

Forms 990 / 990-EZ Return Summary

For calendar year 2022, or tax year beginning _____, and ending _____

26-1439262

ENVIROCERT INTERNATIONAL, INC.

Net Asset / Fund Balance at Beginning of Year 466,736

Revenue

Contributions			
Program service revenue	<u>1,497,249</u>		
Investment income			
Capital gain / loss			
Fundraising / Gaming:			
Gross revenue			
Direct expenses			
Net income			
Other income	<u>91,002</u>		
Total revenue		<u>1,588,251</u>	

Expenses

Program services	<u>1,452,915</u>		
Management and general	<u>160,608</u>		
Fundraising			
Total expenses		<u>1,613,523</u>	
Excess / (deficit)			<u>-25,272</u>

Changes _____

Net Asset / Fund Balance at End of Year 441,464

Reconciliation of Revenue

Total revenue per financial statements	_____
Less:	
Unrealized gains	_____
Donated services	_____
Recoveries	_____
Other	_____
Plus:	
Investment expenses	_____
Other	_____
Total revenue per return	<u><u>1,588,251</u></u>

Reconciliation of Expenses

Total expenses per financial statements	_____
Less:	
Donated services	_____
Prior year adjustments	_____
Losses	_____
Other	_____
Plus:	
Investment expenses	_____
Other	_____
Total expenses per return	<u><u>1,613,523</u></u>

Balance Sheet

	Beginning	Ending	Differences
Assets	<u>967,124</u>	<u>922,735</u>	
Liabilities	<u>500,388</u>	<u>481,271</u>	
Net assets	<u><u>466,736</u></u>	<u><u>441,464</u></u>	<u><u>-25,272</u></u>

Miscellaneous Information

Amended return	
Return / extended due date	<u>11/15/23</u>
Failure to file penalty	_____

Form **990**

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

OMB No. 1545-0047

2022
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

A For the 2022 calendar year, or tax year beginning , and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization <p style="text-align: center;">ENVIROCERT INTERNATIONAL, INC.</p> Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite <p>3054 FITE CIRCLE #108</p> City or town, state or province, country, and ZIP or foreign postal code <p>SACRAMENTO CA 95827</p>	D Employer identification number <p style="text-align: center;">26-1439262</p> E Telephone number <p style="text-align: center;">828-655-1600</p> G Gross receipts \$ 1,589,573
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F Name and address of principal officer: <p>ROBERT ANDERSON 3054 FITE CIRCLE 108 SACRAMENTO CA 95827</p>	H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
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I Tax-exempt status: <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (6) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	H(c) Group exemption number
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J Website: WWW.ENVIROCERT.ORG	L Year of formation: 2007 M State of legal domicile:
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K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other	L Year of formation: 2007 M State of legal domicile:
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Part I Summary

1	Briefly describe the organization's mission or most significant activities: TO ELEVATE KNOWLEDGE AND INSPIRE CONSERVATIONS OF THE GLOBAL ENVIRONMENT THROUGH PROFESSIONAL CERTIFICATION				
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.				
3	Number of voting members of the governing body (Part VI, line 1a)	3	7		
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	7		
5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	13		
6	Total number of volunteers (estimate if necessary)	6	6		
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0		
7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0		
8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year		0
9	Program service revenue (Part VIII, line 2g)	1,376,755	1,497,249		
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	29	0		
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	63,000	91,002		
12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,439,784	1,588,251		
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0		
14	Benefits paid to or for members (Part IX, column (A), line 4)		0		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	806,186	965,006		
16a	Professional fundraising fees (Part IX, column (A), line 11e)		0		
b	Total fundraising expenses (Part IX, column (D), line 25)	0			
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	681,368	648,517		
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	1,487,554	1,613,523		
19	Revenue less expenses. Subtract line 18 from line 12	-47,770	-25,272		
20	Total assets (Part X, line 16)	Beginning of Current Year	End of Year		922,735
21	Total liabilities (Part X, line 26)	967,124	500,388		481,271
22	Net assets or fund balances. Subtract line 21 from line 20	466,736	441,464		

