Form	99	0
------	----	---

Department of the Treasury

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public.
Co to www.irs.gov/Eorm990 for instructions and the latest information

Open to Public Inspection

OMB No. 1545-0047

	nai Revei			www.irs.gov/Form990 for instruction					-	
Α	For the	e 2021 calen	dar year, or tax year	beginning	, <b>202</b> 1, :	and ending		,	20	
В	Check if	applicable:	C				D Employ	er identi	fication number	
		dress change		LTURE INTERNATIONAL			22_	0773	E 2 4	
		-							-	
	Nar	me change	1400 MAIDEN I				E Telepho	ne numb	ber	
	Initi	ial return	DEL MAR, CA 9	2014			858	-259-	-0374	
	Final	l return/terminated								
							0		÷ ¬¬	F 0 0
	Am	ended return					G Gross r			
	App	olication pending	F Name and address of p	rincipal officer: MATT CLARK		н	(a) Is this a group retur	n for sub	ordinates? Yes	X <sub>No</sub>
			SAME AS C ABC	VE		н	(b) Are all subordinates	included	Yes	No
T	Tay-e	xempt status:			947(a)(1) or	527	If "No," attach a list	See ins	tructions.	
÷					547(a)(1) 01					
J	vveb	osite: ► WW	W.NATUREANDCU	LTURE.ORG			(c) Group exemption nu			
Κ	Form	of organization:	X Corporation Trus	Association Other ►	LY	ear of formation	n: 1997 Mas	tate of le	egal domicile: CA	
Pa	art I	Summar	v							
				mission or most significant activ	vities:NAT	IIRE AND	CULTURE IN	TERN	ATTONAL.	
	-			Y DIVERSE LANDSCAPES						<u>ד אי</u>
Activities & Governance	-					LIN AMER	(ICR, IN COP)	ICER1	<u>MITH TOC</u>	<u>, AT</u>
an	-	CULTURES	, FOR THE WEL	L-BEING OF THE PLANE	<u>T</u>					
Ē										
ž	2 (	Check this bo	ox ► if the organ	ization discontinued its operation	ns or dispo	osed of more	e than 25% of its	net ass	sets.	
ğ	3 [	Number of vo	ting members of the	governing body (Part VI, line 1a	ı <b>)</b>			3		10
ిర	4	Number of in	dependent voting me	mbers of the governing body (Pa	art VI, line	1b)		4		10
es	5 -			yed in calendar year 2021 (Part				5		11
Viti	6			ate if necessary)				6		22
÷	7.0			from Part VIII, column (C), line 1				7a		
A										0.
	b	Net unrelated	i business taxable inc	ome from Form 990-T, Part I, li	ne II		1	7b		0.
							Prior Year		Current Y	ear
	8 (	Contributions	and grants (Part VIII	, line 1h)			5,935,1	48.	7,083	,054.
Ine	<b>9</b> F	Program serv	vice revenue (Part VII	I, line 2g)			121,7			,236.
/er				mn (A), lines 3, 4, and 7d)				89.		,915.
Revenue				A), lines 5, 6d, 8c, 9c, 10c, and						
							21,1			,216.
				gh 11 (must equal Part VIII, colu					7,280	
	13 (	Grants and si	imilar amounts paid (	Part IX, column (A), lines 1-3)			690,4	77.	942	,825.
	14 E	Benefits paid	to or for members (F	Part IX, column (A), line 4)						
	15 3	Salaries, othe	er compensation, emi	oloyee benefits (Part IX, column	(A), lines	5-10)	1,925,1	97	2,153	873
es	10 - 1						1,525,1	51.	2,100	,013.
SUS	16a 1	Professional	iunuraising lees (Par	t IX, column (A), line 11e)						
Expenses	b	Total fundrais	sing expenses (Part I	X, column (D), line 25) 🕨	33	5,126.				
ш	17 (	Other expens	es (Part IX, column (	A), lines 11a-11d, 11f-24e)			2,150,4	82	2,458	967
							· · · · ·			
				nust equal Part IX, column (A),			4,766,1		5,555	
		Revenue less	expenses. Subtract	line 18 from line 12			1,316,9	40.	1,724	,756.
2 8							Beginning of Curren	t Year	End of Ye	ar
anceta	20 -	Total assets	(Part X, line 16)				7,164,2		9,466	.383
Bal	21 -						1,416,8		1,994	
Net Assets or Fund Balances							· · ·			
Z 7	22			ract line 21 from line 20	<u></u>		5,747,4	05.	7,472	<u>,161.</u>
Pa	art II	Signatur	e Block							
Unde	er penalti	es of perjury, I de	clare that I have examined t	his return, including accompanying schedul sed on all information of which preparer has	les and statem	nents, and to the	e best of my knowledge	and belie	ef, it is true, correct	, and
com	plete. Deo	claration of prepa	rer (other than officer) is ba	sed on all information of which preparer has	s any knowled	ge.				
c:.		Signatu	re of officer				Date			
Sig	jn								_	
He	re		<u>r clark</u>				PRESIDENT 8	x CEC	)	
		Type or	print name and title							
		Print/Type p	reparer's name	Preparer's signature		Date	Check X	ζif	PTIN	
P-	id	JILL E	RANCH	JILL BRANCH		6/21/2			P00727664	
Pa						0/21/2			1 00 12 1004	
rr(	epare		00							
US	e Onl	<b>y</b> Firm's addre			ITE 200	)	Firm's EIN	<u>95</u> -	-2076568	
			SAN DIEGO	, CA 92108			Phone no.	619.	294.7200	
Mar	v the IF	RS discuss th		parer shown above? See instruct	tions				X Yes	No
	,									

BAA For Paperwork Reduction Act Notice, see the separate instructions.

Form	m 990 (2021) NATURE AND CULTURE INTERNATIONAL	33-0773524	Page <b>2</b>
Par	rt III Statement of Program Service Accomplishments		
-	Check if Schedule O contains a response or note to any line in this Part III		
1			א דאיידא
	NATURE AND CULTURE INTERNATIONAL CONSERVES BIOLOGICALLY DIVERSE AMERICA, IN CONCERT WITH LOCAL CULTURES, FOR THE WELL-BEING OF T		
	AMERICA, IN CONCLAI WITH BOCKE CONTORES, FOR THE WEEK DEING OF T		
2	Did the organization undertake any significant program services during the year which were not listed on the p		
	Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.	····· Y	es X No
3			es X No
5	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program ser	vices, as measured	by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocatic and revenue, if any, for each program service reported.	ns to others, the tota	al expenses,
4 a	a (Code: ) (Expenses \$ 2,843,761. including grants of \$ 643,143.) (	Revenue \$	11,560.)
	LATIN AMERICAN CONSERVATION PROGRAMS IN BOLIVIA, BRAZIL, COLOMBI	A, ECUADOR, M	MEXICO
	AND PERU:		
	NOT CONCERNING LANDS AND RECOVERENCE IN LAMENA AMERICA MURCHAN MUR		
	<u>NCI_CONSERVES_LANDS_AND_ECOSYSTEMS_IN_LATIN_AMERICA_THROUGH_THE</u> RESERVES_AND_PROGRAMS_TO_CONSERVE_RAINFORESTS_AND_OTHER_THREATEN		
	THIS IN A GRASS-ROOTS FASHION, HIRING LOCAL STAFF WHO WORK WITH		
	GOVERNMENTS AND COMMUNITIES TO CREATE CONSERVATION PROGRAMS AND		
	PROTECTED AREAS. WE ALSO BUILD LOCAL CAPACITY TO MANAGE AND SUST		
	AREAS WE HELP CREATE. WHILE EMPHASIZING THE CONSERVATION OF FORE		
	NCI'S PROGRAMS ALSO PROMOTE SUSTAINABLE COMMUNITY DEVELOPMENT.		
4 k	b (Code:) (Expenses \$ 1,793,520. including grants of \$ 283,508.) (		34,387.)
	MANAGEMENT PLANS, GOVERNANCE AND FINANCING MECHANISMS AND COMMUN	ITTY DEVELOPMI	ENT TO
	SUPPORT CONSERVATION:		
	NCI CREATES AND PROMOTES CONDITIONS AND TOOLS SUCH AS GOVERNANCE	STRUCTURES.	
	CONSERVATION FINANCING MECHANISMS, AND PROTECTED AREAS MANAGEMEN		SUPPORT
	LAND AND RESOURCE CONSERVATION. EXAMPLES INCLUDE OUR WORK TO CRE		
	PEOPLE IN AND AROUND PROTECTED AREAS BASED ON SUSTAINABLE USE OF	' RESOURCES, A	AND THE
	CREATION OF WATER FUNDS THAT CREATE ECOSYSTEM SERVICE PAYMENTS S		
	TO EFFECTIVE WATERSHED CONSERVATION PROGRAMS.		
40	c (Code:) (Expenses \$ 146,801. including grants of \$ 16,174.) (	Revenue \$	105,289.)
40	SCIENCE AND MONITORING:		103,209.)
	NCI CARRIES OUT SCIENTIFIC RESEARCH AND ECOSYSTEM MONITORING THA	T SUPPORT OU	R MTSSTON
	TO CONSERVE LANDS AND ECOSYSTEMS IN CONCERT WITH LOCAL PEOPLES.		
	SAN FRANCISCO SCIENTIFIC FIELD STATION IN ECUADOR, THAT SERVES I		
	ECUADORIAN UNIVERSITIES THAT CONDUCT BASIC AND APPLIED SCIENCE F	ESEARCH PROJ	ECTS IN
	TROPICAL MOUNTAIN ECOLOGY.		
4 c	d Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$		)
4 e BAA	e Total program service expenses ► 4,784,082. TEEA0102L 09/22/21	F	orm <b>990</b> (2021)
			· · · · · · · · · · · · · · · · · · ·

