENNIS AND EDUCATION PROJECT, OVERBROOK ENVIRONMENTAL EDUCATION CENTER - 6134 LANCASTER AVENUE -& SNJ - 1901 S. 9TH STREET -(a) Name and address of organization or government INDOCHINESE AMERICAN COUNCIL OAKLAND HEBREW DAY SCHOOL PHILADELPHIA, PA 19129 PHILADELPHIA, PA 19111 PA 19151 PHILADELPHIA, PA 19464 PHILADELPHIA, PA 19148 PHILADELPHIA, PA 19141 4934-36 OLD YORK ROAD YWCA TRI-COUNTY AREA CORA SERVICES INC. 5500 REDWOOD ROAD OAKLAND, CA 94619 Schedule I (Form 990) 8540 VEREE ROAD 4842 RIDGE AVE. PHILADELPHIA, 315 KING ST.

232241 04-01-22

Schedule (Form 990)

Page 2

54-1646670

Schedule I (Form 990) 2022 PROJECT, INC.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

r arr III cari pe urpircateu ii auditiotiai space is ileeueu.					
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
EXELON FOUNDATION STEM ACADEMY SCHOLARSHIPS	28	488,667.	.0		
COMED FUTURE OF ENERGY SCHOLARSHIPS	5.5	286,000.	0		
BOB THOMPSON AWARDS	9	6,000.	°°		
EXELON STEM ACADEMY STEM CHALLENGE	7.7	4,725.	.0		
YOUTH LEADERSHIP AWARDS	1	1,500.	0.		
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	quired in Part I, lin	e 2; Part III, column	(b); and any other ad	ditional information.	
PART I, LINE 2:					
NEED RECEIVES GRANT REPORTS BASED (ON THE RE	REQUIREMENTS	OF EACH	INDIVIDUAL	
GRANT PROGRAM WHICH INCLUDES: BUDG	BUDGET JUSTIFICATION,		DOCUMENTATION	CON OF	
STUDENT WORK, INVITATIONS TO EVENTS	FUNDED	BY THE GRANT	NT PROVIDED	O TO THE	
SCHOOL, AND REPORTS OF EVALUATIONS	AND STUDENT	ENT PROGRAMS	MS ASSOCIATED	FED WITH THE	
GRANT RECEIVED BY THE SCHOOL. THESE	SE REPORTS	ARE	REVIEWED BY NEED	3D TO ENSURE	
THE FUNDS HAVE BEEN EXPENDED IN ACC	ACCORDANCE	WITH THE P	PURPOSE OF	THEIR	
ISSUANCE.					

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Questions Regarding Compensation

Department of the Treasury

Internal Revenue Service

NATIONAL ENERGY EDUCATION DEVELOPMENT PROJECT, INC.

Employer identification number 54-1646670

1a	Chapte the annualists have a 18th annual attention of the control			
	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	i		
	First-class or charter travel Housing allowance or residence for personal use	1		
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments].		
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to	-		
	establish compensation of the CEO/Executive Director, but explain in Part III.			l
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
	The second of compensation committee			ĺ
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			İ
а	Receive a severance payment or change-of-control payment?	4a	/	X
b		4b		X
	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			: :
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:		ı	
а	The organization?	5a	~ px px	X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.	- 00		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			
а	The organization?	6a		X
	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments		.	
	not described on lines 5 and 6? If "Yes," describe in Part III	7	X	
	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in		\dashv	
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2022

ROJECT, INC.

Schedule J (Form 990) 2022 PROJECT, INC.

Page 2

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

54-1646670

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

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

		(B) Breakdown of W	W-2 and/or 1099-MISC and/or 1099-NEC compensation		(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(I)-(D)	(F) Compensation in column (R)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) MARY E. SPRUILL	(i)	229,48	15,00	0.	13,769.	0	258,255.	0
EXECUTIVE DIRECTOR	⊞	į		0.	0	0		0
	Ξ							
	(ii)							
	(3)							
	(m)							
	Θ							
	(ii)							
	Ξ							
	(ii)							
	Θ							!
	(ii)							
	ε							
	(ii)							
	Ξ							
	▣							
	Ξ							
	Ξ							
	Ξ							
	⊞							
	Ξ							
	Ξ							
	Ξ							
	Ξ							
	⊞							
	Ξ							
	Ξ							
	Ξ							
	Ξ							
	Ξ							
	Ξ							

Schedule J (Form 990) 2022

NATIONAL ENERGY EDUCATION DEVELOPMENT

INC. PROJECT,

Part III Supplemental Information

Schedule J (Form 990) 2022

54-1646670

Page 3

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

|--|

SCHEDULE L

Department of the Treasury

(Form 990)

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ.

| Internal Revenue Service | Go to www.irs.gov/Form990 for instructions and the latest information.
| Name of the organization | NATIONAL ENERGY EDUCATION DEVELOPMENT