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer ROBERT ANDERSON Type or print name and title		Date PRESIDENT
Paid Preparer Use Only	Print/Type preparer's name Evelyn R. Cook	Preparer's signature Evelyn R. Cook	Date 11/09/23
	Firm's name Cook CPA Group	Firm's EIN 82-1221665	Check <input type="checkbox"/> if PTIN self-employed P00621827
	Firm's address 3400 Douglas Blvd Ste 210 Roseville, CA 95661	Phone no. 916-724-1665	

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

TO ELEVATE KNOWLEDGE AND INSPIRE CONSERVATIONS OF THE GLOBAL ENVIRONMENT THROUGH PROFESSIONAL CERTIFICATION

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **1,452,915** including grants of \$) (Revenue \$)
See Schedule O

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)
N/A

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)
N/A

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

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses **1,452,915**

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)? <i>If "Yes," complete Schedule A</i>		X
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		
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? <i>If "Yes," complete Schedule C, Part III</i>		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		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? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
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? <i>If "Yes," complete Schedule D, Part VII</i>		X
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? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
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? <i>If "Yes," complete Schedule G, Part I. See instructions</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

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 Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV		X
c	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 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		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		X

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	13		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	13a			
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	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15			X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			X
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17			

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

Section 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
1b	Enter the number of voting members included on line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?		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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?		X
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official		X
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17	List the states with which a copy of this Form 990 is required to be filed CA
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. <input type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request <input checked="" type="checkbox"/> Other (explain on Schedule O)
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20	State the name, address, and telephone number of the person who possesses the organization's books and records Melissa McKinney 3504 Fite Circle Sacramento CA 95827 279-888-6911

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, 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.
 - 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.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) ROBERT ANDERSON PRESIDENT	28.00 0.00			X				0	0	0
(2) MARK GOLDSMITH VICE PRESIDENT	1.00 0.00			X				0	0	0
(3) MIKE CHASE TREASURER	2.00 0.00			X				0	0	0
(4) JAMES O'TOUSA SECRETARY	1.00 0.00			X				0	0	0
(5) JOHN PETERSON PAST PRESIDENT	1.00 0.00	X						0	0	0
(6) JEREMIAH WALKER DIRECTOR	1.00 0.00	X						0	0	0
(7) FRANCISCO URUETA DIRECTOR	1.00 0.00	X						0	0	0
(8)										
(9)										
(10)										
(11)										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/ 1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
1b Subtotal										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **0**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f					
	g Noncash contributions included in lines 1a-1f	1g \$					
	h Total. Add lines 1a-1f						
Program Service Revenue			Business Code				
	2a Certifications		611430	1,497,249	1,497,249		
	b						
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f			1,497,249				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)						
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents		(i) Real				
		6a	(ii) Personal				
		b Less: rental expenses	6b				
	c Rental inc. or (loss)	6c					
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory		(i) Securities				
		7a	(ii) Other				
		b Less: cost or other basis and sales exps.	7b				
	c Gain or (loss)	7c					
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18						
8a							
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19							
	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances							
	10a		15,900				
b Less: cost of goods sold	10b		1,322				
c Net income or (loss) from sales of inventory			14,578			14,578	
Miscellaneous Revenue			Business Code				
	11a 3rd Party Credit Card Fee		900099	76,424	76,424		
	b						
	c						
	d All other revenue						
e Total. Add lines 11a-11d			76,424				
12 Total revenue. See instructions			1,588,251	1,573,673	0	14,578	

