## Form 990-EZ

Department of the Treasury Internal Revenue Service

# Short Form 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)

➤ Sponsoring organizations of donor advised funds, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions).

All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 at the end of the year may use this form.

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

OMB No. 1545-1150

2010

Open to Public Inspection

A	A For the 2010 calendar year, or tax year beginning ,		, 2010, and ending		, 20		
В	Check if a	policable: C Name of organization		D Employ	er identification number		
	Address	change Association for the Study of Literature and Environment			54-1540944		
	Name cha		) Room/suite	E Telepho	E Telephone number		
	Initial retu	r.u. bux suz		1	603-357-7411		
H	Terminate	City or town state or country and ZP + 4		F Group Exemption			
H	Amended Application	n pending Keene, NH 03431-0502		Numbe	25 PM 4		
G		ting Method:   Cash	н	Check >	if the organization is not		
	Websi			attach Schedule B			
		npt status (check only one) — ✓ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no.) ☐ 45	947(a)(1) or 527	THE STATE	. 990-EZ, or 990-PF).		
5,1755.1	Check 1			COLUMN TO THE PARTY OF THE PART	and the second second of the second		
200		90-EZ or Form 990 return is not required though Form 990-N (e-postcard) may					
		return, be sure to file a complete return.					
Ē.	Add lines	55b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,00	0 or more, or if total asse	ts (Part II,			
		umn (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ			• <b>s</b> 53374		
100	art I	Revenue, Expenses, and Changes in Net Assets or Fund			ons for Part I.)		
		Check if the organization used Schedule O to respond to any o					
<del></del>	1	Contributions, gifts, grants, and similar amounts received			1 4464		
	2	Program service revenue including government fees and contracts			2 0		
	3	Membership dues and assessments			3 56141		
	4	Investment income			2569		
	5a	Gross amount from sale of assets other than inventory	5a		*		
	b	Less: cost or other basis and sales expenses		0	•		
	c	Gain or (loss) from sale of assets other than inventory (Subtract line	- 5	ic 0			
	6	Gaming and fundraising events	<u>*                                    </u>				
	а	Gross income from gaming (attach Schedule G if greater that	an		· ·		
9		\$15,000)	6a	e			
Revenue	ь	Gross income from fundraising events (not including \$	0 of contributio	ne			
8	1 ~	from fundraising events reported on line 1) (attach Schedule G if the	COLUMN CONTRACTOR CONT				
1	1	sum of such gross income and contributions exceeds \$15,000)	6b	n			
	C	Less: direct expenses from gaming and fundraising events	6c	<u> </u>			
	di	Net income or (loss) from garning and fundraising events (add line		btract			
		line 6c)		6	d 0		
	7a	Gross sales of inventory, less returns and allowances	7a	o			
	b	Less: cost of goods sold	7b	0	*		
	c	Gross profit or (loss) from sales of inventory (Subtract line 7b from lin		7	c   3		
	8	Other revenue (describe in Schedule O)					
	9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8					
	10	Grants and similar amounts paid (list in Schedule O)		. 1			
	11	Benefits paid to or for members		1	1 0		
ģ	12	Salaries, other compensation, and employee benefits		1			
nses	13	Professional fees and other payments to independent contractors .		7			
	14	Occupancy, rent, utilities, and maintenance			4 430		
EXD	15	Printing, publications, postage, and shipping	1	5 13299			
	16	Other expenses (describe in Schedule O)		1000 1010	6 5835		
	17	Total expenses. Add lines 10 through 16			TOTAL		
CC.	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		1			
ě	19	Net assets or fund balances at beginning of year (from line 27, co			**************************************		
988		end-of-year figure reported on prior year's return)			9 166284		
Net Assets	20	Other changes in net assets or fund balances (explain in Schedule O			<del></del>		
Ž	21	Net assets or fund balances at end of year. Combine lines 18 through		_	1 164950		

