Form 990-EZ

Return of Organization Exempt From Income Tax

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

For organizations with gross receipts less than $100,000 and total assets less than $250,000 at the end of the year

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

For the 2001 calendar year, or tax year beginning 2001, and ending 2001.

A. Name of organization:
Arkansas Environmental Education Association

B. Employer identification number:
D. Address change:
C. Number and street (or P.O. box if mail is not delivered to street address):
PO Box 488
D. Phone number:
E. Telephone number:
(479) 638-7151
E. City or town state or country and ZIP + 4:
Hackett, AR 72937-0488
F. Enter 4-digit (GEN) or

G. Accounting method:

H. Check if the organization is not required to attach:

Schedule B (Form 990, 990-EZ, or 990-PF)

J. Check if the organization received a Form 990 Package in the mail, it should file a return without financial data.

Some states require a complete return.

L. Add lines 5b, 6b, and 7b to line 9 to determine gross receipts if $100,000 or more, file Form 990 instead of Form 990-EZ.

Part I. Revenue, Expenses, and Changes in Net Assets or Fund Balances

(See Specific Instructions on page 35)

<table>
<thead>
<tr>
<th>Revenue</th>
<th>Expenses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions, gifts, grants, and similar amounts received</td>
<td>370.00</td>
</tr>
<tr>
<td>Program service revenue including government fees and contracts</td>
<td>3,427.40</td>
</tr>
<tr>
<td>Membership dues and assessments</td>
<td>922.50</td>
</tr>
<tr>
<td>Investment income</td>
<td>4</td>
</tr>
<tr>
<td>Gross amount from sale of assets other than inventory</td>
<td>5a</td>
</tr>
<tr>
<td>Less cost or other basis and sales expenses</td>
<td>5b</td>
</tr>
<tr>
<td>Gain or (loss) from sale of assets other than inventory (line 5a less line 5b)</td>
<td>5c</td>
</tr>
<tr>
<td>Special events and activities (attach schedule)</td>
<td>6a</td>
</tr>
<tr>
<td>Gross revenue (not including $ of contributions reported on line 1)</td>
<td>6b</td>
</tr>
<tr>
<td>Less direct expenses other than fundraising expenses</td>
<td>6c</td>
</tr>
<tr>
<td>Net income or (loss) from special events and activities (line 6a less line 6b)</td>
<td>7a</td>
</tr>
<tr>
<td>Gross sales of inventory, less returns and allowances</td>
<td>7b</td>
</tr>
<tr>
<td>Less cost of goods sold</td>
<td>7c</td>
</tr>
<tr>
<td>Gross profit or (loss) from sales of inventory (line 7a less line 7b)</td>
<td>8</td>
</tr>
<tr>
<td>Other revenue (describe)</td>
<td>9</td>
</tr>
<tr>
<td>Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)</td>
<td>4,719.90</td>
</tr>
</tbody>
</table>

Part II. Balances

Total assets on line 25, column (B) are $250,000 or more, file Form 990 instead of Form 990-EZ

(A) Beginning of year | (B) End of year
| 2573.03 | 987.77 |

Cash, savings, and investments
Land and buildings
Other assets (describe)
Total assets
Total liabilities (describe)
Net assets or fund balances (line 27 of column (B) must agree with line 21)

For Paperwork Reduction Act Notice, see the separate instructions
Cat No 10642I Form 990-EZ (2001)
### Part III  Statement of Program Service Accomplishments

**What is the organization’s primary exempt purpose?**

Describe what was achieved in carrying out the organization’s exempt purposes in a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

#### 28 Workshops & Meetings

Two day programs (4) promoting different aspects of environmental education

| Grants $ | 28a | 340 78 |

#### 29 Produced and mailed four issues of the newsletter, the Natural State

| Grants $ | 29a | 2,400 00 |

#### 30 Exhibited at two conferences: 1. Arkansas Recycling Coalition 2. Arkansas Joint Teachers Conference

| Grants $ | 30a | 166 88 |

#### 31 Other program services (attach schedule)

| Grants $ Nat’l Member Dues | 31a | 2062 50 |

#### 32 Total program service expenses (add lines 28a through 31a)

| 32 | 4970 16 |

### Part IV  List of Officers, Directors, Trustees, and Key Employees

<table>
<thead>
<tr>
<th>(A) Name and address</th>
<th>(B) Title and average hours per week devoted to position</th>
<th>(C) Compensation (If not paid, enter -0- )</th>
<th>(D) Contributions to employee benefit plans &amp; deferred compensation</th>
<th>(E) Expense account and other allowances</th>
</tr>
</thead>
<tbody>
<tr>
<td>Robert McAfee, Hackett, AR</td>
<td>Executive Director</td>
<td>-0-</td>
<td>-0-</td>
<td>-0-</td>
</tr>
<tr>
<td>Frank Chandler, Bryant, AR</td>
<td>President</td>
<td>-0-</td>
<td>-0-</td>
<td>-0-</td>
</tr>
<tr>
<td>Debbie Blanchard, Eureka Springs, AR</td>
<td>Treasurer</td>
<td>-0-</td>
<td>-0-</td>
<td>-0-</td>
</tr>
</tbody>
</table>

### Part V  Other Information

#### 33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.

**Yes**

#### 34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a corrected copy of the changes.

**Yes**

#### 35 If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but NOT reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.

- a Did the organization have unrelated business gross income of $1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?
  - **Yes**

- b If "Yes," has it filed a tax return on Form 990-T for this year?
  - **Yes**

#### 36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? (If "Yes," attach a statement.)

**Yes**

#### 37a Enter amount of political expenditures, direct or indirect, as described in the instructions.

**37a**

#### 38a Did the organization file Form 1120-POL for this year?

**Yes**

#### 39 Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee OR were any such loans made in a prior year and still unpaid at the start of the period covered by this return?

**Yes**

#### 40a Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach an explanation.

- a Amount of tax imposed on organization managers or disqualified persons during the year under section 4911
  - **4911**

- b Gross receipts, included on line 9, for public use of club facilities
  - **49b**

- c Enter Amount of tax imposed on the organization during the year under section 4911, section 4912, section 4955
  - **4955**

- d Enter Amount of tax on line 40c, above reimbursed by the organization
  - **49b**

#### 41 List the states with which a copy of this return is filed.

**41**

#### 42 The books are in care of

Debbie Blanchard, Telephone no. (479) 253-2727

Located at 3190 E. Van Buren, Eureka Springs, AR, 72632

#### 43 Section 4943(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here

**43**

**Please Sign**

Robert McAfee

15 May 2001

Signature of officer