 Form 990 (2021)
 NATURE AND CULTURE INTERNATIONAL

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A.	1	X	NO
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3		3		Х
4		4		X
5		5		X
6		6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		х
8		8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V.	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI.	11 a	Х	
	<b>b</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>	11 b		Х
	c Did the organization report an amount for investments – program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		Х
	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? If 'Yes,' complete Schedule D, Part IX	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
	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)? If 'Yes,' complete Schedule D, Part X	11 f	Х	
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
	<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
	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? If 'Yes,' complete Schedule F, Parts I and IV.	14b	Х	
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? If 'Yes,' complete Schedule F, Parts II and IV.	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (Å), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I. See instructions	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19		Х
20;	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
I	<b>b</b> If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If 'Yes,' complete Schedule I, Parts I and II.</i>	21		Х
		_		

Form 990 (2021)

BAA

<sup>33-0773524</sup> Page **3** 

 Form 990 (2021)
 NATURE AND CULTURE INTERNATIONAL

 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	22	103	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? <i>If 'Yes,' complete Schedule J</i> .	23		x
24	a 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.	24a		X
I	<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
(	d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	a 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	25a		х
I	<b>b</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? <i>If 'Yes,' complete Schedule L, Part I</i> .	25b		Х
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? <i>If 'Yes,' complete Schedule L, Part II</i>	26		х
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? <i>If 'Yes,' complete Schedule L, Part III.</i>	27		Х
	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):			
	<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> 'Yes,' complete Schedule L, Part IV.	28a		Х
I	<b>b</b> A family member of any individual described in line 28a? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b		Х
	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.	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
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	33		Х
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	34		Х
35 a	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
I	<b>b</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)? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	35b		
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	36		Х
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? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O.	38	Х	
Pa	rt 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			
1.	a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 7		Yes	No
	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?	1 c	Х	
BAA	TEEA0104L 09/22/21	Form	990 (	(2021)

33-0773524

Page 4

Form	990 (20	21) NA	TURE	A	١N	D	CU	LTU	ÍRE	IN	NTF	ERI	NA	TIC	ONA	Γ									3	3-0	77352	24		Pa	ige <b>5</b>
Part	V	Stater	nents	s R	٦e	ga	rdi	ng	Oth	ier	IR	SI	Fili	ing	s a	nd	Tax	x Co	ompl	lianc	: <b>e</b> (c	onti	inu	ed)							
																													Yes	۱	No
2 a	Enter th ments,	ne number filed for th	of emp e calen	plo nda	oye ar	es yea	rep ar e	orte	d on g wi <sup>i</sup>	ו Fo ith c	orm or w	W- vith	-3, T iin t	Trar the <u>y</u>	nsmi year	ittal ′ cov	of \ vere	Wage ed by	e and this i	Tax returr	State	2	2a				11	-			
		ist one is r	•								-						•				-		ax r	eturr	ns?.			2 b	Х		_
		the sum of					-					-		-		•															Х
		organizati as it filed a F								-	-									-	-							3 a 3 b		_	Λ
																												50		+	
4 a	financia	ime during al account	in a for	reig	dai ign	r ye i co	ar, unt	ala t .ry (s	ne or such	rgan as a	a b	anl	h na k ac	ave a ccoi	an ir unt,	sec	uriti	n, or ies a	a sigr ccour	iature it, or	or ou other	fina	ncia	al ac	over, coun	a it)?		4 a	Х		
		enter the																													
		tructions for	-												•			-						-							
		e organiza		•	-		•											-		-		-						5 a			X
	-	taxable p	-	-	-		-										-	•										5 b			Х
		to line 5a						-																				5 c		_	
		ie organiza iny contrib																									on 	6 a			Х
	not tax	did the org deductible	?																	uch co	ontribu	ution	s or	gifts 	were	e 		6 b			
	-	zations tha	-																•••												
а	Did the	organizati s provided	on rece	eiv na	/e avc	a pa br?	ayn	nent	in e	xce	SS	of S	\$75	i ma	ade	part	tly a	is a c	contril	outior	n and	part	tly fo	or go	oods	and		7 a			Х
		did the or																										7 u			
с	Did the	organizatio	n sell, e	exc	cha	ange	e, oi	r oth	erwis	se di	dispo	ose	e of t	tang	gible	pers	sona	al pro	perty	for w	hich it	was	req								
		282?																										7 c			Х
		indicate t																				_		it oo	ntroo	+2		7.			Х
		organizati organizati				-				-				-			•			•								7e 7f			<u>л</u> Х
		ganization			-		-								-			-										/1		-	Λ
		ired?																		•••••								7 g			
	Form 10	rganizatior 098-C?																										7 h			
	•	ring organi						-														-		•		-		8			
	-	ation have oring orga							-		-	-				ule	yea	II <b>:</b>										8			
	•	sponsorin						-								und	ler s	sectio	on 49	56?								9 a			
		sponsorin							-																			9 b			
		501(c)(7)													- /				- , -												
а	Initiatio	n fees and	l capita	al c	cor	ntrił	outi	ons	inclu	Jdec	o b	n P	<b>'</b> art	VIII	I, lin	ie 12	2					10	Da								
b	Gross r	eceipts, in	cluded	lor	n F	orr	n 9	90, F	Part	VIII	I, lir	ne	12,	for	pub	olic ι	use	of cl	ub fa	cilitie	S	10	Db								
11	Section	1 <b>501(c)(</b> 12	) organ	niz	ati	ion	s. E	Inter	:																						
		ncome from																				11	1 a					_			
b	Gross in against	ncome from amounts	other s due or i	sou rea	urc ce	es. ive	(Do d fr	not om t	net a	amo 1 <b>.)</b>	ount	is di	ue (	or pa	aid t	o otl	her :	sourc	es			11	1 b								
		1 4947(a)(1																				of F	orm	104 I	11?			12a		Т	_
		enter the																				1	2b								
13	Section	1 <b>501(c)(</b> 29	) qualif	fie	d ı	non	ipro	ofit h	ealtl	h in	ısu	ran	ice	issı	uers																
		rganizatio						•																				13a			
		ee the ins												•					•				Э.								
		ne amount he organiz																					3b								
		ne amount																													V
		organizati				-	•	-							-				-	-								14a		+	Х
		has it file						•																				14b		+	
	excess	prganizatio parachute	payme	ent	t(s	) dı	urin	ig the	e yea	ar?.																		15			Х
16	Is the o	see the ins	n an ed	duc	cat	tion	nal i	instit	utior						sect	ion 4	496	8 ex	cise t	ax on	net i	nves	stme	ent i	ncom	1e?		16		T	Х
		complete								ruct		<b>n</b>	die -	a	lificat	1	ree		mine	0.000	otor -		aa :	n							
	activitie	n <b>501(c)(2</b> 1 es that wou complete	Id resu	ult	in	the																						17			_

33-0773524

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. Х

Sec	tion A. Governing Body and Management			
			Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year <b>1a</b> 10			
	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.			
ł	Enter the number of voting members included on line 1a, above, who are independent 1b 10			
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?	0	Х	
		2	Λ	
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?	3		Х
4	Did the organization make any significant changes to its governing documents	-		
	since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7 a	a 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?	7 a		Х
ł	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by			
	the following:			
	The governing body?	8 a	X	
	Each committee with authority to act on behalf of the governing body?	8 b	Х	
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? <i>If 'Yes,' provide the names and addresses on Schedule Q</i>	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	-	ie Co	
			Yes	No
10 a	Did the organization have local chapters, branches, or affiliates?	10 a		Х
t	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?	10 b		
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х	
ł	Describe on Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O			
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	Х	
	: Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe on Schedule O how this was doneSEE. SCHEDULE . Q	12 c	Х	
	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
	The organization's CEO, Executive Director, or top management official. SEE SCHEDULE. O.	15a	Х	
ł	Other officers or key employees of the organization SEE . SCHEDULE . O	15b	Х	
	If 'Yes' to line 15a or 15b, describe the process on Schedule O. See instructions.			
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		Х
ł	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?	16 b		
Sec	tion C. Disclosure			
_	List the states with which a copy of this Form 990 is required to be filed ► CA KS MD MI NJ NM TN			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 50 available for public inspection. Indicate how you made these available. Check all that apply.	D1(c)(	3)s on	ly)
	X     Own website     X     Upon request     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 availa the public during the tax year. SEE SCHEDULE O	ble to		
20				
	KERYN LEGER 1400 MAIDEN LANE DEL MAR CA 92014 858-259-0374			

Form 990 (2021) NATURE AND CULTURE INTERNATIONAL	33-0773524	Page 7
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highe Independent Contractors	est Compensated Employe	es, and
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 Compension	sated Employees	
<b>1</b> a Complete this table for all persons required to be listed. Report compensation for the calendar year endi organization's tax year.	ing with or within the	

• 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 the instructions for definition of 'key employee.'

• List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, 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.

					(C)	)					
	(A) Name and title	(B) Average hours	Pos thar is	s both :	an o	officer /truste			<b>(D)</b> Reportable compensation from the organization	(E) Reportable compensation from related organizations	<b>(F)</b> Estimated amount of other
		per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC/1099-NEC)	(W-2/1099- (W-2/1099-NEC)	compensation from the organization and related organizations
(1) MATI		40									
	SIDENT & CEO	0			Х				136,411.	0.	12,170.
	<u>'N LEGER</u>	40									
	ROLLER	0			Х				132,438.	0.	12,103.
	D_WELBORN_(THROUGH_9/21)	2									
CHAI		0	X		X				0.	0.	0.
	I_GAYLER	3									
	NDER & CHAIR	0	Х		Х				0.	0.	0.
	RLES_SMITH	4							0	0	2
	CHAIR	0	Х		Х				0.	0.	0.
<u>(6)</u> <u>SUE</u>		3	v		v				0	0	0
	CHAIR (9/21) CIA ANGLE	0 3	Х		Х				0.	0.	0.
	ND MEMBER		х						0.	0.	0.
	AD MEMBER TANA CASAS	2	Λ						0.	0.	0.
	ND MEMBER	0	х						0.	0.	0.
	E DUNNE	3	Λ						0.	0.	0.
	RD MEMBER		Х						0.	0.	0.
	JON ENGELHORN	3	1						0.	0.	0.
	CHAIR (9/21)	0	Х		Х				0.	0.	0.
	HUNTER-WELBORN	3									
	RETARY		Х		Х				0.	0.	0.
	ARD O. WILSON (THRU 12/21)	0									
	DRARY BOARD		Х						0.	0.	0.
	E GOODALL	0									<u> </u>
	DRARY BOARD	0	Х						0.	0.	0.
	( DAHLSEID	1									
CONS	SULTING CFO	0	Х		Х				0.	0.	0.
BAA		TEEA0	107L	09/22/	/21						Form 990 (2021)