Pa	it II Balance Sheets. (see the instructions		98 G 9601 1887 989	5		
	Check if the organization used Schedule	e O to respond to any ques				
			(A) Be	ginning of year		(B) End of year
22	Cash, savings, and investments			166284		184950
23	Land and buildings				23	0
24	Other assets (describe in Schedule O)		• • •		24	0
25	Total assets			166284	-	164950
26	Total liabilities (describe in Schedule O)	. 34 52		0	26	0
27	Net assets or fund balances (line 27 of column			166284	27	194950
Par						Expenses
	Check if the organization used Schedule			- Inches		uired for section c)(3) and 501(c)(4)
Wha	t is the organization's primary exempt purpose?	Education, promoting under	standing of nature	in literature		nizations and section
the c	ribe what was achieved in carrying out the organization ervices provided, the number of persons benefited, and	n's exempt purposes. In a clear	and concise mani	ier, describe		(a)(1) trusts; optional
	The design of the second of th				for o	thers.)
28	ISLE Journal: Interdisciplinary Studies in Literature					
	scholarly articles, fiction, nonfiction, and poetry. 4	Issues per year, distributed to	1300 ASLE memb	ers and		
	approx. 300 libraries worldwide.		***************************************			
		t includes foreign grants, che		<u>. ▶ □</u>	28a	12228
29	Website & Blogs: members and general public can					
	as syliabi database, bibliographies on environment					
	graduate student handbook & mentoring program.			e students		
		t includes foreign grants, che			29a	11694
30	ASLE News: Association newsletter, electronic pub					
	available on the website as PDF. Published 4 times	per year, reaching about 1400	people per issue			
		t includes foreign grants, che	ck here	▶ 🗆	30a	3040
31	Other program services (describe in Schedule O)			* # (%)		
12121	(Grants \$ ) If this amoun	t includes foreign grants, che	ck here	<u>. ▶ □</u>	31a	
32	Total program service expenses (add lines 28a				32	26962
Par	List of Officers, Directors, Trustees, and Ke				nstruc	ctions for Part IV.)
5-	Check if the organization used Schedule				• •	<u>, L</u>
	(a) Name and address	(b) Title and average hours per week	<ul><li>(c) Compensation (If not paid,</li></ul>	(d) Contributio employee benefit	plans &	(e) Expense account and
		devoted to position	enter -0)	deferred comper	neation	other allowances
	McIntyre	The same a second			101211011	Outer allowances
	arker Street, Keene NH 03431	- Managing Director, 25 hrs	\$40000 WeNE			
		Managing Director, 25 hrs	36909		0	
-	e Ingram, Davidson College English Dept				0	0
*****	e Ingram, Davidson College English Dept 7056, Davidson, NC 28035	President, 7 hrs	36909			0
	e Ingram, Davidson College English Dept 7056, Davidson, NC 28035 Ia Heise, Stanford University English Dept	President, 7 hrs	0		0	0
_	e Ingram, Davidson College English Dept 7056, Davidson, NC 28035 Ila Heise, Stanford University English Dept Serra Mall Bldg 460, Stanford CA 94305-2087				0	0
Dan	e Ingram, Davidson College English Dept 7056, Davidson, NC 28035 Ila Heise, Stanford University English Dept Serra Mall Blog 460, Stanford CA 94305-2087 Philippon, University of Minnesota Twin Cities	- President, 7 hrs - Vice President, 4 hrs	0		0	0
Dan 207 1	e Ingram, Davidson College English Dept 7056, Davidson, NC 28035 Ila Heise, Stanford University English Dept Serra Mall Bldg 460, Stanford CA 94305-2087 Philippon, University of Minnesota Twin Cities Lind, 207 Church St. SE, Minneapolis MN 55455	President, 7 hrs	0		0	0
Dan 207 I Chia	e Ingram, Davidson College English Dept 7056, Davidson, NC 28035 Ila Heise. Stanford University English Dept Serra Mall Bldg 460, Stanford CA 94305-2087 Philippon, University of Minnesota Twin Cities Lind, 207 Church St. SE, Minneapolis MN 55455 -ju Cheng	President, 7 hrs  Vice President, 4 hrs  Immediate Past Pres., 2hrs	0		0	0 0
Dan 207 I Chia 19 R	e Ingram, Davidson College English Dept 7056, Davidson, NC 28035 Ila Heise, Stanford University English Dept Serra Mall Bldg 460, Stanford CA 94305-2087 Philippon, University of Minnesota Twin Cities Lind, 207 Church St. SE, Minneapolis MN 55455 -ju Cheng aritan Ave, Apt C7, Highland Park, NJ 08804	- President, 7 hrs - Vice President, 4 hrs	0		0	0 0
Dan 207 I Chia 19 R Greti	e Ingram, Davidson College English Dept 7056, Davidson, NC 28035 Ila Heise. Stanford University English Dept Serra Mall Bldg 460, Stanford CA 94305-2087 Philippon, University of Minnesota Twin Cities Lind, 207 Church St. SE, Minneapolis MN 55455 -ju Cheng aritan Ave, Apt C7, Highland Park, NJ 08804 a Gaard, University of Wisconsin River Falls	President, 7 hrs  Vice President, 4 hrs  Immediate Past Pres., 2hrs  Executive Council, .5 hrs	0		0 0	0 0
Dan 207 I Chia 19 R Greta 416 S	e Ingram, Davidson College English Dept 7056, Davidson, NC 28035 Ila Heise, Stanford University English Dept Serra Mall Bldg 460, Stanford CA 94305-2087 Philippon, University of Minnesota Twin Cities Lind, 207 Church St. SE, Minneapolis MN 55455 -ju Cheng aritan Ave, Apt C7, Highland Park, NJ 08904 a Gaard, University of Wisconsin River Falls 5. Third St., River Falls WI 54022	President, 7 hrs  Vice President, 4 hrs  Immediate Past Pres., 2hrs	0		0	0 0
Dan 207 I Chia 19 R Greta 416 S Tom	e Ingram, Davidson College English Dept 7056, Davidson, NC 28035 Ila Heise, Stanford University English Dept Serra Mall Bldg 460, Stanford CA 94305-2087 Philippon, University of Minnesota Twin Cities Lind, 207 Church St. SE, Minneapolis MN 55455 -ju Cheng aritan Ave, Apt C7, Highland Park, NJ 08904 a Gaard, University of Wisconsin River Falls 5. Third St., River Falls WI 54022 Hillard	President, 7 hrs  Vice President, 4 hrs  Immediate Past Pres., 2hrs  Executive Council, .5 hrs  Executive Council, .5 hrs	0		0 0 0 0	0 0 0
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Part	Other Information (Note the statement requirements in the instructions for Part V.)  Check if the organization used Schedule O to respond to any question in this Part V	92 30		n
20022000	enestri in organization assa contratto o to respent to any question in the cate v		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33		1
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34	æ	1
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but <b>not</b> reported on Form 990-T, explain in Schedule O why the organization did not report the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or was it a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements?	35a		1
	If "Yes," has it filed a tax return on Form 990-T for this year (see instructions)?	35b		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
	Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a 0	4	13	
b 38a	Did the organization file <b>Form 1120-POL</b> for this year?	37b		<b>√</b>
	any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a		1
ь 39	If "Yes," complete Schedule L, Part II and enter the total amount involved		100	
	Initiation fees and capital contributions included on line 9		71	
b	Gross receipts, included on line 9, for public use of club facilities			
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:		8	
	section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0			. 5
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been			
	reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on	400		
7	organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c			
	reimbursed by the organization ,			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed. ▶			
42a		303-35		
b	Located at ► 26 Barker Street, Keene, NH ZIP + 4 ► At any time during the calendar year, did the organization have an interest in or a signature or other authority	03431	-2404	
~	over a financial account in a foreign country (such as a bank account, securities account, or other financial	9	Yes	No
	account)?	42b		1
	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank		1	
120	and Financial Accounts.			,
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		✓
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		. 1	▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year			
			Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		1
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		J
С	Did the organization receive any payments for indoor tanning services during the year?	44c		1
	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			
to the second	explanation in Schedule O	44d		
		2.00		