OMB No. 1545-0047

2022

Open To Public Inspection

Name of the organization Employer identification number PROJECT. INC. 54-1646670 Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (b) Relationship between disqualified (d) Corrected? (a) Name of disqualified person (c) Description of transaction person and organization Yes No 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22, (d) Loan to or (a) Name of (b) Relationship (c) Purpose (e) Original (f) Balance due (g) In (i) Written by board or from the interested person with organization of loan principal amount default? agreement? organization? committee? To From Yes Yes No Yes No \$ Grants or Assistance Benefiting Interested Persons. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (a) Name of interested person (c) Amount of (b) Relationship between (d) Type of (e) Purpose of interested person and assistance assistance assistance the organization

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

Schedule L (Form 990) 2022

(a) Name of interested person	() () () () () () () () () ()		(e) Sharing of organization's		
	person and the organization	transaction	transaction	reven	iues?
BONNY SPRUILL	PARENT OF MARY E. S	50,965.	BONNY SPRUI	res	No X
			-		
Part V Supplemental Information.					
Provide additional information for res	ponses to questions on Schedule L (see in	structions).			
SCH L, PART IV, BUSINESS	TRANSACTIONS INVOLVING	G INTERESTE	D PERSONS:		
(A) NAME OF PERSON: BONNY	CDDIITT.T.				
(A) NAME OF FERBOIN. BONNI	SEKOTUU				
(B) RELATIONSHIP BETWEEN	INTERESTED PERSON AND	ORGANIZATI	ON:		
PARENT OF MARY E. SPRUILL	. EXECUTIVE DIRECTOR				
(C) AMOUNT OF TRANSACTION	\$ 50,965.				
(D) DESCRIPTION OF TRANSAC	CTION: BONNY SPRUILL S	SERVES ON T	HE NEED STAI	FF	
IN A PART-TIME CAPACITY MA	ANAGING THE DISTRIBUT	ON CENTER	LOCATED IN		
			HOCKIED IN		
ROANOKE, VIRGINIA, REPORTI	ING TO THE CURRICULUM	DIRECTOR.		<u>.</u>	
(E) SHARING OF ORGANIZATION	ON REVENUES? = NO				
		,			
			·		
		•			
					

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Go to www.irs.gov/Form990 for the latest information. NATIONAL ENERGY EDUCATION DEVELOPMENT PROJECT, INC.

Employer identification number 54-1646670

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
MULTI-SIDED ENERGY EDUCATION PROGRAMS. NEED DESIGNS AND DELIVERS ENERGY
EDUCATION CURRICULUM AND TRAINING TO K-12 CLASSROOMS AND SUPPORTS
EDUCATORS SEEKING TO INTEGRATE ENERGY INTO LOCAL CURRICULUM.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
GENERATION SCIENCE STANDARDS, COMMON CORE STANDARDS AND STATE EDUCATION
STANDARDS. ADDITIONAL TEACHER PROFESSIONAL DEVELOPMENT OPPORTUNITIES
(WEEKLONG CONFERENCES) ARE HELD DURING THE SUMMER. IN ADDITION TO
TEACHER PROFESSIONAL DEVELOPMENT, NEED HOSTS NUMEROUS STUDENT ENERGY
WORKSHOPS AND WORKFORCE DEVELOPMENT PROGRAMS ACROSS THE UNITED STATES.
THESE PROGRAMS RANGE FROM 3 HOURS TO SIX DAYS AND INCLUDE ENERGY
EXPLORATION AND CONTENT KNOWLEDGE AS WELL AS CAREER AND WORKFORCE
DEVELOPMENT OPPORTUNITIES, MENTORSHIP AND INTERNSHIPS.
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
YEAR. IN ADDITION, NEED HAS DEVELOPED A STRONG GRANT-MAKING CAPABILITY
AND ADMINISTERS A NUMBER OF GRANT PROGRAMS THANKS TO THE SUPPORT OF
SEVERAL DONORS. ALL OF THESE GRANT PROGRAMS HAVE A RUBRIC AND
INDEPENDENT REVIEWERS. NEED BOTH ADMINISTERS THE RECRUITMENT/MARKETING
PHASE OF THE GRANTS AND THE ONLINE APPLICATION, SELECTION, AND ACTUAL
PAYMENT OF THE GRANT TO THE INDIVIDUAL SCHOOL.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