33-0773524

Page 8

Par	t VII Section A. Officers, Directors, Tru	istees,	Key	Em	plo	ye	es, a	anc	Highest Com	pensated Emp	loyees (continued)
		(B)			(C						
	(A) Name and title	Average hours per week (list any hours for related organiza - tions below dotted line)	box	, unles cer and	s pe d a d	rson lirect	e is both or/trust employee	ee)	(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
(15)	JOHN EVEY	2									
<u> ( - )</u>	BOARD MEMBER	0	Х						0.	0.	0.
(16)	DANIELA URIBE	2							01		
<u> </u>	BOARD MEMBER	0	Х						0.	0.	0.
(17)	DAVID NEILL	0							01	0.	
<u> </u>	HONORARY BOARD	0	Х						0.	0.	0.
(18)	BYRON SWIFT	0									
<u> ( )</u>	HONORARY BOARD	0	Х						0.	0.	0.
(19)	RENZO PALADINES	40	21						0.	0.	
<u>(</u> /_	DIREC PROGRAMS	0	•		Х				0.	0.	0.
(20)		0			21				0.	0.	
<u>/</u> _											
(21)											
<u></u>											
(22)											
<u>`_'_</u>			•								
(23)											
<u> </u>											
(24)											
(25)			C								
1 b	Subtotal						I	•	268,849.	0.	24,273.
с	Total from continuation sheets to Part VII, Section	on A						•	0.	0.	0.
d	Total (add lines 1b and 1c)							•	268,849.	0.	24,273.
2	Total number of individuals (including but not limited	to those	isted	above	e) w	vho	receiv	/ed		0 of reportable comp	
	from the organization <b>&gt;</b> 2										
											Yes No
3	Did the organization list any former officer, direc	tor, truste	e. ke	ev em	nplo	vee	e. or h	niał	est compensated	employee	
	on line 1a? If 'Yes,' complete Schedule J for suc	h individu	ial								. З Х
4	For any individual listed on line 1a, is the sum of	reportab	le co	mper	nsat	tion	and	oth	er compensation t	from	
	the organization and related organizations greate	er than \$1	50,00	)0? /	f 'Y	′es,'	' com	plei	te Schedule J for		<b>A X</b>
	such individual										. <b>4</b> X
5	Did any person listed on line 1a receive or accruding for services rendered to the organization? If 'Yes	e comper	isatio	n fro	m a	any	unrel	ate	d organization or	individual	. <b>5</b> X
Sec	tion B. Independent Contractors	, compic		neur		5 10	i Suci	np			
	Complete this table for your five highest compen	sated ind	epen	dent	con	ntrad	ctors	tha	t received more th	nan \$100,000 of	
	compensation from the organization. Report compen	sation for	the ca	alend	lar y	/ear	endir	ng v	with or within the or	ganization's tax year	
	(A) Name and business add								(B) Description of	fconviooc	(C) Compensation
		699								01 301 11003	Compensation
2	Total number of independent contractors (including b		ited to	o thos	se li	stec	abov	/e) \	who received more	than	
	\$100,000 of compensation from the organization	► 0									

# Form 990 (2021) NATURE AND CULTURE INTERNATIONAL

# Part VIII Statement of Revenue

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

Page 9

						<b>(A)</b> Total revenue	<b>(B)</b> Related or exempt	<b>(C)</b> Unrelated business	(D) Revenue excluded from tax
							function	revenue	under sections 512-514
ທັທ	1 a	Federated campaigns.		1a			revenue		512-514
Contributions, Gifts, Grants, and Other Similar Amounts	Ŀ	Membership dues		1 b					
ני עיני	c	Fundraising events		1 c					
ar /	c	Related organizations.		1 d					
s, s lini	e	e Government grants (contribut		1 e					
tion S S	f	All other contributions, gifts, similar amounts not included		1 f	7 002 054				
ġ	c	Noncash contributions included			7,083,054.				
- the bu	-	lines 1a-1f		1 g	164,508.				
-	h h	Total. Add lines 1a-1f.		<u></u>		7,083,054.			
Program Service Revenue	2.			-	Business Code	151 000	151 000		
leve	2 a	<u>FEES</u>			900099	151,236.	151,236.		
е Н				<del> </del>					
evi	c	, 							
л С	e	,,							
grai	f	All other program servi	ce revenu	ie					
Pro	ç	<b>Total.</b> Add lines 2a-2f.			►	151,236.			
	3	Investment income (inclu	iding divid	ends, ir	nterest, and				
		other similar amounts)				214.			214.
	4 5	Income from investmer Royalties			•				
	5		(i) R		(ii) Personal				
	6 a	Gross rents 6a							
	Ł	Less: rental expenses 6b							
	c	Rental income or (loss) 6c				CP I			
	c	Net rental income or (lo			· · · · · · · · · · · · · · · · · · ·				
	7 a	Gross amount from	(i) Secu	urities	(ii) Other				
		sales of assets other than inventory <b>7a</b>	164	,508	. 19,300.				
	b	Less: cost or other basis							
		and sales expenses <b>7b</b> c Gain or (loss) <b>7c</b>		,508					
		Net gain or (loss)			16,701.	16,701.			16,701.
		Gross income from fundraisin				10,701.			10,701.
nue	00	(not including \$	y eveniis						
ŝVe		of contributions reported on li		_					
ď		See Part IV, line 18		88					
Other Reve		Less: direct expenses.		81					
δ	C	: Net income or (loss) fro	om fundra	ising e	events ►				
	9 a	Gross income from gaming ac See Part IV, line 19.	tivities.	98					
	F	Less: direct expenses.		91					
		: Net income or (loss) fro							
			-						
	108	Gross sales of inventory, less returns and allowances		10	a				
	b	Less: cost of goods sol	d	10	b				
	c	: Net income or (loss) fro	om sales	of inve					
SÌ	11				Business Code				
Miscellaneous Revenue	11 a b c c	OTHER_INCOME			900099	29,216.	29,216.		
llar Jen									
Sce.		All other revenue							
Σ		Total. Add lines 11a-11				29,216.			
	12	Total revenue. See inst				7,280,421.	180,452.	0.	16,915.