Form 99	0-EZ (2	2010)			- Warren and		F	age 4		
				46	,		Yes	No		
45		y related organization a controlled e				45		1		
а	mea	he organization receive any paymening of section 512(b)(13)? If "Yes,"	' Form 990 and Schedule R may	on with a controlle y need to be con	d entity within the npleted instead of	ALL THE LANGE OF T				
	Form 990-EZ (see instructions)									
46	to c	he organization engage, directly or it andidates for public office? If "Yes,"	a recommunity and the first of the community of the community and the community of the comm	ctivities on behalf	The second of the property of the second	46		1		
Part \	<b>/</b>	Section 501(c)(3) organizations 501(c)(3) organizations and secti and 52, and complete the tables Check if the organization used Sc	ion 4947(a)(1) nonexempt cha s for lines 50 and 51.	ritable trusts mu	ist answer question	ll sec ons 4	tion 7–491	b n		
		<u>×</u>				N. 196	Yes	No		
47		he organization engage in lobbying a				47		1		
48	Is the	e organization a school as described i	n section 170(b)(1)(A)(ii)? If "Yes,"	complete Schedul	eE	48		<b>√</b>		
49a	b If "Yes," was the related organization a section 527 organization?									
50						49b	Jan San	1.1.		
30	empl	piece this table for the organization s rivees) who each received more than	3 five nignest compensated emple n \$100 000 of compensation from	oyees (other than	officers, directors,	truste ter "N	es an	d Key		
			(b) Title and average	(c) Compensation	(d) Contributions to	(e)	Expen			
	(a) Na	ame and address of each employee paid more than \$100,000	hours per week devoted to position		employee benefit plans & deferred compensation	ac	count a	and		
None						June	Chone	11000		
	rdideliel (2000)			!ē						
							-			
		the second section of the second seco		-			- (-			
			**************************************							
<u> 1400-200-2000</u>			<del></del>			ii Parte				
*******					18					
		***** **** **** **** ****								
		2	25000000000000000000000000000000000000		1					
51	Com	number of other employees paid ov plete this table for the organization, ,000 of compensation from the orga	's five highest compensated ind	ependent contrac	_ tors who each rec	eived	more	than		
		(a) Name and address of each independent co			ype of service	(c) Cor	npensa	ation		
None					-					
	×		3	5 8 D DWG-1990-			-			
~ .		+			4					
					Marine 12 1200 110 110 110 110 110 110 110 110			-		
				150000000						
		number of other independent contra								
		ne organization complete Schedule A xempt charitable trusts must attach :		anizations and 494		1		ore:		
						Yes		VO.		
true, com	ect, an	of perjury, I declare that I have examined this a d complete. Declaration of preparer (other than	officer) is based on all information of which	and statements, and to ch preparer has any kn	owledge.	ge and	bener,	II IS		
		10 1 72	70.		2.5					
Sign	32	Mode d.	Olive		C(0-21	-,2	101	1		
Here	is	Signature of officer	2 15	-	Date					
		Ursula K. Heise, President			ements or other to transport and the					
		Type or print name and title	Prenarer's signature	Inat		DTINI				
Paid		Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN				
Prepa	Account 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	Firm's name ▶			Firm's EIN ▶					
Use C	nıy	Firm's address >	2000 - 10	Cara No di managr	Phone no.	-				
May the	e IRS	discuss this return with the preparer	shown above? See instructions		<b>&gt;</b> [	Yes	1	do		