Part IX Statement of Functional Expenses

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

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

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				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	828,295	745,465	82,830	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	2,820	2,538	282	
9 Other employee benefits	72,660	65,394	7,266	
10 Payroll taxes	61,231	55,107	6,124	
11 Fees for services (nonemployees):				
a Management				
b Legal	33,558	30,202	3,356	
c Accounting	1,900	1,710	190	
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, column (A) amount, list line 11g expenses on Schedule O.)	224,307	201,876	22,431	
12 Advertising and promotion	4,786	4,307	479	
13 Office expenses	62,479	56,231	6,248	
14 Information technology	91,870	82,683	9,187	
15 Royalties				
16 Occupancy	70,164	63,147	7,017	
17 Travel	65,198	58,679	6,519	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	53,262	47,936	5,326	
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	13,233	12,656	577	
23 Insurance	6,668	6,001	667	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Annual Service Awards	9,952	8,957	995	
b Exhibitor Fees	5,025	4,522	503	
c Bank Service Charge	2,255	2,029	226	
d Deposits	1,772	1,595	177	
e All other expenses	2,088	1,880	208	
25 Total functional expenses. Add lines 1 through 24e	1,613,523	1,452,915	160,608	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing	609,555	1	500,020
	2	Savings and temporary cash investments	266,849	2	265,472
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	2,160	8	2,160
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	319,872		
	10b	Less: accumulated depreciation	304,235	10c	15,637
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets	70,000	14	137,501
	15	Other assets. See Part IV, line 11	1,700	15	1,945
16	Total assets. Add lines 1 through 15 (must equal line 33)	967,124	16	922,735	
Liabilities	17	Accounts payable and accrued expenses	6,898	17	6,372
	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	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	493,490	24	474,899
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	500,388	26	481,271
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input type="checkbox"/>				
	and complete lines 27, 28, 32, and 33.				
	27	Net assets without donor restrictions		27	
	28	Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input checked="" type="checkbox"/>				
	and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds		29	
30	Paid-in or capital surplus, or land, building, or equipment fund		30		
31	Retained earnings, endowment, accumulated income, or other funds	466,736	31	441,464	
32	Total net assets or fund balances	466,736	32	441,464	
33	Total liabilities and net assets/fund balances	967,124	33	922,735	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	1,588,251
2	Total expenses (must equal Part IX, column (A), line 25)	2	1,613,523
3	Revenue less expenses. Subtract line 2 from line 1	3	-25,272
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	466,736
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	441,464

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		
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		

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization

ENVIROCERT INTERNATIONAL, INC.

Employer identification number

26-1439262

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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... Yes No, 6 Did the organization inform all grantees... Yes No.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements, 2 Complete lines 2a through 2d, 3 Number of conservation easements modified, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy..., 6 Staff and volunteer hours..., 7 Amount of expenses..., 8 Does each conservation easement..., 9 In Part XIII, describe how the organization reports...

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Revenue included on Form 990, Part VIII, line 1; Assets included in Form 990, Part X. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report..., 1b If the organization elected, as permitted under FASB ASC 958, to report..., 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain...

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange program
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment%
- b** Permanent endowment%
- c** Term endowment%

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** Unrelated organizations
- (ii)** Related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		17,622	6,168	11,454
c Leasehold improvements				
d Equipment		79,575	75,874	3,701
e Other		222,675	222,193	482
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				15,637

Part VII Investments – Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments – Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

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

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and a final total column.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Columns include line numbers and a final total column.

Part XIII Supplemental Information.

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

Series of horizontal dotted lines for providing supplemental information.

**SCHEDULE O
(Form 990)**Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022**Open to Public
Inspection**

Name of the organization

ENVIROCERT INTERNATIONAL, INC.

Employer identification number

26-1439262**Form 990, Part III, Line 4a - First Accomplishment**

EnviroCert International, Inc. (ECI) is an international, accreditation compliant, certification body recognized throughout the United States and over twenty (20) countries with over 40,000 certifications awarded over forty (40) years and is the national leader in the stormwater certification industry. ECI offers internationally recognized professional certifications, which can be earned by demonstrating qualifications based on a combination of education and experience and passing an exam. These certifications cover the regulations, design, and inspection for the construction, municipal, stormwater, modeling and hydrology, and multisector/industrial fields. EnviroCert standards assure the stormwater community and regulatory agencies that our certificants have the appropriate credentials for stormwater professionals. ECI provides guidelines for the practice of Stormwater Quality (CPSWQ), Erosion and Sediment Control (CPESC), Municipal Stormwater Management (CPMSM), Stormwater Inspections (CESSWI), Industrial Stormwater Management (CPISM), and Qualified Stormwater Management (QSM). The qualifications to earn certificates are based on a combination of education, experience, and passing an exam.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

Prior to filing, a copy of the return is distributed to the Board of Directors. An electronic vote to accept the return is taken prior to the return being signed and filed.

Name of the organization

ENVIROCERT INTERNATIONAL, INC.

Employer identification number

26-1439262

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

Annually, the officers review the conflict of interest policy and enforce if necessary.

Form 990, Part VI, Line 18 - No Public Disclosure Explanation

Documentation is given to the public by written organization to the Organization.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

No other documents available to the public.