Bar, 76, 89, and 100 or Part Vie.         Exponses         ceneral exponses         exponses           I Grants and ther assisting dovernments.         Image: Control of the assisting dovernments.         Image: Con		URE INTERNATIONAL		33-0773	524 Page 1
Check II Schedule O contains a response or note to any line in this Farl X.           Do not include amounts reported on lines (b, ho, b), and the restance to domastic schedules.         Total expenses         Program service (expenses)         Charagement and (expenses)         Charagement and (expense)         Charagement and (expense) <thcharagement and<br="">(expense)<th></th><th></th><th></th><th></th><th></th></thcharagement>					
Dar per technols amounts reported on times         Total expenses         Program service expenses         Construction         Construction <th< th=""><th></th><th>•</th><th></th><th></th><th></th></th<>		•			
Total expenses         Total expenses         Total expenses         Maragement and general expenses         Fundation           1         Grangs and ther assistance to domestic individuals. See Part V, lines 15 and 16 see Constraints and ther assistance to foreign individuals. See Part V, lines 15 and 16 see Constraints and there assistance to foreign individuals. See Part V, lines 15 and 16 see Constraints and there assistance to foreign individuals. See Part V, lines 15 and 16 see Constraints and expenses         942,825.         942,825.         942,825.           2         Grants and other assistance to foreign entities in section 458 (C)(3)(6).         942,825.         942,825.         942,825.           2         Generation cliniculate above to diversition foreign diversition in section 458 (C)(3)(6).         0.         0.         0.           0         Other salaries and wages.         1, 614, 662.         1, 350,903.         91,303.         172,48           1         Ges for services (notemployees):         815,499.         762,975.         52,524.         16,522.           1         Fees for services (notemployees):         815,499.         762,975.         52,524.         16,541.           10         Payota taxes.         10,923.         11,933.         172,48.         10,923.         13,54.           11         Fees for services (notemployees):         815,499.         762,975.         52,52.					
organizations and domestic governments.         2 Graphs and other assistance to connectic information for any constraints and their assistance to connectic information.         3 Graphs and their assistance to connectic information formation and their assistance to connectic information.         3 Graphs and their assistance to connectic information formation.         4 Benefits paid to or for members.         2 Componsations of current officers, directors, trustees, and key employees.         2 Componsation on included above to despination of inschool ASS(C)(3)(B).         2 Other salaries and wages.         9 Other employee benefits.         2 0 other analyzee benefits.         2 0 other employees.         2 1 fail.         2 0 other employee benefits.         2 0 other employee b	ôb, 7b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service	Management and	Fundraising
individuals. See Part IV, line 22	organizations and domestic governme See Part IV, line 21	nts.			
organizations, foreign governments, and for- eign individuals. See Part IV, lines 15 and 16 Compensation of current offices, directors, fursities, and key employees.       942,825.       942,825.         6 Benefits paid to of tor members fursities, and key employees.       268,848.       40,923.       173,361.       54,55         6 Compensation on include above to disguilited persons (se defined under m socion 4950(3)3(h).       268,848.       40,923.       173,361.       54,55         7 Other salaries and wages.       0.       0.       0.       0.       0.       0.         9 Other employee torotholitons.       922,369.       184,201.       22,620.       13,5         9 Parsion playee benefits.       220,369.       184,201.       22,620.       13,5         9 Other employee torotholitons.       915,499.       762,975.       52,524.       55,252.         8 Amagement.       815,499.       762,975.       52,524.       54,100.         9 Deter (in the guantizetos 60% of the 25,000m.       86,222.       80,124.       6,098.       61,401.       54,11         11 of 53       61,201.       3,461.       54,11       110,53       61,201.       3,461.       54,11         12 of the expenses       14.408       103,290.       28,597.       13,5         13 office expenses.	individuals. See Part IV, line 22				
5         Compensation of current officers, directors, furstees, and key employees.         268,848.         40,923.         173,361.         54,5           6         Compensation not included above to disqualified persons (as defined under section 4950(10)) and persons described in section 4950(10) and persons described in section 4950(10).         0	organizations, foreign governments, and eign individuals. See Part IV, lines 15	for- and 16 942,825.	942,825.		
6       Compensation not included above to disqualified persons (as defined under section 4958(r)(1)) and persons described in section 4958(r)(1) and persons described in the first and first and the first and first and persons and first and persons and meetings.         11       Free persons and the described in the first and persons and meetings.         12       Paryonit set, and persons described in section 4958(r) (1) and persons described in section 4958(r) (1) and persons described in section 4978(r) (1) and persons described in section 4978(r) (1) and persons described in the first an	5 Compensation of current officers, dire	ctors,	40 022	172 261	54 564
7       Other salaries and wages       1, 614, 662.       1, 350, 903.       91, 303.       172, 4         8       Pension plan accruats and contributions (amployer contributions).       9       1, 614, 662.       1, 350, 903.       91, 303.       172, 4         9       Other employee benefits       220, 369.       184, 201.       22, 620.       13, 5         10       Payroll taxes       49, 994.       10, 477.       20, 975.       18, 5         1       Fees for services (nonemployees):       attraste for services (nonemployees):       attraste for services (nonemployees):       attraste for services (nonemployees):       attraste for services (nonemployees):         a Management       20, 727.       18, 075.       52, 524.       0         blegal       20, 727.       18, 075.       52, 524.       0         c Accounting.       0.0       86, 222.       80, 124.       6, 098.       0         11, 655.       61, 901.       3, 461.       54, 1       14       508.       103, 290.       28, 597.       13, 5         13       Other expenses.       108, 082.       103, 290.       28, 597.       13, 5         14       Information technology.       55, 217.       393, 823.       5, 525.       7, 7         16 </td <td>6 Compensation not included above to disgualified persons (as defined under</td> <td></td> <td></td> <td></td> <td>·</td>	6 Compensation not included above to disgualified persons (as defined under				·
8         Parsion plan acculas and contributions (include section 4016), and 403(0)         21/001/001         21/001/001           9         Other employee benefits         220, 369         184, 201.         22, 620.         13, 5           9         Other employee benefits         220, 369.         184, 201.         22, 620.         13, 5           10         Payoil taxes         49, 994.         10, 477.         20, 975.         18, 5           a         Management         815, 499.         762, 975.         52, 524.         14           b Legal         20, 727.         18, 075.         2, 652.         6         6           a         cAccounting.         20, 727.         18, 075.         2, 652.         6         6           a         caccounting.         20, 727.         18, 075.         2, 652.         6					172 156
10       Payroll taxes       20,000 <td>8 Pension plan accruals and contribution (include section 401(k) and 403(b)</td> <td>ns</td> <td>1,330,903.</td> <td>91,303.</td> <td>172,430</td>	8 Pension plan accruals and contribution (include section 401(k) and 403(b)	ns	1,330,903.	91,303.	172,430
10       Payroll taxes       49,994.       10,477.       20,975.       18,5         11       Fees for services (nonemployees):       815,499.       762,975.       52,524.         blegal.       20,727.       18,075.       2,652.         c Accounting.       20,727.       18,075.       2,652.         dLobbying.       90ter. (filme ling anout codes 10% of line 25, column qg, anout, list line 11g expenses on Scheule 0.       86,222.       80,124.       6,098.         12       Advertsing and promotion       116,754.       61,901.       3,461.       54,11         13       Office expenses       114,308.       103,290.       28,597.       13,9         14       Information technology.       66,665.       66,665.       0         14       308.       103,290.       28,597.       13,9         14       107.121.       393,823.       5,525.       7,7         17       Tavel.       407,121.       393,823.       5,525.       7,7         18       Payments of travel or entertainment expenses not covered above. (List miscellaneous expenses on ince 24e. If line 24e amount exceeds 10% of line 25,217.       55,217.       55,217.       55,217.         21       Depreciation, depletion, and amortization.       55,217.       55,217. <td>9 Other employee benefits</td> <td> 220,369.</td> <td>184,201.</td> <td>22,620.</td> <td>13,548</td>	9 Other employee benefits	220,369.	184,201.	22,620.	13,548
a Management       815,499.       762,975.       52,524.         b Legal       20,727.       18,075.       2,652.         c Accounting.       0.000       0.000       0.000         d Lobbying.       20,727.       18,075.       2,652.         e Professional fundrating services. See Part IV, line 17.       18,075.       2,652.         f Investment management fees       9       0.124.       6,098.         g Other, (filme 11g anount exceeds 10% of line 25, column (A), amount, list line 11g expenses of Schedule 0.       86,222.       80,124.       6,098.         12 Advertising and promotion       119,521.       61,901.       3,461.       54,11         13 Office expenses       114, 308.       103,290.       28,597.       13,99         14 Information technology.       66,665.       66,665.       66       66         16 Occupancy.       66,665.       66,665.       7,70         17 ravel.       407,121.       393,823.       5,525.       7,71         20 Interest.       90       669.       14,780.       24,889.         20 Interest.       90       669.       14,780.       24,889.         20 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on on line 24e.       140,695. <t< td=""><td>10 Payroll taxes</td><td></td><td></td><td></td><td>18,542</td></t<>	10 Payroll taxes				18,542
b Legal       20,727.       18,075.       2,652.         c Accounting       20,727.       18,075.       2,652.         d Lobbying       9       9       10,075.       2,652.         e Professional fundraising services. See Part IV, line 17       18,075.       2,652.         f Investment management fees.       9       9       10,075.       2,652.         g Other, file 10, anour deceds 10% of line 25, column (A), amount, list line 10 generase on Schedule 0.)       86,222       80,124.       6,098.         110,521.       61,901.       3,461.       54,11         30 Office expenses       144,808.       103,290.       28,597.       13,5         110,522.       66,665.       66. <td< td=""><td></td><td></td><td></td><td></td><td></td></td<>					
c Accounting	÷	010,100,	762,975.	52,524.	
d Lobbying			18,075.	2,652.	
e Professional fundraising services. See Part IV, line 17       investment management fees					
f       Investment management fees         g       ther, (if line 11g amount exceeds 10% of line 25, outurn (A), amount, list line 11g expenses on Schedule 0.)         12       Advertising and promotion         13       Office expenses         14       s0.6         13       Office expenses         14       s0.6         14       s0.6         15       Royalties         16       Occupancy         66, 665.       66, 665.         17       Travel         407, 121.       393, 823.         5, 525.       7, 7         7       Fayments of travel or entertainment expenses for any federal, state, or local public officials.         10       conferences, conventions, and meetings.         20       Interest.         21       Payments to affiliates.         22       Perceixtion, depletion, and amortization         55, 217.       55, 217.         21       Insurance         22       Steptenses on Schedule O.)         23       Insurance         24       If ine 24e amount exceeds 10%         of line 25, column (A), amount, list line 24e         expenses on Schedule O.)       Statal functional expenses.         24					
9 Other, (fi line 11g amount exceeds 10% of line 25 column (A), amount, list line 11g expenses on Schedule 0.)       86, 222       0, 124.       6, 098.         12 Advertising and promotion       116, 52.       61, 901.       3, 461.       54, 1         13 Office expenses       114, 308.       103, 290.       28, 597.       13, 9         14 Information technology       66, 665.       66, 665.       7, 7         16 Occupancy       66, 665.       66, 665.       7, 7         17 Travel.       407, 121.       393, 823.       5, 525.       7, 7         19 Ochferees, conventions, and meetings.       0       0       0       0         20 Interest       9       55, 217.       55, 217.       0       0         21 Payments to affiliates       93, 669.       14, 780.       24, 889.       0         20 Other expenses. Itemize expenses not covered show. (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.)       370, 081.       5       140, 907.       140, 607.       300.         4 DINING AND EVENTS       10, 835.       6, 520.       4, 152.       1         23 Joint costs. Complete this line only if the organization reported in column (B) joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined duca					
(A), amount, list line 11g expenses on Schedule 0	-				
12       Advertising and promotion       119,521       61,901       3,461       54,1         13       Office expenses       144,508       103,290       28,597       13,5         14       Information technology       66,665       66,665       66,665         17       Travel       407,121       393,823       5,525       7,7         18       Payments of travel or entertainment expenses for any federal, state, or local public officials       407,121       393,823       5,525       7,7         19       Conferences, conventions, and meetings       20       21       24,889       21         21       Payments to affiliates       39,669       14,780       24,889       24,889         22       Depreciation, depletion, and amortization       55,217       55,217       24,889       24,889         23       Insurance       39,669       14,780       24,889       24,889       24,889         24       Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24, If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O)       370,081       370,081       50,095       14,780       24,889       24,889       24,889       24,152       1         24       FIELD_SUPPLIES       37			80,124.	6,098.	
14       Information technology	12 Advertising and promotion	119,521.	61,901.	3,461.	54,159
15       Royalties       66, 665.       66, 665.         16       Occupancy       66, 665.       66, 665.         17       Travel       407, 121.       393, 823.       5, 525.       7, 7         18       Payments of travel or entertainment expenses for any federal, state, or local public officials.       90       90       91			103,290.	28,597.	13,921
16       Occupancy       66,665.       66,665.         17       Travel       393,823.       5,525.       7,7         18       Payments of travel or entertainment expenses for any federal, state, or local public officials.       9       Conferences, conventions, and meetings.       9         19       Conferences, conventions, and meetings.       9       0       10       10       10         20       Interest.       9       0       11       10	14 Information technology				
17       Travel	15 Royalties				
18       Payments of travel or entertainment expenses for any federal, state, or local public officials.         19       Conferences, conventions, and meetings         20       Interest         21       Payments to affiliates.         22       Depreciation, depletion, and amortization         23       Insurance         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       FIELD_SUPPLIES         370, 081.       370, 081.         b       FIELD_AUTO_EXPENSES         c       10, 835.         c       900.         d       DINING_AND_EVENTS         e All other expenses. Add lines 1 through 24e       5, 555, 665.         4, 784, 082.       436, 457.         25       Total functional expenses. Add lines 1 through 24e         26       Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.         campaign and fundraising solicitation.       Check here ►	<b>16</b> Occupancy				
expenses for any federal, state, or local   public officials   9   Conferences, conventions, and meetings   20   Interest   21   Payments to affiliates   22   Depreciation, depletion, and amortization   23   Insurance   24   Bisurance   25   Conter expenses   a FIELD   SUPPLIES   370,081   b FIELD   SUPPLIES   10   c PUBLICITY   10   4   DINING AND EVENTS   e All other expenses.   costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ►		407,121.	393,823.	5,525.	7,773
20       Interest	expenses for any federal, state, or loc	al			
21       Payments to affiliates	- , , ,	5			
22       Depreciation, depletion, and amortization       55, 217.       55, 217.         23       Insurance       39, 669.       14, 780.       24, 889.         24       Other expenses. Itemize expenses on time 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)       370, 081.       370, 081.         a       FIELD_SUPPLIES       370, 081.       370, 081.         b       FIELD_AUTO EXPENSES       180, 695.       180, 695.         c       PUBLICITY       140, 907.       140, 607.       300.         d       DINING AND EVENTS       10, 835.       6, 520.       4, 152.       1         e       All other expenses. Add lines 1 through 24e       5, 555, 665.       4, 784, 082.       436, 457.       335, 1         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 ▶       [ if following       5, 555, 665.       4, 784, 082.       436, 457.       335, 1					
23       Insurance       39,669       14,780       24,889         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.)       370,081       370,081       24,889         a       FIELD SUPPLIES       370,081       370,081       50,200       10,200         a       FIELD SUPPLIES       370,081       370,081       10,200         b       FIELD AUTO EXPENSES       180,695       180,695       10,200         c       PUBLICITY       140,907       140,607       300         d       DINING AND EVENTS       10,835       6,520       4,152       1         e       All other expenses.       5,555,665       4,784,082       436,457       335,1         25       Total functional expenses. Add lines 1 through 24e       5,555,665       4,784,082       436,457       335,1         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 ►       if following       if following	2		55 017		
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         a       FIELD_SUPPLIES       370,081.         b       FIELD_AUTO_EXPENSES       180,695.         c       PUBLICITY       140,907.         d       DINING_AND_EVENTS       10,835.         e All other expenses. Add lines 1 through 24e       5,555,665.         4       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 ▶       if following		00/==::		24.000	
a FIELD_SUPPLIES       370,081.       370,081.         b FIELD_AUTO_EXPENSES       180,695.       180,695.         c PUBLICITY       140,907.       140,607.       300.         d DINING AND EVENTS       10,835.       6,520.       4,152.       1         e All other expenses.	24 Other expenses. Itemize expenses no covered above. (List miscellaneous experience) on line 24e. If line 24e amount exceeds 1 of line 25, column (A), amount, list line 2	t nses 0% 4e	14,780.	24,889.	
b FIELD AUTO EXPENSES       180,695.         c PUBLICITY       140,907.         d DINING AND EVENTS       10,835.         e All other expenses.       6,520.         25 Total functional expenses. Add lines 1 through 24e       5,555,665.         4,784,082.       436,457.         335,1         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 ►			370.081		
c       PUBLICITY       140,907.       140,607.       300.         d       DINING AND EVENTS       10,835.       6,520.       4,152.       1         e       All other expenses.					
d DINING AND EVENTS       10,835.       6,520.       4,152.       1         e All other expenses.       25       Total functional expenses. Add lines 1 through 24e       5,555,665.       4,784,082.       436,457.       335,1         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 ►       if following				300.	
<ul> <li>25 Total functional expenses. Add lines 1 through 24e 5,555,665. 4,784,082. 436,457. 335,1</li> <li>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 ► if following</li> </ul>	d <u>DINING AND EVENTS</u>	10,835.			163
the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following			4,784,082.	436,457.	335,126
SOP 98-2 (ASC 958-720)	the organization reported in column (E joint costs from a combined education campaign and fundraising solicitation. Check here ► ☐ if following	ál			

