EXTENDED TO MAY 16, 2022

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

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service

A For the 2020 calendar year, or tax year beginning

▶ Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990 for instructions and the latest information. and ending JUN 30, 2021 JUL 1, 2020

Open to Public

B (a)	Check if pplicable:	C Name of organization		D Employer identific	cation number		
77							
A	Address change Name change			47-42377	<i>1</i> O		
	□Initial	Doing business as	D / it -				
	return □Fiṇal ,	Number and street (or P.O. box if mail is not delivered to street address) PO BOX 498	Room/suite	E Telephone number 916-217-			
	□return/ termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	668,785.		
	Amende			H(a) Is this a group re			
	⊒return □Applica-			for subordinates			
	pending	SAME AS C ABOVE		H(b) Are all subordinates in			
<u></u>	Гах-ехег	mpt status: \square 501(c)(3) \square 501(c) (4) \blacktriangleleft (insert no.) \square 4947(a)(1)	or 527	1	list. See instructions		
		: ► WWW.NSACTION.US	0, 02,	H(c) Group exemption			
		rganization: X Corporation Trust Association Other	L Year		State of legal domicile: CA		
		Summary					
		riefly describe the organization's mission or most significant activities: TO A	DVANCE	A CIRCULAR	ECONOMY.		
Governance		,					
rna	2 0	heck this box 🕨 🔲 if the organization discontinued its operations or dispo	sed of more	than 25% of its net as	sets.		
ove.	1			3	13		
Ğ	1	lumber of independent voting members of the governing body (Part VI, line 1b)			13		
S S		otal number of individuals employed in calendar year 2020 (Part V, line 2a)			2		
Ϋ́Ε̈́		otal number of volunteers (estimate if necessary)			0		
Activities &		otal unrelated business revenue from Part VIII, column (C), line 12			0.		
٩		let unrelated business taxable income from Form 990-T, Part I, line 11			0.		
				Prior Year	Current Year		
Φ	8 C	ontributions and grants (Part VIII, line 1h)		284,242.	620,280.		
'n	1	rogram service revenue (Part VIII, line 2g)		39,101.	48,478.		
Revenue	10 Ir	ovestment income (Part VIII, column (A), lines 3, 4, and 7d)		42.	27.		
<u> </u>		other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0.	0.		
	12 T	otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		323,385.	668,785.		
	13 G	rants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.		
	14 B	enefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
es		alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		198,557.	242,049.		
)SU	16a P	rofessional fundraising fees (Part IX, column (A), line 11e)		0.	0.		
Expenses	b T	otal fundraising expenses (Part IX, column (D), line 25)	20.				
Ш	17 C	ther expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		137,446.	190,548.		
	18 T	otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		336,003.	432,597.		
	19 R	evenue less expenses. Subtract line 18 from line 12		-12,618.	236,188.		
s or			Ве	ginning of Current Year	End of Year		
Net Assets Fund Balanc	20 T	otal assets (Part X, line 16)		27,609.	257,159.		
ad As	21 T	otal liabilities (Part X, line 26)		23,282.	16,644.		
		et assets or fund balances. Subtract line 21 from line 20		4,327.	240,515.		
		Signature Block					
	-	ies of perjury, I declare that I have examined this return, including accompanying schedule			/ knowledge and belief, it is		
true,	, correct,	and complete. Declaration of preparer (other than officer) is based on all information of w	hich preparer	has any knowledge.			
		Signature of officer		 Date			
Sig		•	_	Date			
Her	e	HEIDI SANBORN, EXECUTIVE DIRECTOR Type or print name and title	$\overline{}$				
				Date Check	X PTIN		
Posid							
		Firm's name JEAN B FOSTER CPA Firm's address 5150 SUNRISE BLVD, SUITE E-1		Firm's EIN			
USE	Only	FAIR OAKS, CA 95628		Dhono no Q1	6.712.4319		
<u> </u>	. 46 - 154	-		— Prione no. 91			
iviay	tne IR	S discuss this return with the preparer shown above? See instructions			X Yes No		