Form 990, Part IX, Line 11g - Other Fees for Services

Description

	Tot/Prog Service	Mgt & General	Fundraising
Prometric LMS Fee	\$ 1,440	\$ 160	\$ 0
Prometric Service Fees	\$ 71,993	\$ 7,999	\$ 0
Paychex	\$ 7,363	\$ 818	\$ 0
Credit Card Fees	\$ 81,304	\$ 9,034	\$ 0
New Certification Developemen	\$ 18,397	\$ 2,044	\$ 0
Exam Related Expenses	\$ 2,250	\$ 250	\$ 0
NGICP Instructor Fees			

Name of the organization ENVIROCERT INTERNATIONAL, INC.	Employer identification number 26-1439262
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\$ 1,737	\$ 193	\$ 0
NGICP- Accreditation		
\$ 2,430	\$ 270	\$ 0
NGICP- ANSI Annual Audit		
\$ 6,187	\$ 688	\$ 0
NGICP-ANSI Exam Proctoring Au		
\$ 1,125	\$ 125	\$ 0
NGICP-ANSI Revenue Payment		
\$ 2,700	\$ 300	\$ 0
NGICP-Psychometrician		
\$ 4,950	\$ 550	\$ 0
Total		
\$ 201,876	\$ 22,431	\$ 0

Form **4562**

Department of the Treasury
Internal Revenue Service

Name(s) shown on return

Depreciation and Amortization
(Including Information on Listed Property)

Attach to your tax return.

Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

2022

Attachment Sequence No. **179**

ENVIROCERT INTERNATIONAL, INC.

Identifying number
26-1439262

Business or activity to which this form relates

Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,080,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,700,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2021 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2023. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	5,733

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2022	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B—Assets Placed in Service During 2022 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2022 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	5,733
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Part V Listed Property (Include automobiles, certain other vehicles, certain aircraft, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? 24b If "Yes," is the evidence written? 25 Special depreciation allowance for qualified listed property placed in service during the tax year and used more than 50% in a qualified business use. See instructions 26 Property used more than 50% in a qualified business use: 27 Property used 50% or less in a qualified business use: 28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1 29 Add amounts in column (i), line 26. Enter here and on line 7, page 1

Section B—Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (don't include commuting miles) 31 Total commuting miles driven during the year 32 Total other personal (noncommuting) miles driven 33 Total miles driven during the year. Add lines 30 through 32 34 Was the vehicle available for personal use during off-duty hours? 35 Was the vehicle used primarily by a more than 5% owner or related person? 36 Is another vehicle available for personal use?

Section C—Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who aren't more than 5% owners or related persons. See instructions.

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees? 38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners 39 Do you treat all use of vehicles by employees as personal use? 40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received? 41 Do you meet the requirements concerning qualified automobile demonstration use? See instructions

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," don't complete Section B for the covered vehicles.

Part VI Amortization

42 Amortization of costs that begins during your 2022 tax year (see instructions): Intangibles 07/01/22 75,000 197 15.0 2,500 43 Amortization of costs that began before your 2022 tax year 43 5,000 44 Total. Add amounts in column (f). See the instructions for where to report 44 7,500