# Form 990 (2021) NATURE AND CULTURE INTERNATIONAL Part X Balance Sheet

Par	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash – non-interest-bearing.	2,270,787.	1	4,159,511
	2	Savings and temporary cash investments.	1,804,158.	2	1,970,733
	3	Pledges and grants receivable, net		3	34,692
	4	Accounts receivable, net	75,782.	4	107,864
	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	
		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	
2	8	Inventories for sale or use		8	
10001	9	Prepaid expenses and deferred charges	20,993.	9	19,523
<b>۲</b> .	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D <b>10a</b> 3,542,168.			
	b	Less: accumulated depreciation 10b 368,108.	2,992,563.	10 c	3,174,060
· ·	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.		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	7,164,283.	16	9,466,383
1	17	Accounts payable and accrued expenses	404,692.	17	414,038
	18	Grants payable		18	
	19	Deferred revenue	1,012,186.	19	1,580,184
		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	
		Unsecured notes and loans payable to unrelated third parties		24	
	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	1,416,878.	26	1,994,222
Net Assets of Fully Datafices		Organizations that follow FASB ASC 958, check here ► X and complete lines 27, 28, 32, and 33.			
	27	Net assets without donor restrictions	4 070 520	27	E 20E 212
		Net assets with donor restrictions	4,078,538.	27	<u>5,285,213</u> 2,186,948
	20	Organizations that do not follow FASB ASC 958, check here ►	1,668,867.	20	2,180,948
5		and complete lines 29 through 33.			
5   2	29	Capital stock or trust principal, or current funds		29	
3	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
8	31	Retained earnings, endowment, accumulated income, or other funds		31	
5	32	Total net assets or fund balances	5,747,405.	32	7,472,161
		Total liabilities and net assets/fund balances.	7,164,283.	33	9,466,383

33-0773524

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       7,280,42         2       Total expenses (must equal Part IX, column (A), line 25).       2       5,555,60         3       Revenue less expenses. Subtract line 2 from line 1.       3       1,724,71         4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).       4       5,747,40         5       5       6       7       1       7         8       Prior period adjustments.       8       8	
1Total revenue (must equal Part VIII, column (A), line 12)	
2       Total expenses (must equal Part IX, column (A), line 25)	
2Total expenses (must equal Part IX, column (A), line 25).25,555,63Revenue less expenses. Subtract line 2 from line 131,724,74Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).45,747,45Net unrealized gains (losses) on investments.56167Investment expenses.7	21.
3 Revenue less expenses. Subtract line 2 from line 1       3       1,724,75         4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).       4       5,747,45         5 Net unrealized gains (losses) on investments.       5       6         6 Investment expenses.       7	
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).       4       5,747,41         5 Net unrealized gains (losses) on investments.       5       5         6 Donated services and use of facilities.       6       7         7 Investment expenses.       7       7	
5       5         6       6         7       7	
7 Investment expenses	
9 Drier pariod adjustments	
9 Other changes in net assets or fund balances (explain on Schedule O)	0.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,	
column (B))	61.
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: Cash X Accrual 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?	Х
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: Separate basis Consolidated basis Both consolidated and separate basis	
<b>b</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:	
X       Separate basis       Consolidated basis       Both consolidated and separate basis	
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.	
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? <b>3a</b>	Х
<b>b</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	
BAA TEEA0112L 09/22/21 Form 990 (2	2021)

SCHEDULE	Α
(Form 990)	

Total

# **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.

OMB No.	1545-0047
20	21

				► Atta	ch to Form 990 or Forr	n 990-E2	Ζ.		Open to Public
Departn Internal	nent of the Revenue S	Treasury Service	► (	io to <i>www.irs.gov/Fo</i>	rm990 for instructions	and the	latest i	nformation.	Inspection
Name o	of the organ	nization						Employer identifica	ation number
NAT	-		TURE INTER					33-077352	
Part					v			s part.) See instruc	tions.
	Ĕ-		•	•	For lines 1 through 12,		2	,	
1					hurches described in <b>sec</b>		b)(1)(A)(	i).	
2 3					ach Schedule E (Form ization described in <b>se</b> t		0/6//1//		
3 4		•		1 0					nter the hospital's
		ie, city, a	-						
5	sect	tion 170(b	<b>)(1)(A)(iv).</b> (Co	mplete Part II.)			-	a governmental unit de	escribed in
6		deral, sta	te, or local gov	ernment or governme	ental unit described in s	section 1	1 <b>70(b)(</b> 1)	(A)(∨).	
7	in se	ection 17	0(b)(1)(A)(vi).(	Complete Part II.)		-	ental un	t or from the general pul	blic described
8	_				A)(vi). (Complete Part				
9	or ur							on with a land-grant colle and state of the college o	
10	from inve June	activitie: stment in e 30, 197	s related to its e come and unre 5. See <b>section !</b>	exempt functions, sub lated business taxable 509(a)(2). (Complete F	oject to certain exceptic e income (less section Part III.)	ons; and 511 tax)	(2) no r ) from bi	utions, membership fe nore than 33-1/3% of it usinesses acquired by	s support from gross
11 12	An o	organizati	on organized ar	nd operated exclusive	ely to test for public saf	ety. See	sectior	n 509(a)(4).	
a	lines orga com	s 12a thro e I. A supp nization(s iplete Par	ough 12d that de orting organizati ) the power to re <b>t IV, Sections A</b>	escribes the type of supervised on operated, supervised gularly appoint or elect and <b>B.</b>	upporting organization d, or controlled by its su a majority of the director	and con oported c ors or trus	nplete lii organizat stees of t	ion(s), typically by giving he supporting organization	the supported on. <b>You must</b>
b	man	agement o	oporting organiz of the supporting te Part IV, Sect	organization vested in	ontrolled in connection the same persons that c	i with its control or	support manage	ed organization(s), by the supported organizat	having control or ion(s). <b>You</b>
С	<b>Type</b> orga	e III function	onally integrated s) (see instructi	A supporting organizat	ion operated in connectio plete Part IV, Sections	on with, a <b>A, D, an</b>	nd functio <b>d E.</b>	onally integrated with, its	supported
d	func	tionally in	ntegrated. The c	rganization generally	anization operated in co must satisfy a distribu <b>s A and D, and Part V.</b>	ition reg	with its s uiremen	supported organization(s) t and an attentiveness	) that is not requirement (see
e	integ	grated, or	Type III non-fu	ation received a written nctionally integrated borganizations	en determination from supporting organizatior	the IRS า.	that it is	a Type I, Type II, Type	e III functionally
				n about the supported	d organization(s).				
		supported of	5	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	organizat in your o	s the tion listed joverning ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
(A)									
(B)									
(C)									
(D)									
(E)									
						1			