Form **990-EZ** (2010)

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

Department of the Treasury Internal Revenue Service

Name of the organization

or section 509(a)(2).

following persons?

For Paperwork Reduction Act Notice, see the Instructions for

Form 990 or 990-EZ.

**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. ▶ See separate instructions.

OMB No. 1545-0047
2010
Open to Public

Inspection

Schedule A (Form 990 or 990-EZ) 2010

Employer identification number

Association for the Study of Literature and Environment 54-1640944 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 11, check only one box.) ☐ A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) ☐ 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, city, and state: 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). 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 organization that normally receives: (1) more than 331/3% 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 331/s% 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 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

e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1)

If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting

c Type III-Functionally integrated

Cat. No. 11285F

509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.

An organization organized and operated exclusively to test for public safety. See section 509(a)(4).

b ☐ Type II

										11g(i)	Yes	No
	(iii) below, the governing body of the supported organization?		11g(ii) 11g(ii)		22 (1) 5 (							
		(ii) EIN .	(described on lines 1-9 above or IRC section	in col. (i) ti	sted in your	the organ col. (i)	nization in of your	organizat (i) organi	s the ion in col. zed in the 5.?	(vii) Amo		6
			1 2 ,65	Yes	No	Yes	No	Yes	No		ČC.	
(A)	0.00	9 (4 5/5	8 8 4 8		241		2.0.1			¥ w		enerone.
(B)	3		* *		-							å
(C)	,	*	9 II					•		1		
(D)		=	it		2 N 2			-			(t	
(E)	-		7 9 3	-						a a e se		
Total			3			5 (0.03)			×	e 6	0	