26-1439262

Federal Asset Report

FYE: 12/31/2022

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	PerConv Meth	Prior	Current
Other Depreciation:									
4	Building Improvements	7/31/16	17,622			17,622	15 MO S/L	4,993	1,175
5	Furniture and Fixtures	7/01/15	24,448			24,448	7 MO S/L	24,448	0
6	Furniture and Fixtures	7/01/15	1,046			1,046	7 MO S/L	1,021	25
7	Furniture and Fixtures	7/01/15	1,079			1,079	7 MO S/L	1,014	65
8	Furniture and Fixtures	7/01/15	1,077			1,077	7 MO S/L	1,000	77
9	Furniture and Fixtures	7/01/16	4,466			4,466	7 MO S/L	3,403	638
10	Furniture and Fixtures	7/01/16	526			526	7 MO S/L	394	75
11	Machinery and Equipment	7/01/15	58,865			58,865	5 MO S/L	58,865	0
12	Machinery and Equipment	7/01/15	521			521	7 MO S/L	459	62
13	Machinery and Equipment	7/01/15	610			610	7 MO S/L	552	58
14	Machinery and Equipment	7/01/15	610			610	7 MO S/L	552	58
15	Machinery and Equipment	7/01/15	939			939	7 MO S/L	805	134
16	Machinery and Equipment	7/01/15	2,143			2,143	7 MO S/L	1,607	306
17	Machinery and Equipment	7/01/16	2,077			2,077	7 MO S/L	1,583	297
18	HP Desktop	7/05/17	1,035			1,035	5 MO S/L	828	207
19	HP Desktop	7/05/17	1,281			1,281	5 MO S/L	1,025	256
20	Smartsorce Computer NY	2/04/18	853			853	5 MO S/L	668	171
21	Fry's Electronics	3/08/18	1,291			1,291	5 MO S/L	990	258
22	HP LaserJet Pro M477fnw	3/28/18	1,000			1,000	5 MO S/L	750	200
23	HP Omen Laptop - 15T	6/08/18	1,010			1,010	5 MO S/L	724	202
24	HP Envy Desktop - 7500xt	6/08/18	1,040			1,040	5 MO S/L	745	208
25	Apple Macbook	8/17/20	3,433			3,433	5 MO S/L	944	687
26	Equipmet *RJR Industires	1/29/20	2,867			2,867	5 MO S/L	1,099	574
27	Workbook	7/01/15	16,678		X	8,339	5 MO Amort	16,678	0
29	Software	7/01/16	173,355			173,355	5 MO S/L	173,355	0
Total Other Depreciation			<u>319,872</u>			<u>311,533</u>		<u>298,502</u>	<u>5,733</u>
Total ACRS and Other Depreciation			<u>319,872</u>			<u>311,533</u>		<u>298,502</u>	<u>5,733</u>
Amortization:									
30	Intangibles	7/01/22	75,000			75,000	15 MO Amort	0	2,500
28	Program	1/21/21	75,000			75,000	15 MO Amort	5,000	5,000
			<u>150,000</u>			<u>150,000</u>		<u>5,000</u>	<u>7,500</u>
Grand Totals			469,872			461,533		303,502	13,233
Less: Dispositions and Transfers			0			0		0	0
Less: Start-up/Org Expense			0			0		0	0
Net Grand Totals			<u>469,872</u>			<u>461,533</u>		<u>303,502</u>	<u>13,233</u>

26-1439262

CA Asset Report

FYE: 12/31/2022

Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	CA Prior	CA Current	Federal Current	Difference Fed - CA
Other Depreciation:								
4	Building Improvements	7/31/16	17,622	17,622	4,993	1,175	1,175	0
5	Furniture and Fixtures	7/01/15	24,448	24,448	24,448	0	0	0
6	Furniture and Fixtures	7/01/15	1,046	1,046	1,021	25	25	0
7	Furniture and Fixtures	7/01/15	1,079	1,079	1,014	65	65	0
8	Furniture and Fixtures	7/01/15	1,077	1,077	1,000	77	77	0
9	Furniture and Fixtures	7/01/16	4,466	4,466	3,403	638	638	0
10	Furniture and Fixtures	7/01/16	526	526	394	75	75	0
11	Machinery and Equipment	7/01/15	58,865	58,865	58,865	0	0	0
12	Machinery and Equipment	7/01/15	521	521	459	62	62	0
13	Machinery and Equipment	7/01/15	610	610	552	58	58	0
14	Machinery and Equipment	7/01/15	610	610	552	58	58	0
15	Machinery and Equipment	7/01/15	939	939	805	134	134	0
16	Machinery and Equipment	7/01/15	2,143	2,143	1,607	306	306	0
17	Machinery and Equipment	7/01/16	2,077	2,077	1,583	297	297	0
18	HP Desktop	7/05/17	1,035	1,035	828	207	207	0
19	HP Desktop	7/05/17	1,281	1,281	1,025	256	256	0
20	Smartsources Computer NY	2/04/18	853	853	668	171	171	0
21	Fry's Electronics	3/08/18	1,291	1,291	990	258	258	0
22	HP LaserJet Pro M477fnw	3/28/18	1,000	1,000	750	200	200	0
23	HP Omen Laptop - 15T	6/08/18	1,010	1,010	724	202	202	0
24	HP Envy Desktop - 7500xt	6/08/18	1,040	1,040	745	208	208	0
25	Apple Macbook	8/17/20	3,433	3,433	944	687	687	0
26	Equipmet *RJR Industires	1/29/20	2,867	2,867	1,099	574	574	0
27	Workbook	7/01/15	16,678	16,678	16,678	0	0	0
29	Software	7/01/16	173,355	173,355	173,355	0	0	0
Total Other Depreciation			<u>319,872</u>	<u>319,872</u>	<u>298,502</u>	<u>5,733</u>	<u>5,733</u>	<u>0</u>
Total ACRS and Other Depreciation			<u>319,872</u>	<u>319,872</u>	<u>298,502</u>	<u>5,733</u>	<u>5,733</u>	<u>0</u>
Amortization:								
30	Intangibles	7/01/22	75,000	75,000	0	2,500	2,500	0
28	Program	1/21/21	75,000	75,000	5,000	5,000	5,000	0
			<u>150,000</u>	<u>150,000</u>	<u>5,000</u>	<u>7,500</u>	<u>7,500</u>	<u>0</u>
Grand Totals			<u>469,872</u>	<u>469,872</u>	<u>303,502</u>	<u>13,233</u>	<u>13,233</u>	<u>0</u>
Less: Dispositions			<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Less: Start-up/Org Expense			<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Net Grand Totals			<u>469,872</u>	<u>469,872</u>	<u>303,502</u>	<u>13,233</u>	<u>13,233</u>	<u>0</u>