NATURE AND CULTURE INTERNATIONAL

Page **2** 

33-0773524

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

# Section A. Public Support

	tion A. I ublic Support	-		-			
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	<b>(d)</b> 2020	<b>(e)</b> 2021	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')	4,901,708.	5,440,664.	5,176,663.	5,935,148.	7,083,054.	28,537,237.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4	Total. Add lines 1 through 3	4,901,708.	5,440,664.	5,176,663.	5,935,148.	7,083,054.	28,537,237.
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)						4,992,310.
6	Public support. Subtract line 5 from line 4						23,544,927.
Sec	tion B. Total Support						
Cale begi	ndar year (or fiscal year nning in) ►	<b>(a)</b> 2017	<b>(b)</b> 2018	<b>(c)</b> 2019	( <b>d)</b> 2020	<b>(e)</b> 2021	<b>(f)</b> Total
7	Amounts from line 4	4,901,708.	5,440,664.	5,176,663.	5,935,148.	7,083,054.	28,537,237.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	442.	17,815,	28, 335.	5,089.	214.	51,895.
9	Net income from unrelated business activities, whether or not the business is regularly carried on		C	56.			0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) SEE PART VI				21,152.	29,216.	50,368.
	Total support. Add lines 7 through 10						28,639,500.
12	Gross receipts from related activ	vities, etc. (see ins	structions)			12	0.
13	First 5 years. If the Form 990 is organization, check this box and	for the organization for the organization for the organization for the second sec	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)	►
	tion C. Computation of Pu						
	Public support percentage for 20						82.21 %
15	Public support percentage from	2020 Schedule A,	Part II, line 14			15	80.25%
16a	<b>33-1/3% support test-2021.</b> If t and <b>stop here.</b> The organization	he organization di qualifies as a pul	id not check the b plicly supported o	oox on line 13, an rganization	d line 14 is 33-1/3	3% or more, checl	≺ this box ·····► χ
b	33-1/3% support test-2020. If the and stop here. The organization	ne organization die qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a	a, and line 15 is 3	3-1/3% or more, o	check this box ►
17a	<b>10%-facts-and-circumstances te</b> or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	s test, check this I	box and stop here	e. Explain in Part	VI how
	<b>10%-facts-and-circumstances te</b> or more, and if the organization organization meets the facts-and	meets the facts-a d-circumstances te	nd-circumstances est. The organizat	s test, check this l tion qualifies as a	box and <b>stop here</b> publicly supporte	e. Explain in Part d organization	VI how the
18	Private foundation. If the organi	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see ins	structions 🕨

Schedule A (Form 990) 2021

#### NATURE AND CULTURE INTERNATIONAL

33-0773524

Page 3

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
	dar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include						
_	any 'unusual grants.')						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities						
	furnished in any activity that is						
	related to the organization's						
2	tax-exempt purpose Gross receipts from activities						
3	that are not an unrelated trade						
	or business under section 513.						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on						
	its behalf						
5	The value of services or						
	facilities furnished by a						
	governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1.						
	2, and 3 received from						
	disqualified persons						
b	Amounts included on lines 2						
	and 3 received from other than disgualified persons that						
	exceed the greater of \$5,000 or						
	1% of the amount on line 13						
	for the year.						
	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from line 6.)						
Sec	tion B. Total Support						
	dar year (or fiscal year beginning in) 🕨	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 6		(4) 11 10		(4) ====		(1) 1 0 (0.1
	Gross income from interest, dividends,						
Tua	payments received on securities loans,						
	rents, royalties, and income from						
h	similar sources Unrelated business taxable						
U	income (less section 511						
	taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of						
	capital assets (Explain in						
	Part VI.)						
13	Total support. (Add lines 9,						
14	10c, 11, and 12.) First 5 years. If the Form 990 is	for the organizativ	an's first second	third fourth or f	ifth tox yoor oo o	contion = E01(a)(2)	
14	organization, check this box and	stop here				section 501(c)(5)	►
Sec	tion C. Computation of Pu						<u>_</u>
15	Public support percentage for 20	021 (line 8, colum	n (f), divided by li	ine 13, column (f)	)	15	010
	Public support percentage from						010
	tion D. Computation of Inv						· ·
17	Investment income percentage f				umn (fl)		00
18	Investment income percentage f			-			00 00
198	<b>33-1/3% support tests</b> -2021. If is not more than 33-1/3%, check						
h	<b>33-1/3% support tests–2020.</b> If			•		-	
J	line 18 is not more than 33-1/3%	6, check this box a	and stop here. Th	ne organization au	alifies as a public	ly supported ordar	nization ►
20	Private foundation. If the organi		-				
	9						

#### Page 4

#### Part IV Supporting Organizations

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

### Section A. All Supporting Organizations

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

Pa	t IV  Supporting Organizations (continued)		
		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
i	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below,		
	the governing body of a supported organization? 11a		
I	A family member of a person described on line 11a above? 11b		
	A 35% controlled entity of a person described on line 11a or 11b above? If 'Yes' to line 11a, 11b, or 11c, provide detail in <b>Part VI</b> .		

NATURE AND CULTURE INTERNATIONAL

#### Section B. Type I Supporting Organizations

Schedule A (Form 990) 2021

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If 'No,' describe in **Part VI** how the supported organization (s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*

#### Section C. Type II Supporting Organizations

 Yes
 No

 1
 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).
 1

#### Section D. All Type III Supporting Organizations

ay of the fifth month of the poort provided during the prior tax		
tification and (iii) conies of the		
tent not previously provided?		
or elected by the supported		
supported organization(s).		_
ed organizations have a significant anization's income or assets at		
3		
	or elected by the supported If 'No,' explain in <b>Part VI</b> how supported organization(s). <b>2</b> d organizations have a significant	ent not previously provided?       1         or elected by the supported       1         If 'No,' explain in Part VI how       2         d organizations have a significant       2

#### Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
  - a The organization satisfied the Activities Test. Complete line 2 below.
  - **b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
- c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).

#### 2 Activities Test. Answer lines 2a and 2b below.

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in **Part VI identify those supported** organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If 'Yes' or 'No,' provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If 'Yes,' describe in **Part VI** the role played by the organization in this regard.

2a

2b

3a

Yes

No

33-0773524

Page 5

Yes

1

2

No

 Schedule A (Form 990) 2021
 NATURE AND CULTURE INTERNATIONAL

 Part V
 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

ection A – Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
<b>3</b> Other gross income (see instructions)	3		
<b>4</b> Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C – Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 <b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally inte	earated	Type III supporting or	ganization

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). 7

Schedule A (Form 990) 2021

Par		upporting Organiza	tions (continue	d)	
Sec	tion D – Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exempt pu	irposes		1	
2	Amounts paid to perform activity that directly furthers exempt purposes in excess of income from activity	S,	2		
3	Administrative expenses paid to accomplish exempt purposes of su	3			
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required – provide	details in <b>Part VI</b>		5	
6	Other distributions (describe in <b>Part VI</b> ). See instructions.			6	
	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the organizati	ion is responsive (provide	details		
	in <b>Part VI</b> ). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sec	tion E – Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributic Pre-2021	ons	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required – <i>explain in Part VI</i> ). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	Prom 2017				
c	From 2018				
c	From 2019				
e	PFrom 2020				
1	f Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D, line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in <b>Part VI</b></i> . See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j and 4c.				
8	Breakdown of line 7:				
a	Excess from 2017				
Ł	Excess from 2018				
C	Excess from 2019				
C	Excess from 2020				
e	Excess from 2021				

BAA

Schedule A (Form 990) 2021

OTHER INCOME		<u>29,216.</u> <u>\$</u>	21,152.	<u>+</u>	<u>+</u>	<u>+</u>
	TOTAL <u>\$</u>	<u>29,216.</u> \$	21,152.	<u>\$</u> 0.	<u>\$ 0.</u>	<u>\$0.</u>