KITS AND MATERIALS: NEED'S KITS AND MATERIALS ARE DELIVERED TO TEACHERS

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

Schedule O (Form 990) 2022

Name of the organization NATIONAL ENERGY EDUCATION DEVELOPMENT Employer identification number PROJECT, INC. 54-1646670 WITH SPONSORSHIP SUPPORT VIA NEED TEACHER WORKSHOPS AND CONFERENCES. EXPENSES \$ 814,471. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. YOUTH AWARDS PROGRAM: NEED'S YOUTH AWARDS FOR ENERGY ACHIEVEMENT RECOGNIZES SCHOOLS AND STUDENTS WHO MAKE A COMMITMENT TO ENERGY EDUCATION OUTREACH IN THEIR COMMUNITIES. PROJECTS REVIEWED AS EXCEPTIONAL ARE INVITED TO ATTEND THE NEED YOUTH ENERGY CONFERENCE AND AWARDS EACH YEAR. EXPENSES \$ 364,519. INCLUDING GRANTS OF \$ 7,800. REVENUE \$ 132,375. CURRICULUM DEVELOPMENT: NEED MAINTAINS, EXPANDS AND DEVELOPS NEW CURRICULUM WITHIN ITS 150 MODULE CURRICULUM PORTFOLIO ON A REGULAR BASIS. THIS CURRICULUM IS AVAILABLE ONLINE AND VIA NEED'S TEACHER AND STUDENT WORKSHOPS. EXPENSES \$ 312,056. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. TRAINING CONFERENCES: NEED HOSTS THE NEED ENERGY CONFERENCE FOR EDUCATORS EACH YEAR. DESIGNED AS AN INTENSIVE ENERGY COURSE FOR TEACHERS, THE WEEK-LONG PROGRAM PROVIDES PARTICIPATING EDUCATORS WITH A DEPTH OF ENERGY KNOWLEDGE, CLASSROOM PLANS, AND NETWORKING OPPORTUNITIES. EXPENSES \$ 200,794. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. PROGRAM DEVELOPMENT EXPENSES \$ 149,390. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0. FORM 990, PART VI, SECTION B, LINE 11B: A DRAFT OF THE FEDERAL FORM 990 IS PROVIDED TO THE EXECUTIVE DIRECTOR, 232212 10-28-22 Schedule O (Form 990) 2022

Name of the organization NATIONAL ENERGY EDUCATION DEVELOPMENT PROJECT, INC.

Employer identification number 54-1646670

TREASURER AND AUDIT COMMITTEE FOR REVIEW. REVISIONS AS NEEDED ARE MADE BY

MARCUM LLP AND A FINAL DRAFT FEDERAL FORM 990 IS DELIVERED TO THE EXECUTIVE

DIRECTOR FOR REVIEW BY THE FULL BOARD OF DIRECTORS. ANY ADDITIONAL

REVISIONS ARE MADE BY MARCUM LLP, AND THE FEDERAL FORM 990 IS THEN FILED

WITH THE INTERNAL REVENUE SERVICE.

FORM 990, PART VI, SECTION B, LINE 12C:

THE NEED BOARD OF DIRECTORS IS SMALL AND INTERACTIONS AND ACTIVITIES ARE

EASILY AND REGULARLY MONITORED. AT LEAST ONCE PER YEAR, THE CONFLICT OF

INTEREST POLICY IS REVIEWED BY THE BOARD OF DIRECTORS AND NEW CONFLICT OF

INTEREST FORMS ARE COMPLETED AND RETURNED TO NEED. IN ADDITION, NEED HAS A

CONFLICT OF INTEREST POLICY FOR STAFF. DISCLOSURES ARE MADE ANNUALLY.

FORM 990, PART VI, SECTION B, LINE 15A:

THE NEED BOARD OF DIRECTORS ANNUALLY REVIEWS THE COMPENSATION FOR THE EXECUTIVE DIRECTOR AND CONSIDERS ALL ASPECTS OF THE POSITION REQUIREMENTS, SUCCESS BASED ON AN ANNUALLY AGREED UPON SET OF GOALS AND ACTION ITEMS, AND THE OVERALL FINANCIAL HEALTH OF NEED. ANNUALLY, THE EXECUTIVE COMMITTEE REVIEWS THE PERFORMANCE OF THE EXECUTIVE DIRECTOR, SETS A PERCENTAGE OF SALARY INCREASE, AND A POSSIBLE PERCENTAGE DERIVED BONUS SHOULD NEED'S ORGANIZATIONAL PERFORMANCE AND FISCAL HEALTH WARRANT IT. NEED'S EXECUTIVE COMMITTEE SHARES ITS RECOMMENDATION WITH THE BOARD OF DIRECTORS IMMEDIATELY FOLLOWING THE EXECUTIVE COMMITTEE'S DISCUSSION AT THE ANNUAL DECEMBER BOARD MEETING. THE BOARD OF DIRECTORS THEN APPROVES THE DECISION. THE EXECUTIVE COMMITTEE ISSUES THE REVIEW OF PERFORMANCE AND THE UPCOMING YEAR'S SALARY TO THE EXECUTIVE DIRECTOR AND ACCOUNTING MANAGER FOR FILING AND ACTION. THE EXECUTIVE DIRECTOR'S POSITION AND SALARY ARE REAFFIRMED ANNUALLY PER THE BY-LAWS AT THE SPRING BOARD OF DIRECTORS MEETING.

232212 10-28-22

Name of the organization NATIONAL ENERGY EDUCATION DEVELOPMENT PROJECT, INC.	Page 2 Employer identification number 54-1646670
FORM 990, PART VI, SECTION C, LINE 19:	
NEED MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST I	POLICY AND
FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.	ALSO, A SECTION
OF OUR WEBSITE IS SET ASIDE FOR THE AUDITED FINANCIAL STAT	
FORM 990, AND ANNUAL REPORT.	

Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat, select the "Actual Size" in the Adobe "Print" dialog.

CLIENT'S COPY