26-1439262

AMT Asset Report

FYE: 12/31/2022

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179B Bonus	Basis for Depr	Per Conv Meth	Prior	Current
Other Depreciation:									
4	Building Improvements	7/31/16	17,622			17,622	15 MO S/L	4,993	1,175
5	Furniture and Fixtures	7/01/15	24,448			24,448	7 MO S/L	24,448	0
6	Furniture and Fixtures	7/01/15	1,046			1,046	7 MO S/L	1,021	25
7	Furniture and Fixtures	7/01/15	1,079			1,079	7 MO S/L	1,014	65
8	Furniture and Fixtures	7/01/15	1,077			1,077	7 MO S/L	1,000	77
9	Furniture and Fixtures	7/01/16	4,466			4,466	7 MO S/L	3,403	638
10	Furniture and Fixtures	7/01/16	526			526	7 MO S/L	394	75
11	Machinery and Equipment	7/01/15	58,865			58,865	5 MO S/L	58,865	0
12	Machinery and Equipment	7/01/15	521			521	7 MO S/L	459	62
13	Machinery and Equipment	7/01/15	610			610	7 MO S/L	552	58
14	Machinery and Equipment	7/01/15	610			610	7 MO S/L	552	58
15	Machinery and Equipment	7/01/15	939			939	7 MO S/L	805	134
16	Machinery and Equipment	7/01/15	2,143			2,143	7 MO S/L	1,607	306
17	Machinery and Equipment	7/01/16	2,077			2,077	7 MO S/L	1,583	297
18	HP Desktop	7/05/17	1,035			1,035	5 MO S/L	828	207
19	HP Desktop	7/05/17	1,281			1,281	5 MO S/L	1,025	256
20	Smartsorce Computer NY	2/04/18	853			853	5 MO S/L	668	171
21	Fry's Electronics	3/08/18	1,291			1,291	5 MO S/L	990	258
22	HP LaserJet Pro M477fnw	3/28/18	1,000			1,000	5 MO S/L	750	200
23	HP Omen Laptop - 15T	6/08/18	1,010			1,010	5 MO S/L	724	202
24	HP Envy Desktop - 7500xt	6/08/18	1,040			1,040	5 MO S/L	745	208
25	Apple Macbook	8/17/20	3,433			3,433	5 MO S/L	944	687
26	Equipmet *RJR Industires	1/29/20	2,867			2,867	5 MO S/L	1,099	574
29	Software	7/01/16	173,355			173,355	5 MO S/L	173,355	0
Total Other Depreciation			<u>303,194</u>			<u>303,194</u>		<u>281,824</u>	<u>5,733</u>
Total ACRS and Other Depreciation			<u>303,194</u>			<u>303,194</u>		<u>281,824</u>	<u>5,733</u>
Grand Totals			303,194			303,194		281,824	5,733
Less: Dispositions and Transfers			<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
Net Grand Totals			<u>303,194</u>			<u>303,194</u>		<u>281,824</u>	<u>5,733</u>