SC	HEDULE D	Sup	OMB No. 1545-0047			
	rm 990)	2021	_			
Intern	rtment of the Treasury al Revenue Service	Open to Public Inspection				
	e of the organization	TURE INTERNATIONAL			Employer identification number	
INA	IOKE AND COL	IURE INTERNATIONAL			33-0773524	
Pai	rt I Organizat Complete	tions Maintaining Donc if the organization ans	or Advised Funds or Other Sin wered 'Yes' on Form 990, Par	<b>milar Funds or Acc</b> t IV, line 6.	counts.	
	•	5	(a) Donor advised funds	,	unds and other accounts	_
1		end of year				_
2		ntributions to (during year).				
3 4		ants from (during year)				_
5	Did the organizati	ion inform all donors and do	nor advisors in writing that the assets	s held in donor advised		
6	-		organization's exclusive legal contro			
0	for charitable pur impermissible pri	poses and not for the benefit vate benefit?	rs, and donor advisors in writing that t of the donor or donor advisor, or for	r any other purpose cor	iferring	
Pa	rt II Conserva	tion Easements.				_
	Complete	if the organization ans	wered 'Yes' on Form 990, Par			
1		nservation easements held by of land for public use (for exam	y the organization (check all that app		rically important land area	
		natural habitat		Preservation of a histo Preservation of a certif	rically important land area	
		of open space				
2	Complete lines 2a last day of the tax		neld a qualified conservation contributio	n in the form of a conserv	vation easement on the	
	····, · · · ·			F	leld at the End of the Tax Year	
			ments fied historic structure included in (a)			
(	structure listed in	the National Register	n (c) acquired after 7/25/06, and not	on a historic <b>2d</b>		
3	Number of conserv tax year ►	vation easements modified, tran	nsferred, released, extinguished, or term	ninated by the organizatio	n during the	
4		where property subject to conse	—			
5	and enforcement	of the conservation easeme	garding the periodic monitoring, insp nts it holds?		Yes No	
6	Staff and volunteer ►	r hours devoted to monitoring,	inspecting, handling of violations, and e	nforcing conservation eas	sements during the year	
7	Amount of expense ►\$	es incurred in monitoring, inspe	ecting, handling of violations, and enford	cing conservation easeme	ents during the year	
8	and section 170(h	ı)(4)(B)(ii)?	n line 2(d) above satisfy the requirem		Yes No	
9	In Part XIII, descu include, if applica conservation ease	able, the text of the footnote	oorts conservation easements in its re to the organization's financial statem	evenue and expense states the test that describes the	atement and balance sheet, and organization's accounting for	d
Pai	rt III Organizat	tions Maintaining Colle	ctions of Art, Historical Treas wered 'Yes' on Form 990, Par	<b>sures, or Other Sin</b> t IV, line 8.	nilar Assets.	
1:	historical treasure	es, or other similar assets he	r FASB ASC 958, not to report in its Id for public exhibition, education, or Il statements that describes these ite	research in furtherance	balance sheet works of art, e of public service, provide in	_
I	historical treasures following amounts	s, or other similar assets held f s relating to these items:	r FASB ASC 958, to report in its reve or public exhibition, education, or resea	rch in furtherance of publ	ic service, provide the	
	••		line 1			_
2	· ·				·	_
			nistorical treasures, or other similar asso ASC 958 relating to these items:			
			1			_
						4
BAA	A For Paperwork R	eauction Act Notice, see the	e Instructions for Form 990.	TEEA3301L 08/30/21	Schedule D (Form 990) 2021	1

Schedule D (Form 990) 2021 NATURE				33-077	
Part III Organizations Maintain	ing Collection	s of Art, Histor	ical Treasures, or	Other Similar Ass	ets (continued)
<b>3</b> Using the organization's acquisition, a	ccession, and other	records, check any	of the following that ma	ake significant use of its	collection
items (check all that apply): <b>a</b> Public exhibition		d Loan or	exchange program		
<b>b</b> Scholarly research		e Other	exchange program		
c Preservation for future generat	ions				
<ul> <li>Provide a description of the organizati Part XIII.</li> </ul>		l explain how they f	urther the organization's	s exempt purpose in	
	n solicit or receive	donations of art	historical treasures	r other similar assets	
5 During the year, did the organization to be sold to raise funds rather that					Yes No
Part IV Escrow and Custodial A line 9, or reported an ar	Arrangements. nount on Form	Complete if th 990, Part X, li	e organization ans ne 21.	swered 'Yes' on Fo	rm 990, Part IV,
<b>1 a</b> Is the organization an agent, truste	e, custodian or ot	ner intermediary fo	or contributions or othe	er assets not included	
on Form 990, Part X? <b>b</b> If 'Yes,' explain the arrangement in					Yes
			y lable.		Amount
<b>c</b> Beginning balance					Amount
<b>d</b> Additions during the year					
e Distributions during the year					
f Ending balance					
2 a Did the organization include an am	ount on Form 990	Part X, line 21, fo	or escrow or custodial	account liability?	Yes No
<b>b</b> If 'Yes,' explain the arrangement in	Part XIII. Check I	nere if the explana	tion has been provide	d on Part XIII	
Part V Endowment Funds. Cor		T			
	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1 a Beginning of year balance					
<b>b</b> Contributions					
c Net investment earnings, gains, and losses					
<b>d</b> Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses		-C			
<b>g</b> End of year balance					
2 Provide the estimated percentage	of the current year	end balance (line	1g, column (a)) held a	as:	•
a Board designated or quasi-endowmen	t 🕨	00			
<b>b</b> Permanent endowment ►	00				
c Term endowment ►	0/0				
The percentages on lines 2a, 2b, and	2c should equal 10	0%.			
3a Are there endowment funds not in the	possession of the	organization that are	e held and administered	for the	
organization by:					Yes No
<ul><li>(i) Unrelated organizations</li><li>(ii) Related organizations</li></ul>					3a(i)
<b>b</b> If 'Yes' on line 3a(ii), are the relate					3a(ii) 3b
4 Describe in Part XIII the intended u	-	•			. <b>SD</b>
Part VI Land, Buildings, and Ed	-				
Complete if the organiza		'Yes' on Form	990 Part IV line	11a See Form 99	0 Part X line 10
Description of property		t or other basis	(b) Cost or other	(c) Accumulated	(d) Book value
	(ir) (ir	ivestment)	basis (other)	depreciation	(U) BOOK Value
<b>1 a</b> Land			2,749,373.		2,749,373.
<b>b</b> Buildings			272,316.	98,845.	173,471.
c Leasehold improvements					
d Equipment			486,998.	249,861.	237,137.
e Other			33,481.	19,402.	14,079.
Total. Add lines 1a through 1e. (Column	(d) must equal Fo	rm 990, Part X, co	olumn (B), line 10c.)		3,174,060.
BAA				Sched	ule D (Form 990) 2021

Schedule [	D (Form 990) 2021	NATURE AND CULTURE	E INTERNATIONAL		33-0773524	Page 3
	Investments –	Other Securities. organization answered		N/A Part IV, line 11b, See		(, line 12,
(a) Desc		gory (including name of security)	(b) Book value		cost or end-of-year market v	
•••						
(2) Closely	/ held equity interest	S				
(3) Other						
(A)						
(B)						
(C)						
(D)						
(E)						
(F) (G)						
(H)						
(l)						
	nn (b) must equal Form 99	00, Part X, column (B) line 12.) 🕨				
	Investments –	Program Related.		N/A		
	Complete if the	e organization answered		, Part IV, line 11c. See		
	(a) Description of	investment	(b) Book value	(c) Method of valuation: Co	ost or end-of-year mar	ket value
(1)						
(2)						
(3)						
(4) (5)						<u> </u>
(6)						
(7)						
(8)						
(9)						
(10)						
		00, Part X, column (B) line 13.) 🕨				
Part IX	Other Assets.	organization answered	Vest on Form 990	Part IV line 11d See	Form 990 Part X	line 15
		(a) De	scription		(b) Book	
(1)		••				
(2)						
(3)						
(4) (5)						
(6)						
(7)						
(8)						
(9)						
(10)						
		l Form 990, Part X, column (l	B) line 15.)		►	
Part X	Other Liabilitie	s. anization answered 'Yes' on F	orm 990 Part IV line 11	e or 11f See Form 990 Part	X line 25	
1.	piete in the eng		iption of liability		(b) Book	value
	ral income taxes	•••				
(2)						
(3)						
(4) (5)					<u> </u>	
(6)					<del></del>	
(7)						
(8)						
(9)						
(10)						
(11)					<u> </u>	
otal. (Colum	nn (b) must equal Form 99	00, Part X, column (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.

Schedule D (Form 990) 2021 NATURE AND CULTURE INTERNATIONAL	33-0773	8524 Page <b>4</b>
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.	-	
1 Total revenue, gains, and other support per audited financial statements	1	7,370,421.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		· · · ·
a Net unrealized gains (losses) on investments 2a		
b Donated services and use of facilities	,000.	
c Recoveries of prior year grants 2c		
d Other (Describe in Part XIII.) 2d		
e Add lines <b>2a</b> through <b>2d</b>		90,000.
3 Subtract line 2e from line 1		7,280,421.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		, , ,
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines <b>4a</b> and <b>4b</b>		
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	7,280,421.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expense	es per Returi	
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	•	
1 Total expenses and losses per audited financial statements	1	5,645,665.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		- / /
	,000.	
b Prior year adjustments	/ 0001	
c Other losses.		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d		90,000.
3 Subtract line 2e from line 1		5,555,665.
<b>4</b> Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b		
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.).	5	5,555,665.
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.

# PART X - FASB ASC 740 FOOTNOTE

THE ORGANIZATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS

TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO

THE FINANCIAL STATEMENTS.

Schedule D (Form 990) 2021

SCHEDULE	F
(Form 990)	

# Statement of Activities Outside the United States

Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b, 15, or 16.
 Attach to Form 990.

2021

Department of the Treasury Internal Revenue Service Name of the organization

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

n.	Open to Public Inspection					
Employer identification number						

OMB No. 1545-0047

NATURE AND CULTURE I	NTERNATIONA	L		33-07735					
Part I General Informat on Form 990, Par	<b>ion on Activiti</b> t IV, line 14b.	es Outside th	e United States. Complet	te if the organizatio	n answered 'Yes'				
1 For grantmakers. Does the the grantees' eligibility for	1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No								
2 For grantmakers. Describe in United States. PART		zation's procedures	s for monitoring the use of its gra	ints and other assistance	outside the				
3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)									
(a) Region	<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region				
					PT V PT V				
(1) NORTH AMERICA	1	9	GRANTS		226,074.				
(2) SOUTH AMERICA	13	223	GRANTS		716,752.				
(3) SOUTH AMERICA			PROGRAM SERVICES	CONSERV/MGT OF AREA	1,964,410.				
(4) SOUTH AMERICA			PROGRAM SERVICES	COMMUNITY DEVELOPMENT	1,510,012.				
(5) SOUTH AMERICA			PROGRAM SERVICES	SCIENCE	130,627.				
(6)			ODY						
(7)									
(8)									
(9)									
<u>(10)</u>									
(11)									
(12)									
(13)									
<u>(14)</u>									
(15)									
(16)									
(17)									
3 a Subtotal	14	232			4,547,875.				
<b>b</b> Total from continuation sheets to Part I									
<b>c</b> Totals (add lines 3a and 3b)	14	232			4,547,875.				