Pa	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Part III
1	Check if Schedule O contains a response or note to any line in this Part III
•	TO ADVOCATE FOR A CIRCULAR & EQUITABLE ECONOMY.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes X No
	prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
Ü	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$342,930 • including grants of \$) (Revenue \$48,478 •)
	IN OUR FIFTH YEAR OF OPERATIONS, NSAC CARRIED ON THESE MAJOR CAMPAIGNS:
	1) SPONSORED SB 343 WHICH WAS SIGNED INTO LAW TO DEFINE WHAT IS
	RECYCLABLE IN CALIFORNIA;
	2) ASSISTANCE TO STATE AND LOCALITIES LOOKING AT IMPLEMENTING EPR
	POLICIES;
	3) EXPANDING THE "REFUEL YOUR FUN" CAMPAIGN TO WASHENAW MICHIGAN;
	4) DEVELOPMENT OF SB 212 REGULATIONS FOR EPR FOR MEDS/SHARPS IN
	CALIFORNIA;
	5) CO-SPONSORING AND PASSING AB 818 FOR LABELING "FLUSHABLE" WIPES AND
	PUBLIC EDUCATION REGARDING SAME; 6) WORKING TO SUCCESSFULLY GET AB 818 INTRODUCED INTO CONGRESS;
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
40	(Code:) (Expenses \$) (Revenue \$)
4c	(Code:) (Expenses \$
1-1	Other pregram continue (Describe on Schodule O.)
4d	,
4e	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses ▶ 342,930.
	Form 990 (2020)

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1		X
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			,,
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			37
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			37
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	_		₩.
_	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			.
40	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40		x
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		x
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	Ha		
b	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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	11d		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		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	11f		Х
12a	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	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
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			37
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			Х
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	40		Х
10	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		
19		19		х
20a	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	_00		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
		_		

032003 12-23-20

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		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			3,7
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			.
00	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
21	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?//			
	"Yes," complete Schedule L, Part IV	28c		X
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? If "Yes," complete Schedule M	30		X
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			X
	Schedule N, Part II	32		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			х
34	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	33		
U-T	Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	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		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
Da	Note: All Form 990 filers are required to complete Schedule 0 It V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
4.	Enter the number reported in Box 2 of Form 1006. Fator 0, if not applicable		Yes	No
ıa b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 5 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 5			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
J	(gambling) winnings to prize winners?	1c	х	

032004 12-23-20

Form 990 (2020) NATIONAL STEWARDSHIP ACTION COUNCIL Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