26-1439262

Bonus Depreciation Report

FYE: 12/31/2022

Form 990, Page 1

Asset	Property Description	Date In Service	Tax Cost	Bus Pct	Tax Sec 179 Exp	Current Bonus	Prior Bonus	Tax - Basis for Depr
4	Building Improvements	7/31/16	17,622		0	0	0	17,622
27	Workbook	7/01/15	16,678		0	0	8,339	8,339
Grand Total			<u>34,300</u>		<u>0</u>	<u>0</u>	<u>8,339</u>	<u>25,961</u>

Depreciation Adjustment Report

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
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There are no assets that meet the criteria of this report

Asset	Description	Date In Service	Cost	Tax	AMT
Other Depreciation:					
4	Building Improvements	7/31/16	17,622	1,175	1,175
5	Furniture and Fixtures	7/01/15	24,448	0	0
6	Furniture and Fixtures	7/01/15	1,046	0	0
7	Furniture and Fixtures	7/01/15	1,079	0	0
8	Furniture and Fixtures	7/01/15	1,077	0	0
9	Furniture and Fixtures	7/01/16	4,466	425	425
10	Furniture and Fixtures	7/01/16	526	57	57
11	Machinery and Equipment	7/01/15	58,865	0	0
12	Machinery and Equipment	7/01/15	521	0	0
13	Machinery and Equipment	7/01/15	610	0	0
14	Machinery and Equipment	7/01/15	610	0	0
15	Machinery and Equipment	7/01/15	939	0	0
16	Machinery and Equipment	7/01/15	2,143	230	230
17	Machinery and Equipment	7/01/16	2,077	197	197
18	HP Desktop	7/05/17	1,035	0	0
19	HP Desktop	7/05/17	1,281	0	0
20	Smartsource Computer NY	2/04/18	853	14	14
21	Fry's Electronics	3/08/18	1,291	43	43
22	HP LaserJet Pro M477fnw	3/28/18	1,000	50	50
23	HP Omen Laptop - 15T	6/08/18	1,010	84	84
24	HP Envy Desktop - 7500xt	6/08/18	1,040	87	87
25	Apple Macbook	8/17/20	3,433	686	686
26	Equipmet *RJR Industires	1/29/20	2,867	573	573
27	Workbook	7/01/15	16,678	0	0
29	Software	7/01/16	173,355	0	0
Total Other Depreciation			<u>319,872</u>	<u>3,621</u>	<u>3,621</u>
Total ACRS and Other Depreciation			<u>319,872</u>	<u>3,621</u>	<u>3,621</u>
Amortization:					
30	Intangibles	7/01/22	75,000	5,000	5,000
28	Program	1/21/21	75,000	5,000	0
			<u>150,000</u>	<u>10,000</u>	<u>5,000</u>
Grand Totals			<u>469,872</u>	<u>13,621</u>	<u>8,621</u>

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>CA</u>
<u>Other Depreciation:</u>				
4	Building Improvements	7/31/16	17,622	1,175
5	Furniture and Fixtures	7/01/15	24,448	0
6	Furniture and Fixtures	7/01/15	1,046	0
7	Furniture and Fixtures	7/01/15	1,079	0
8	Furniture and Fixtures	7/01/15	1,077	0
9	Furniture and Fixtures	7/01/16	4,466	425
10	Furniture and Fixtures	7/01/16	526	57
11	Machinery and Equipment	7/01/15	58,865	0
12	Machinery and Equipment	7/01/15	521	0
13	Machinery and Equipment	7/01/15	610	0
14	Machinery and Equipment	7/01/15	610	0
15	Machinery and Equipment	7/01/15	939	0
16	Machinery and Equipment	7/01/15	2,143	230
17	Machinery and Equipment	7/01/16	2,077	197
18	HP Desktop	7/05/17	1,035	0
19	HP Desktop	7/05/17	1,281	0
20	Smartsource Computer NY	2/04/18	853	14
21	Fry's Electronics	3/08/18	1,291	43
22	HP LaserJet Pro M477fnw	3/28/18	1,000	50
23	HP Omen Laptop - 15T	6/08/18	1,010	84
24	HP Envy Desktop - 7500xt	6/08/18	1,040	87
25	Apple Macbook	8/17/20	3,433	686
26	Equipmet *RJR Industires	1/29/20	2,867	573
27	Workbook	7/01/15	16,678	0
29	Software	7/01/16	173,355	0
	Total Other Depreciation		<u>319,872</u>	<u>3,621</u>
	Total ACRS and Other Depreciation		<u>319,872</u>	<u>3,621</u>
<u>Amortization:</u>				
30	Intangibles	7/01/22	75,000	5,000
28	Program	1/21/21	75,000	5,000
			<u>150,000</u>	<u>10,000</u>
	Grand Totals		<u>469,872</u>	<u>13,621</u>

