

Form 990-EZ Department of the Treasury Internal Revenue Service	Short Form Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundation) ▶ Do not enter Social Security numbers on this form as it may be made public. By law, the IRS generally cannot redact the information on the form. ▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990 .	OMB No. 1545-1150 <b style="font-size: 2em; color: green;">2015 Open to Public Inspection
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A For the 2015 calendar year, or tax year beginning 01-01-2015, and ending 12-31-2015

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization National Wilderness Stewardship Alliance</td> <td>D Employer identification number 30-0656123</td> </tr> <tr> <td>Number and street (or P. O. box, if mail is not delivered to street) PO Box 5293address)</td> <td>Room/suite</td> <td>E Telephone number (530) 680-2155</td> </tr> <tr> <td colspan="2">Reno, NV89513City or town, state or province, country, and ZIP or foreign postal code</td> <td>F Group Exemption Number. ▶</td> </tr> </table>	C Name of organization National Wilderness Stewardship Alliance		D Employer identification number 30-0656123	Number and street (or P. O. box, if mail is not delivered to street) PO Box 5293address)	Room/suite	E Telephone number (530) 680-2155	Reno, NV89513City or town, state or province, country, and ZIP or foreign postal code		F Group Exemption Number. ▶
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G Accounting Method: Cash Accrual Other (specify) ▶

I Website: ▶ www.wildernessalliance.org

H Check if the organization is **not** required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

J Tax-exempt status(check only one) - 501(c)(3) 501(c) () ◀(insert no.) 4947(a)(1) or 527

K Form of organization: Corporation Trust Association Other

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 48,293

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)			
		Check if the organization used Schedule O to respond to any question in this Part I <input checked="" type="checkbox"/>	
Revenue	1 Contributions, gifts, grants, and similar amounts received	1	27,861
	2 Program service revenue including government fees and contracts	2	20,432
	3 Membership dues and assessments	3	0
	4 Investment income	4	0
	5a Gross amount from sale of assets other than inventory	5a	0
	b Less: cost or other basis and sales expenses	5b	0
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0
	6 Gaming and fundraising events		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	0
	b Gross income from fundraising events (not including \$ 0 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	0
c Less: direct expenses from gaming and fundraising events	6c	0	
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	0	
7a Gross sales of inventory, less returns and allowances	7a	0	
b Less: cost of goods sold	7b	0	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0	
8 Other revenue (describe in Schedule O)	8	0	
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ▶	9	48,293	
Expenses	10 Grants and similar amounts paid (list in Schedule O)	10	20,157
	11 Benefits paid to or for members	11	0
	12 Salaries, other compensation, and employee benefits	12	0
	13 Professional fees and other payments to independent contractors	13	12,252
	14 Occupancy, rent, utilities, and maintenance	14	501
	15 Printing, publications, postage, and shipping	15	1,214
	16 Other expenses (describe in Schedule O)	16	11,584
17 Total expenses. Add lines 10 through 16 ▶	17	45,708	
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	2,585
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	15,823
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	0
	21 Net assets or fund balances at end of year. Combine lines 18 through 20 ▶	21	18,408

For Paperwork Reduction Act Notice, see the separate instructions.

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Part II Balance Sheets (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments.	21,209 22	52,908
23 Land and buildings.	0 23	0
24 Other assets (describe in Schedule O)	0 24	0
25 Total assets.	21,209 25	52,908
26 Total liabilities (describe in Schedule O).	5,386 26	34,500
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	15,823 27	18,408

Part III Statement of Program Service Accomplishments (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? The National Wilderness Stewardship Alliance promotes on-the-ground volunteer stewardship work on protected public lands and envisions each wilderness area within the NWPS adopted by a dedicated stewardship organization.

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

	Expenses (Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)	
28 NWSA Annual Gathering - NWSA hosted a four-day workshop with optional group stewardship trip in October 2015 to connect groups, volunteers, and agencies to share information and learn about developments in national wilderness stewardship policy and practice. (Grants \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	23,052
29 NWSA Group Stewardship - Worked with Forest Service to grant funds for education wilderness kiosk construction. Conducted workshops and facilitated meetings to form new groups, and mentor existing groups that are struggling. (Grants \$ 20,157) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	20,422
30 NWSA Communications - Developed tool kits and resource guides for stewardship organizations and land management agencies, and communicated job and training opportunities, and partnered regional groups to share resources. (Grants \$ 0) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	2,132
31 (Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	
32 Total program service expenses (add lines 28a through 31a)	32	45,606

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated - see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
See Additional Data Table				

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the

instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V

Form 990-EZ (2015) Part V Other Information. Questions 33-45b regarding political expenditures, loans, tax shelter, foreign accounts, and controlled entities. Includes input fields for amounts and dates, and Yes/No columns.

	Yes	No
46		
Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I.	46	No

Part VI Section 501(c)(3) organizations only
 All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51
 Check if the organization used Schedule O to respond to any question in this Part VI

	Yes	No
47 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	47	No
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	No
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	No
b If "Yes," was the related organization a section 527 organization?	49b	No

50 Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
NONE				

f Total number of other employees paid over \$100,000 ▶ 0

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
NONE		

d Total number of other independent contractors each receiving over \$100,000. ▶ 0

52 Did the organization complete Schedule A? **NOTE.** All Section 501(c)(3) organizations must attach a completed Schedule A ▶ Yes No

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

Sign Here	Signature of officer	2016-05-04
	Shaaron Netherton Board Member	Date
	Type or print name and title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶			
	Firm's address ▶	Phone no.			

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

Additional Data

Software ID:
Software Version:
EIN: 30-0656123
Name: National Wilderness Stewardship Alliance

Form 990-EZ, Special Condition Description:

Special Condition Description

Form 990EZ, Part IV - List of Officers, Directors, Trustees, and Key Employees

(a) Name and title		(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (If not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Darcy Shepard	Treasurer	8	0	0	0
Bill Hodge	Chair	2	0	0	0
Shaaron Netherton	Officer	4	0	0	0
Hawk Metheny	Officer	1	0	0	0
Andrew Downs	Officer	1	0	0	0
Celina Montorfano	Secretary	2	0	0	0
Adam Andis	Officer	1	0	0	0
Andrew Schurr	Officer	2	0	0	0
Randy Welsh	Vice Chair	6	0	0	0
Bob Hazelton	Officer	5	0	0	0
Doug Scott	Officer	5	0	0	0