2a 1				Yes	No
b If a least one is reported on line 2a, did the organization file all required federal employment tax returns? Notes if the sum of lines is and 2a is greater than 250, you may be required to e-file (see instructions) 3a Did the organization have unrelated business gross income of \$1,000 or more during they sear? 3b If Yes, 1 has it filed a Form 980-Tire this year? If 170-Tire file 3b, provide an explanation on Schedule 0 3b If Yes, 2 has it filed a Form 980-Tire this year? If 170-Tire file 3b, provide an explanation on Schedule 0 3c If Yes, 2 has it filed a Form 980-Tire this year? If 170-Tire file 3b, provide an explanation on Schedule 0 3c If 179-Tire file 3b, 200-Tire file 3b,	2a				
Note: If the sum of lines 1s and 2s is greater than 250, you may be required to e-file (see instructions) 3 Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 Did If Yes, "has it filed a Form 990-T for this year? If "No" to line 8b, provide an explanation on Schedule 0 3 Did If Yes," has it filed a Form 990-T for this year? If "No" to line 8b, provide an explanation on Schedule 0 3 Did If Yes, "series the name of the foreign country [such as a bank account; securities account, or other financial accounts? 4 Dif If Yes, "enter the name of the foreign country [such as a bank account; securities account, or other financial accounts? 5 Did was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5 Did any taxable party notify the organization that it was or is a party to a prohibited stax shelter transaction? 5 Did any taxable party notify the organization that it was or is a party to a prohibited stax shelter transaction? 5 Did Did any taxable party notify the organization that it was or is a party to a prohibited stax shelter transaction any contributions that were not tax deductible as charitable contributions? 6 Did any contributions that may receive deductible as charitable contributions? 7 Did If Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 8 Did If Yes, and the organization notity the donor of the value of the goods or services provided? 7 Did the organization stead a party in access of 37s made party as a contribution and party for goods and services provided to the payer? 7 Did the organization stead a payment in access of 37s made party as a contribution and party for goods and services provided to the payer? 7 Did the organization service a payment in access of 37s made party as a contribution or the value of the payor to which it was required to 10 if Yes, if inclinate the number of Forms 8282 filed during the		filed for the calendar year ending with or within the year covered by this return 2a 2			
3a Dit the organization have unrelated business gross income of \$1,000 or more during the year? 4b If 1'Yes', has if tilled a Form 9807 for this year of 1'Wo' to fire 8b, your ownive an explanation on Schedule O. 4c At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial accountly a foreign country (such as a bank account, provide an explanation on Schedule O. 5c If 1'Yes' to the the name of the foreign country. 5c If 1'Yes' to the Sar oSb, did the foreign country (such as a bank account, or other financial account)? 5c If 1'Yes' to the Sar oSb, did the foreign country (such as a bank account, or other financial account)? 5c If 1'Yes' to the Sar oSb, did the organization for Foreign Bank and Financial Accounts (FBAF). 5c If 1'Yes' to line Sar oSb, did the organization the Form 88867 c. 6c If 1'Yes' to line Sar oSb, did the organization the Form 88867 c. 6c If 1'Yes', did the organization that It was or is a party to a prohibited tax shelter transaction? 6c If 1'Yes', did the organization that It was or is a party to a prohibited tax shelter transaction? 6c If 1'Yes', did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Obstance that may receive deductible contributions under section 170(c). 8c If 1'Yes', did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 9c If 1'Yes', indicate the number of forms 8882 filed during the year organization sell, exchange, or otherwise dispose of tangitie personal property for which it was required to the Form 8887 and the organization organization and the sell of the organization organization and the sell of the organization organization and the sell of the organization in the Form 88807 and the sell of the organization organization and the sell of the organization in the Form 88807 and the sell of the organization organization and t	b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
b If Yes, "has it filed a Form 990 T for this year? If "No" to file 3b, provide an explanation on Schedule O 4a At any time during the calendar year, did the organization have an interest, in, or a signature or other authority over, a financial account? 4b If "Yes," enter the name of the foreign country Securities account, or other financial accounts (FBAR). 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c Was the organization a party to a prohibited tax shelter transaction? 6c Did any taxable party notify the organization file Form 888877. 6c Did was the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6c Did the organization that may receive deductible contributions an express statement that such contributions or gifts were not tax deductible? 7c Organizations that may receive deductible contributions under section 170(c). 8d Did the organization several payment in excess of \$15 made party as contribution and party for goods and services provided? 7c Did the organization express any expression and party for goods and services provided to the payor? 7d Did the organization receive a payment in excess of \$15 made party as contribution of party to a prohibition and party for goods and services provided to the payor? 7d Did the organization received an ocriticulation of care of tangible personal property for which it was required to tile Form 8282? 7d Did the organization received an ocriticulation of care of tangible personal property for which it was required to tile Form 8282? 7d Did the organization received an ocriticulation of payments, directly or indirectly, to pay permitters on a pers		Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
4a A any time during the calendary year, dot the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial accounts? b If "Yes," enter the name of the foreign country ▶ 5a Was the organization party to a prohibited tax whether transaction? 5b Was the organization that it was or is a party to a prohibited tax whether transaction? 5c If "Yes" to lie So or 5b, did the organization the ferm 88867? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible schariable contributions? 6b Were not tax deductible? 6c Organizations that may receive deductible contributions under section 170(c). a bid the organization stell were precised eductible contributions under section 170(c). a bid the organization stell, and the every solicitation an express statement that such contributions or gifts were not tax deductible? 6c If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c If the organization stell any receive deductible contributions under section 170(c). a bid the organization stell any receive deductible contributions under section 170(c). b If "Yes," did the organization include with the every solicitation and express statement that such contributions or gifts were not tax deductible of the value of the goods or services provided? 7b If "Yes," inclinate the number of Forms 8222 filed during the year to the Foreign 8282? 7c If If Yes, "Inclinate the number of Forms 8222 filed during the year to the Foreign 8282? 7c If If Yes, "Inclinate the number of Forms 8222 filed during the year to the Foreign 8283 as required? 7f If If the organization, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? 7r If If If the organization expected a	За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		Х
the interval of the contributions of the financial account, or other financial account)? b if 1'Yes, 'reter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5a Was the organization a party to a prohibited tax shefter transaction at any time during the tax year? 5b Did any taxable party notify the organization that it was or is a party to a prohibited tax shefter transaction at any time during the tax year. 5c I 'Yes' to line 5a or 5b, did the organization file Form 8886-17? 6c I 'Yes' to line 5a or 5b, did the organization file Form 8886-17? 6d Does the organization shall are not tax deductible as charitable contributions? 6d I'Yes', told the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organization start many receive deductible contributions under section 170(c). 8 Did the organization receive apament in excess of \$75 made party as a contribution of party for goods and services provided to the payor? 7 Did the organization received apament in excess of \$75 made party as a contribution of party for goods and services provided to the payor? 7 Did the organization received apament in excess of \$75 made party as a contribution of the value of the goods or services provided? 7 Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 Did the organization received as contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 8898 as required? 1 Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 899 as required? 1 Did the sponsoring organization make any taxable distributions under section 4986? 9 Sponsoring organization have excess business holdings at any time during the year? 9 Section 501(K)17 organizations. Enter: a initiation fees and capital contributio	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
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16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.			15		X
If "Yes," complete Form 4720, Schedule O.					v
	16		16		Λ
		If "Yes," complete Form 4720, Schedule O.	Гож	000	(0000)