Form 990	Two Year Comparison Report	2021 & 2022
For calendar year 2022, or tax year beginning		, ending

Name

Taxpayer Identification Number

ENVIROCERT INTERNATIONAL, INC.**26-1439262**

			2021	2022	Differences
Revenue	1. Contributions, gifts, grants	1.			
	2. Membership dues and assessments	2.			
	3. Government contributions and grants	3.			
	4. Program service revenue	4.	1,376,755	1,497,249	120,494
	5. Investment income	5.	29		-29
	6. Proceeds from tax exempt bonds	6.			
	7. Net gain or (loss) from sale of assets other than inventory	7.			
	8. Net income or (loss) from fundraising events	8.			
	9. Net income or (loss) from gaming	9.			
	10. Net gain or (loss) on sales of inventory	10.		14,578	14,578
	11. Other revenue	11.	63,000	76,424	13,424
	12. Total revenue. Add lines 1 through 11	12.	1,439,784	1,588,251	148,467
Expenses	13. Grants and similar amounts paid	13.			
	14. Benefits paid to or for members	14.			
	15. Compensation of officers, directors, trustees, etc.	15.			
	16. Salaries, other compensation, and employee benefits	16.	806,186	965,006	158,820
	17. Professional fundraising fees	17.			
	18. Other professional fees	18.		259,765	259,765
	19. Occupancy, rent, utilities, and maintenance	19.		70,164	70,164
	20. Depreciation and Depletion	20.		13,233	13,233
	21. Other expenses	21.	681,368	305,355	-376,013
	22. Total expenses. Add lines 13 through 21	22.	1,487,554	1,613,523	125,969
	23. Excess or (Deficit). Subtract line 22 from line 12	23.	-47,770	-25,272	22,498
Other Information	24. Total exempt revenue	24.		1,588,251	1,588,251
	25. Total unrelated revenue	25.			
	26. Total excludable revenue	26.		1,588,251	1,588,251
	27. Total assets	27.		922,735	922,735
	28. Total liabilities	28.	500,388	481,271	-19,117
	29. Retained earnings	29.	466,736	441,464	-25,272
	30. Number of voting members of governing body	30.		7	
	31. Number of independent voting members of governing body	31.		7	
32. Number of employees	32.		13		
33. Number of volunteers	33.		6		

Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
Prometric LMS Fee	\$ 1,600	\$ 1,440	\$ 160	\$
Prometric Service Fees	79,992	71,993	7,999	
Paychex	8,181	7,363	818	
Credit Card Fees	90,338	81,304	9,034	
New Certification Developemen	20,441	18,397	2,044	
Exam Related Expenses	2,500	2,250	250	
NGICP Instructor Fees	1,930	1,737	193	
NGICP- Accreditation	2,700	2,430	270	
NGICP- ANSI Annual Audit	6,875	6,187	688	
NGICP-ANSI Exam Proctoring Au	1,250	1,125	125	
NGICP-ANSI Revenue Payment	3,000	2,700	300	
NGICP-Psychometrician	5,500	4,950	550	
Total	\$ 224,307	\$ 201,876	\$ 22,431	\$ 0

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
Sponsorship fees	\$ 1,500	\$ 1,350	\$ 150	\$
Misc. Expense	544	490	54	
ECI Foundation Expenses	44	40	4	
Total	\$ 2,088	\$ 1,880	\$ 208	\$ 0