Schear	ile A (Form 990 or 990-EZ) 2010						Pag	ge 🚣
Part								_
	(Complete only if you checked the						alify under	
G1	Part III. If the organization fails to	quality und	er the tests lis	sted below, p	lease comple	te Part III.)		
	on A. Public Support	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total	
Caler 1	dar year (or fiscal year beginning in)  Gifts, grants, contributions, and	(a) 2000	(10) 2007	(C) 2006	(0) 2009	(e) 2010	(i) iotai	
	membership fees received, (Do not							
	include any "unusual grants.")				~			
2	Tax revenues levied for the	7,30	1					
	organization's benefit and either paid				5 10			
	to or expended on its behalf				Erny America			
3	The value of services or facilities			2.	y	***	7	
	furnished by a governmental unit to the organization without charge			1		_	1001	
4	Total. Add lines 1 through 3						-	
200	1020001 Pro 24 MI SHC 03 04 050 20				0	2		
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)	mar tratamina a cal					5	
6 Sacti	Public support. Subtract line 5 from line 4. on B. Total Support	· · · · · · · · · · · · · · · · · · ·	1	L				
	dar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total	***
7	Amounts from line 4		17,		(4)	(4) 2515		
8							,	<del></del>
	payments received on securities loans,							
	rents, royalties and income from similar							2
-	sources							
9	Net income from unrelated business activities, whether or not the business				2		8	
	is regularly carried on							
10	Other income. Do not include gain or							—
7-3-7	loss from the sale of capital assets						ž.	
	(Explain in Part IV.)						e e	
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activities, etc.					12		
13	First five years. If the Form 990 is for the organization, check this box and stop her							_
Secti	on C. Computation of Public Support	The second second			<u> </u>			1_1
14	Public support percentage for 2010 (line 6			1. column (fi)		14		%
15	Public support percentage from 2009 Sch							%
16a	331/3% support test-2010. If the organiz	ation did not	check the box	on line 13, and	fline 14 is 331	3% or more, c	heck this	
2000	box and stop here. The organization qual							
b	331/3% support test—2009. If the organicheck this box and stop here. The organic					15 is 331/3%		
17a	10%-facts-and-circumstances test-20		and the same of th	· · · · · · · · · · · · · · · · · · ·		a, or 16b. and		- Second
	10% or more, and if the organization mee	ts the "facts-	and-circumsta	nces" test, che	eck this box an	d stop here. E	xplain in	
	Part IV how the organization meets the "fa					as a publicly s		. 2. 3
	organization					* * * * *		
b	10%-facts-and-circumstances test—20					the state of the s		
	15 is 10% or more, and if the organization me							
3	supported organization				Anna de la companya del companya de la companya del companya de la	a say an income and a second	- Attended to the state of the	
18	Private foundation. If the organization did							· term
	the Grand State of the Control of th							

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 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.)

Secti	on A. Public Support	ander the tee	no noted bele	w, picaso coi	inpocto i dici	1:7	
Calen	dar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	32980	50516	61477	83171	60605	288749
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	120	58302	o	113912	0	172334
3	Gross receipts from activities that are not an unrelated trade or business under section 513	1425	950	575	950	200	4100
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	O	ð	0	0	O
5	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	o	0	0
6	Total. Add lines 1 through 5	34525	109768	62052	198033	60805	465183
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .	500	5050	5000	4720	1217	16487
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	0	0	О	0	0	0
C	Add lines 7a and 7b	500	5050	5000	4720	1217	16487
8	Public support (Subtract line 7c from line 6.)	3 22 31102 223					448696
Secti	on B. Total Support		92.00.000				
	dar year (or fiscal year beginning in) 🕨	(a) 2006	<b>(b)</b> 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6	34525	109768	62052	198033	60805	465183
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .	1213	1684	1160	1705	2569	8331
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	o	o	. 0	o	o	0
C	Add lines 10a and 10b	1213	1684	1160	1705	2569	8331
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	o	o	0	0	0
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	o	0	o	0
13	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)	35738	111452	63212	199738	63374	473514
14	First five years. If the Form 990 is for the organization, check this box and stop here					ar as a section	
Secti	on C. Computation of Public Support			WHE - DOILE TO THE STATE OF THE	***	2 30 55 5	
15	Public support percentage for 2010 (line 8,	column (f) div	ided by line 13	3, column (f))	9 74 A 74 S45	15	94.76 %
16	Public support percentage from 2009 Sche	edule A, Part II	I, line 15 .			16	96.32 %
Secti	on D. Computation of Investment Inc	ome Percen	tage				
17	Investment income percentage for 2010 (lie					17	2 %
18	Investment income percentage from 2009					18	1 %
19a	331/3% support tests—2010. If the organiz						
b	17 is not more than 33½%, check this box a 33½% support tests—2009. If the organization 18 is not more than 33½% shock this by	ition did not ch	eck a box on li	ne 14 or line 19	a, and line 16	is more than 33	1/3%, and
20	line 18 is not more than 331/x3%, check this be					: A,	

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

### 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 990-EZ.

Open to Public Inspection

OMB No. 1545-0047

2010

Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number Association for the Study of Literature and Environment 54-1640944 Part I, Line 8, Other Revenue: \$200 in mailing list rental fees Part I, Line 10, Grants & Similar Amounts Paid Seed Grant for Association for the Study of Literature, Environment & Culture in Canada (ALECC) conference \$2500.00 Donation to Rice University memorial fund "Walter W. Isle Lectureship in Environmental Literature" \$500.00 Total Line 10: \$3000.00 Part I, Line 16, Other expenses: Website and Computer fees and software licenses \$311.64 Office Supplies \$516.74 **Travel and Professional Meetings** \$3208.21 Bank and Credit Card fees \$1798.79 Total Line 16: \$5835.38