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
		_	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	3		
	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.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 1	<u>3</u>		
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?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		X
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		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	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? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ►CA			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)	(3)s only	y) avai	lable
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's 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, a	and fina	ncial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	THE ORGANIZATION - 916-217-1109			
	PO BOX 498, W SACRAMENTO, CA 95691			

032006 12-23-20

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) 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.

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

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

(A) (B) (C					(D)	(E)	(F)			
Name and title	Average	Position (do not check more than one		Reportable	Reportable	Estimated				
	hours per		box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week (list any	_					Ė	from the	from related organizations	other compensation
	hours for	direc				pa		organization	(W-2/1099-MISC)	from the
	related	tee or	ustee			ensat		(W-2/1099-MISC)		organization
	organizations	al trus	onal tr		loyee	comp				and related
	below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) HEIDI SANBORN	40.00	=	_	0		工 む	ш.			
EXECUTIVE DIRECTOR		1		Х				100,488.	0.	0.
(2) DAVID STITZHAL	3.00									
PRESIDENT		Х		Х				0.	0.	0.
(3) TIM GONCHEROFF	2.00									
VICE PRESIDENT		Х		Х				0.	0.	0.
(4) PATTY GARBARINO	2.00									
TREASURER		Х		Х				0.	0.	0.
(5) CONSTANCE HORNING	2.00									_
SECRETARY		Х		Х				0.	0.	0.
(6) ERIC ZETZ	1.00									
DIRECTOR		Х						0.	0.	0.
(7) CHRIS RIPLEY	1.00									
DIRECTOR		Х						0.	0.	0.
(8) BOB GEDART	1.00									
DIRECTOR		Х						0.	0.	0.
(9) MAIA CORBITT	1.00								_	_
DIRECTOR		Х						0.	0.	0.
(10) BEVERLY HANSTROM	1.00									
DIRECTOR		Х						0.	0.	0.
(11) MICHAEL SIMPSON	1.00									
DIRECTOR	1 00	Х						0.	0.	0.
(12) RUBI RAJBANSHI	1.00	١							•	•
DIRECTOR	1 00	Х						0.	0.	0.
(13) NICHOLAS OLIVER	1.00								•	•
DIRECTOR		Х						0.	0.	0.
		1								
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Page 8

Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	/ees	, an	d Hi	ighe	st (Compensated Employe	es (continued)				
	(A)	(B)			•	C)			(D)	(E)			(F)	
	Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable			timate				
		hours per week	box	box, unless person is both an officer and a director/trustee)		· '	compensatio			nount (of			
		(list any	tor					Ė	from the	from related organization		l	other pensa	tion
		hours for	direc				pa			(W-2/1099-MIS			om the	
		related	stee o	rustee			ensat		(W-2/1099-MISC)			_ ~	anizati	
		organizations below	nal tru:	onal t		oloyee	oo mb						d relate	
		line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	ormer				orga	anizatio	JIIS
			=	=	0	×	Ξ 6	۳						
			1											
			-											
			-				-							
			-											
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			1											
			-											
							-							
			-											
1h	Subtotal					<u> </u>	1		100,488.		0.			0.
	Total from continuation sheets to Part VI								0.		0.			0.
	Total (add lines 1b and 1c)								100,488.		0.			0.
2	Total number of individuals (including but n								eceived more than \$100	,000 of reportab	le			
	compensation from the organization													1
											1		Yes	No
3	Did the organization list any former officer,	,	,	,		,	,	•	, , ,	,				v
4	line 1a? If "Yes," complete Schedule J for s											3		X
4	For any individual listed on line 1a, is the su and related organizations greater than \$150	-		-					•	the organization		4		Х
5	Did any person listed on line 1a receive or a									idual for services		_		
	rendered to the organization? If "Yes," com	•				,	,					5		Х
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest co										npens	ation 1	rom	
	the organization. Report compensation for	the calendar y	ear	endi	ng v	vith	or w	/ithi		year.				
	(A) Name and business	address	NT	INC					(B) Description of s	envices	C	(C	;) nsatio	า
	Name and Basiness		11/	2141					Becomplient of c	10111000		ompo	- Ioutioi	•
								\dashv						
	Total number of independent contractors (i	ncluding but n	ot li	mite	d to	tho	se li	ster	d above) who received n	nore than				
_	\$100,000 of compensation from the organi		111		0	(0 "							
												_	000	

Page 9

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) Revenuè éxcluded Related or exempt Unrelated Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c d Related organizations 1d e Government grants (contributions) 1e f All other contributions, gifts, grants, and 620,280. similar amounts not included above 1f 900 g Noncash contributions included in lines 1a-1f 620,280. h Total. Add lines 1a-1f **Business Code** 813312 44,753. 2 a HOUSEHOLD HAZARDOUS WA 44,753. Program Service Revenue 3,725. WEBINAR FEES 813312 3,725. С f All other program service revenue 48,478. g Total. Add lines 2a-2f Investment income (including dividends, interest, and 27. 27. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses ... 6b c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory 7a **b** Less: cost or other basis Other Revenue 7b and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$ contributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses _____ c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances **b** Less: cost of goods sold 10b c Net income or (loss) from sales of inventory **Business Code** 11 a d All other revenue e Total. Add lines 11a-11d 48,478. 668,785.