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

#### Schedule F (Form 990) 2021 NATURE AND CULTURE INTERNATIONAL

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	<b>(e)</b> Amount of cash grant	<b>(f)</b> Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
				CONSERVATI					
			NORTH AMERICA	ON/MGMT	226,073.	WIRE			
				CONSERVATI					
			SOUTH AMERICA	ON/MGMT	322,256.	BNK TRANSFER			
				CONSERVATI					
			SOUTH AMERICA	ON/MGMT	34,400.	WIRE			
				CONSERVATI					
			SOUTH AMERICA	ON/MGMT	360,096.	WIRE			
					-1				
				cC	rq				
2	Enter total number of recipient organi organi by the IRS, or for which t	zations listed above t	hat are recognized	as charities by t	L he foreign country, equivalency letter	recognized as a t	ax exempt 501(c)(	3)	0
	Enter total number of other organizati							▶_	4
BAA								Schedule F	4 (Form 990) 2021

Page 2

#### Schedule F (Form 990) 2021 NATURE AND CULTURE INTERNATIONAL

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	<b>(b)</b> Region	(c) Number of recipients	(d) Amount of cash grant	<b>(e)</b> Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	<b>(h)</b> Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)			COL				
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18) BAA							(Form 990) 2021

33-0773524

Schedule	F (Form 990) 2021 NATURE AND CULTURE INTERNATIONAL	33-0773524	Page 4
Part IV	Foreign Forms		
orga	the organization a U.S. transferor of property to a foreign corporation during the tax year? If 'Yes,' the anization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign poration (see Instructions for Form 926).	Yes	X No
2 Did	the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be		

2	required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471).	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621).	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865).	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If 'Yes,' the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

TEEA3505L 10/28/21

Schedule F (Form 990) 2021



#### Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

#### PART I, LINE 2 - GRANTMAKERS EXPLANATION FOR MONITORING USE OF FUNDS OUTSIDE US

NATURE AND CULTURE INTERNATIONAL REQUIRES ALL GRANT RECIPIENTS TO SUBMIT COMPLETE

NARRATIVE AND FINANCIAL REPORTS TO ACCOUNT FOR ALL FUNDS GRANTED.

#### PART I, LINE 3F - METHOD OF ACCOUNTING

NATURE AND CULTURE INTERNATIONAL USES THE ACCRUAL BASIS OF ACCOUNTING IN ACCORDANCE

WITH ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA.

#### PART I, LINE 3F - INVESTMENTS & EXPENDITURES PER REGION

NATURE AND CULTURE USES THE ACCRUAL BASIS OF ACCOUNTING FOR EXPENDITURES IN ALL

REGIONS IN ACCORDANCE WITH ACCOUNTING PRINCIPLES GENERALLY ACCEPTED IN THE UNITED STATES OF AMERICA.



#### SCHEDULE M (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047 2021

Complete if the organizations answered 'Ye	s' on Form 990, Part IV, lines 29 or 30.
--	--

► Attach to Form 990.

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

**Open to Public** Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

1

#### NATURE AND CULTURE INTERNATION Part I Types of Property

Art – Works of art .....

JAL			33-0773524				
	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts			

2	Art – Historical treasures							
3	Art – Fractional interests.							
4	Books and publications.							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities – Publicly traded	Х	5	164,508.	FMV			
10	Securities – Closely held stock							
11	Securities – Partnership, LLC, or trust interests .							
12	Securities – Miscellaneous							
13	Qualified conservation contribution – Historic structures							
14	Qualified conservation contribution – Other							
15	Real estate – Residential							
16	Real estate – Commercial							
17	Real estate – Other.							
18	Collectibles.							
19	Food inventory.							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other► ()							
26	Other► ()							
27	Other► ()							
28	Other ► ( )							
29	Number of Forms 8283 received by the organization du							
	organization completed Form 8283, Part V, Donee	Acknowle	dgement		29			
							Yes	No
30a	During the year, did the organization receive by contril							
	it must hold for at least three years from the date							
	for exempt purposes for the entire holding period?					30 a		Х
	If 'Yes,' describe the arrangement in Part II.							
	Does the organization have a gift acceptance polic				ns?	31	Х	
32a	Does the organization hire or use third parties or r contributions?					32 a		Х
b	If 'Yes,' describe in Part II.							

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) 2021

33-0773524 Page 2 Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.



#### 

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

OMB No. 1545-0047	
2021	

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

NATURE AND CULTURE INTERNATIONAL

33-0773524

#### FORM 990, PART VI, LINE 2 - BUSINESS OR FAMILY RELATIONSHIP OF OFFICERS, DIRECTORS, ETC.

DURING THE YEAR 2 BOARD MEMBERS (DAVID & ANN WELBORN) WERE RELATED BY MARRIAGE.

DAVID WELBORN RESIGNED IN SEPTEMBER 2021.

#### FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

REVIEWED BY BOARD BEFORE FILING.

### FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

THE BOARD IS ASKED REGULARLY TO DISCUSS THEIR BUSINESS AND PERSONAL INTERESTS TO DETERMINE IF THERE ARE POTENTIAL CONFLICTS AND ALL TRANSACTIONS OF THE ORGANIZATIONS ARE REVIEWED FOR ANY POTENTIAL CONFLICTS OF INTEREST.

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT THE COMPENSATION PROCESS FOR THE EXECUTIVE DIRECTOR AND OTHER KEY EMPLOYEES IS DETERMINED BY NON-PROFIT PAY RATE DATA THAT IS COMPILED FROM WEBSITES AND BY NON-PROFIT COORDINATING AGENCIES. THE PAY RANGE IS SET BY COMPENSATION RATES FOR COMPARABLE POSITIONS FOR NON-PROFIT ORGANIZATIONS IS THE REGION OF HIRE. OTHER FACTORS CONSIDERED INCLUDE: TRAINING, EXPERIENCE, PAST PERFORMANCE AND PERFORMANCE EVALUATIONS.

# FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APPROVAL PROCESS - OFFICERS & KEY EMPLOYEES

THE COMPENSATION PROCESS FOR THE EXECUTIVE DIRECTOR AND OTHER KEY EMPLOYEES IS DETERMINED BY NON-PROFIT PAY RATE DATA THAT IS COMPILED FROM WEBSITES AND BY NON-PROFIT COORDINATING AGENCIES. THE PAY RANGE IS SET BY COMPENSATION RATES FOR COMPARABLE POSITIONS FOR NON-PROFIT ORGANIZATIONS IS THE REGION OF HIRE. OTHER FACTORS CONSIDERED INCLUDE: TRAINING, EXPERIENCE, PAST PERFORMANCE AND PERFORMANCE EVALUATIONS.

#### FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

THE ORGANIZATION'S ANNUAL REPORT, AUDITED FINANCIAL STATEMENTS AND FORM 990'S ARE

Schedule O (Form 990) 2021	Page
Name of the organization	Employer identification number
NATURE AND CULTURE INTERNATIONAL	33-0773524

# FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE (CONTINUED)

SITES SUCH AS GUIDESTAR.ORG. OTHER GOVERNING DOCUMENTS ARE AVAILABLE UPON REQUEST.



Form 4	4562
--------	------

# Depreciation and Amortization (Including Information on Listed Property)

tax retu

Department of the Treasury

(99)

Attach to your tax return.	
Go to www.irs.gov/Form4562 for instructions and the latest information.	

2021 Attachment Sequence No. 179

Name(s) shown on return						Identifying number
NATURE AND CULTURE		AL				33-0773524
Business or activity to which this form rela	les					
FORM 990/990-PF	· · · · · · · · · · · · · · ·		Hans 170			
Part I Election To Exp	ny listed property	Property Under Sec , complete Part V before	vou complete l	Part I		
1 Maximum amount (see ins			· · ·			1
2 Total cost of section 179 p	•				÷	2
3 Threshold cost of section			•		÷	3
4 Reduction in limitation. Su						4
5 Dollar limitation for tax ye						
separately, see instruction						5
<u>6</u> (a)	Description of property		(b) Cost (busines	s use only)	(c) Elected cost	
7 Listed property. Enter the						
8 Total elected cost of section						8
<ul><li>9 Tentative deduction. Ente</li><li>10 Carryover of disallowed de</li></ul>						9 10
11 Business income limitation						11
12 Section 179 expense dedu						12
13 Carryover of disallowed de					L	
Note: Don't use Part II or Part I	II below for listed	property. Instead, use P	art V.			<u></u>
Part II Special Deprec	iation Allowan	ce and Other Depre	ciation (Don'	t include lis	sted property. Se	ee instructions.)
14 Special depreciation allow						
tax year. See instructions						14
15 Property subject to section					-	15
16 Other depreciation (includ	ing ACRS)					<b>16</b> 55,217
		clude listed property. Se				· · · ·
		Sectio				
17 MACRS deductions for as	sets placed in serv	vice in tax years beginni	ng before 2021.			17
18 If you are electing to grou asset accounts, check her	p any assets place	ed in service during the	tax year into or	e or more	general 👝	
		in Service During 2021				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) Conventio	(f)	(g) Depreciation deduction
19 a 3-year property		. ,				
<b>b</b> 5-year property						
c 7-year property						
<b>d</b> 10-year property						
e 15-year property						
f 20-year property	-					
<b>g</b> 25-year property			25 yrs		S/L	
<b>h</b> Residential rental			27.5 yrs	MM	S/L	
property			27.5 yrs	MM	S/L	
i Nonresidential real	1		39 yrs	MM	S/L	
property			1	MM	S/L	
		n Service During 2021 T	ax Year Using t			n System
20 a Class life					S/L	
<b>b</b> 12-year.	-		12 yrs	1	S/L	
<b>c</b> 30-year			30 yrs	MM	S/L	
<b>d</b> 40-year.			40 yrs	MM	S/L	
Part IV Summary (See in		<u> </u>	<u>4</u> -			1
21 Listed property. Enter am						21
22 Total. Add amounts from line 1	2. lines 14 through 17.	lines 19 and 20 in column (a).	and line 21. Enter h	ere and on		
the appropriate lines of your retu 23 For assets shown above a	rn. Partnerships and S	corporations - see instruction		<u></u>		<b>22</b> 55,217
the portion of the basis at				23		

BAA For Paperwork Reduction Act Notice, see separate instructions.

OMB No. 1545-0172

At	tach	to	your
 	662	£	1

Internal I	Revenu	e S	ervice
Nomo(c)	chown	on	roturn