12 032009 12-23-20

Form **990** (2020)

Total revenue. See instructions

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respons	se or note to any line in	tnis Part IX		
	ot include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
7b, 8	Bb, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	100,488.	78,477.	18,232.	3,779
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	113,666.	88,768.	20,624.	4,274
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	3,595.		3,595.	
9	Other employee benefits	7,343.	5,535.	1,401.	407
10	Payroll taxes	16,957.	13,146.	3,173.	638
11	Fees for services (nonemployees):		-	-	-
	Management				
	Legal	9,596.	6,000.	3,596.	
	Accounting	14,470.	, , , , ,	14,470.	
	Lobbying	92,000.	92,000.		
	Professional fundraising services. See Part IV, line 17	7 - 7 - 7 - 7	,		
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25,				
9	column (A) amount, list line 11g expenses on Sch 0.)	18,158.	18,158.		
12	Advertising and promotion	20,200	20,200		
		5,577.	4,274.	1,096.	207.
	Office expenses	6,000.	4,597.	1,195.	208
	Information technology	0,000	173370	1/1/30	
16	Royalties	4,000.	2,426.	1,456.	118.
	Occupancy	736.	2, 120.	736.	110
17	Travel	750.		730.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	258.		258.	
	Conferences, conventions, and meetings	250.		250.	
20	Interest				
	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,543.		4,543.	
23	Other expanses, Itamiza expanses not covered	4,545.		=,J=J•	
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 0.) STAFF DEVELOPMENT/MEMBE	35,210.	29,549.	1,872.	3,789
a	DIVLL DEAGHOLHOWI\ WEWDE	33,410.	43,343.	1,0/4.	3,109
b					
С.					
d					
	All other expenses	122 507	342 020	76 247	12 /12
25	Total functional expenses. Add lines 1 through 24e	432,597.	342,930.	76,247.	13,420
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	1 7 7	I	I	l l	
	educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

orm 990 Dart Y	Balance Sheet	ONCIL	T /	423//40 Page 11
raitA	Check if Schedule O contains a response or note to any line in this Part X			
	Check if Schedule O Contains a response of note to any line in this Fart A	(A)	I I	(B)
		Beginning of year		End of year
1	Cash - non-interest-bearing	27,609.	1	254,484
2	Savings and temporary cash investments		2	
3	Pledges and grants receivable, net		3	
4	Accounts receivable, net		4	2,675
5	Loans and other receivables from any current or former officer, director,			
	trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons		5	
6	Loans and other receivables from other disqualified persons (as defined			
	under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
2 7	Notes and loans receivable, net		7	
7 8 8	Inventories for sale or use		8	
ž 9	Prepaid expenses and deferred charges		9	
10:	a Land, buildings, and equipment: cost or other			
	basis. Complete Part VI of Schedule D 10a			
	b Less: accumulated depreciation 10b		10c	
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)	27,609.	16	257,159
17	Accounts payable and accrued expenses	23,282.	17	16,644
18	Grants payable		18	
19	Deferred revenue		19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ദ്ര 22	Loans and other payables to any current or former officer, director,			
[trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons		22	
- 23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		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	23,282.	26	16,644
ام	Organizations that follow FASB ASC 958, check here ▶ X			
27 28 29 20 20 20 20 20 20 20 20 20 20 20 20 20	and complete lines 27, 28, 32, and 33.			
27	Net assets without donor restrictions	4,327.	27	90,515
28	Net assets with donor restrictions		28	150,000
Š	Organizations that do not follow FASB ASC 958, check here			
<u> </u>	and complete lines 29 through 33.			
29	Capital stock or trust principal, or current funds		29	
30	Paid-in or capital surplus, or land, building, or equipment fund		30	
31	Retained earnings, endowment, accumulated income, or other funds		31	0.10 = 1 =
32	Total net assets or fund balances	4,327.	32	240,515
33	Total liabilities and net assets/fund balances	27,609.	33	257,159

Pa	rt 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		8,7	
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,5	
3	Revenue less expenses. Subtract line 2 from line 1	3			88.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		4,3	<u> 27.</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	24	0,5	<u> 15.</u>
Pa	rt XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			Yes	No
_	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule				X
2a			2a		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	d on a			
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990 (2020)

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

Employer identification number 47-4237748

NATIONAL STEWARDSHIP ACTION COUNCIL FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS: 7) CALIFORNIA COMMISSION ON RECYCLING MARKETS AND CURBSIDE RECYCLING CHAIRING AND DEALING WITH PRESS AND LEGISLATORS. 8) WORKING TO GET A NATIONAL BOTTLE BILL INTRODUCED STARTING THE "END LITTER NOW" PAC TO SUPPORT A NATIONAL BOTTLE BILL AND HIRING LOBBYISTS AND A PUBLIC RELATIONS FIRM SHARING INFORMATION ON WEBINARS TO PROMOTE CAMPAIGNS ON CANNIBIS WASTE; BASEL CONVENTION ADDING PLASTICS, ORGANICS RECYCLING LEGISLATION UDPATE. THE ORGANIZATION CONDUCTED PRESENTATIONS IN PERSON AND VIA WEBINARS TO OVER 9,000 PEOPLE ALL OVER NORTH AMERICA AND HAS OVER 4,000 FOLLOWERS ON SOCIAL MEDIA. NSAC EXCHANGED IDEAS WITH OTHERS VIA MEMBERSHIPS WITH THE AMERICAN SUSTAINABLE BUSINESS COUNCIL AND GLOBAL PRODUCT STEWARDSHIP COUNCIL. WE WORKED WITH ENTITIES IN MAINE, MN, NY AND IL ON CARPET AND/OR PACKAGING AND PHARMACEUTICAL STEWARDSHIP AS WELL AS TRUTH IN LABELING LEGISLATION. WE WROTE ARTICLES PUBLISHED PUBLICATIONS SUCH AS CALMATTERS AND WAS QUOTED IN ARTICLES ON THE IN SUBJECT IN RESOURCE RECYCLING, WASTE DIVE, PLASTICS RECYCLING, WASHINGTON POST, AND MORE. IN ADDITION WE CONTINUE TO SHARE EPR INFORMATION VIA NEWSLETTERS, WEBSITE, SOCIAL MEDIA AND PRESENTATIONS AND DO FREQUENT PRESS INTERVIEWS ON THE SUBJECT OF PRODUCER RESPONSIBILTIY FOR THEIR PRODUCT WASTE MANAGEMENT. WE CONTINUE ALL THE LEGISLATIVE CAMPAIGNS AND PROGRAM CAMPAIGNS TO EXPAND NATIONALLY.

FORM 990, PART VI, SECTION A, LINE 4:

ARTICLES OF INCORPORATION WERE REVISED TO OFFICIALLY ELIMINATE NSAC'S

PREVIOUS AFFILIATION WITH THE CALIFORNIA PRODUCT STEWARDSHIP COUNCIL

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

Schedule O (Form 990 or 990-EZ) 2020

Name of the organization NATIONAL STEWARDSHIP ACTION COUNCIL	Employer identification number 47-4237748
(CPSC), A 501(C)(3) ORGANIZATION WHICH WAS PREVIOUSLY NAM	ED AS NSAC'S
DESIGNATOR.	
FORM 990, PART VI, SECTION B, LINE 11B:	
THE FORM 990 IS REVEIWED BY THE BOARD	
FORM 990, PART VI, SECTION B, LINE 12C:	
THE CONFLICT OF INTEREST POLICY IS REVIEWED ANNUALLY BY T	HE BOARD AND A
DISCLOSURE FORM IS COMPLETED BY EACH BOARD MEMBER AND KEY	EMPLOYEE.
FORM 990, PART VI, SECTION C, LINE 19:	
FORM 990 IS POSTED ON OUR WEBSITE. ALL OTHER DOCUMENTS AR	E AVAILABLE UPON
REQUEST.	