Forms 990 / 990-EZ Return Summary

For calendar year 2024, or tax year beginning , and ending

Foundati	vironmental ion	L Education	65	-0270064	
Net Asset / Fund Balance at Beg	inning of Year				3,271,888
Revenue					
Contributions		4,449,863			
Program service revenue	_	815,582			
Investment income		815,582 17,741			
Capital gain / loss					
Fundraising / Gaming:					
Gross revenue					
Direct expenses					
Net income					
Other income		6,527			
Total revenue			5,289	<u>,713</u>	
Expenses					
Program services		1,993,333			
Management and general		195,133			
Fundraising		93,661			
Total expenses			2,282	<u>,127</u>	
Excess / (deficit)					3,007,586
Changes					
Changes					
Net Asset / Fund I	Balance at End of Y	ear		_	6,279,474
		ear		=	
Reconciliation of	Revenue			nciliation of E	xpenses
Reconciliation of otal revenue per financial statemen	Revenue	<u>3</u> Total	expenses per fin		xpenses
Reconciliation of otal revenue per financial statementess:	Revenue	3 Total Less:	expenses per fin		xpenses
Reconciliation of otal revenue per financial statementess: Unrealized gains	Revenue	3 Total Less:	expenses per fin onated services	ancial statemen	xpenses
Reconciliation of otal revenue per financial statementess: Unrealized gains Donated services	Revenue	3 Total Less: D	expenses per fin onated services rior year adjustme	ancial statemen	xpenses
Reconciliation of otal revenue per financial statementess: Unrealized gains Donated services Recoveries	Revenue	3 Total Less: D P	expenses per fin onated services rior year adjustmosses	ancial statemen	xpenses
Reconciliation of otal revenue per financial statementess: Unrealized gains Donated services Recoveries Other	Revenue	3 Total Less: D P Lu	expenses per fin onated services rior year adjustme	ancial statemen	xpenses
Reconciliation of otal revenue per financial statementess: Unrealized gains Donated services Recoveries Other	Revenue	3 Total Less: D P L C Plus:	expenses per fin onated services rior year adjustments osses ther	ancial statemen ents	xpenses
Reconciliation of otal revenue per financial statementess: Unrealized gains Donated services Recoveries Other lus: Investment expenses	Revenue	3 Total Less: D P Lu C Plus:	expenses per fin onated services rior year adjustment osses other	ancial statemen ents	xpenses
Reconciliation of otal revenue per financial statementess: Unrealized gains Donated services Recoveries Other us:	Revenue ts 5,289,71	3 Total Less: D P Lu C Plus:	expenses per fin onated services rior year adjustments osses ther	ancial statemen ents ses	xpenses ts 2,282,12
Reconciliation of otal revenue per financial statementess: Unrealized gains Donated services Recoveries Other us: Investment expenses Other	Revenue	3 Total Less: D P Lu C Plus:	expenses per fin onated services rior year adjustment osses other	ancial statemen ents ses	xpenses ts 2,282,12
Reconciliation of otal revenue per financial statementess: Unrealized gains Donated services Recoveries Other us: Investment expenses Other	Revenue ts 5,289,71	3 Total Less: D P Lu C Plus:	expenses per fin onated services rior year adjustment osses other ovestment expense other Total expense	ancial statemen ents ses	xpenses ts 2,282,12
Reconciliation of otal revenue per financial statement ess: Unrealized gains Donated services Recoveries Other us: Investment expenses Other	Revenue ts 5,289,71 5,289,71 Beginning	3 Total Less: D P Li O Plus: In O S Balance S Ending	expenses per fin onated services rior year adjustment osses other ovestment expense other Total expense	ancial statemen ents ses	xpenses ts 2,282,12
Reconciliation of otal revenue per financial statementess: Unrealized gains Donated services Recoveries Other lus: Investment expenses Other	Revenue ts 5,289,71 5,289,71 Beginning 3,680,44	3 Total Less: D P Lu O Plus: In O S Balance Si Ending 4 6,905	expenses per fin onated services rior year adjustment osses other ovestment expense other Total expense	ancial statemen ents ses s per return	xpenses ts 2,282,12
Reconciliation of otal revenue per financial statementess: Unrealized gains Donated services Recoveries Other lus: Investment expenses Other Total revenue per return	Revenue ts 5,289,71 5,289,71 Beginning 3,680,44 408,55	3 Total Less: D P Lo O Plus: In O 3 Balance S Ending 4 6,905 6 626	expenses per fin onated services rior year adjustment osses other ovestment expense other Total expense heet , 587 , 113	ancial statemen ents ses s per return Differences	xpenses ts 2,282,12
Reconciliation of otal revenue per financial statement ess: Unrealized gains Donated services Recoveries Other fus: Investment expenses Other Total revenue per return Assets	Revenue ts 5,289,71 5,289,71 Beginning 3,680,44	3 Total Less: D P Lo O Plus: In O 3 Balance S Ending 4 6,905 6 626	expenses per fin onated services rior year adjustment osses other ovestment expense other Total expense heet , 587 , 113	ancial statemen ents ses s per return	xpenses ts 2,282,12
Reconciliation of otal revenue per financial statementess: Unrealized gains Donated services Recoveries Other lus: Investment expenses Other Total revenue per return Assets Liabilities	Revenue ts 5,289,71 5,289,71 Beginning 3,680,44 408,55 3,271,88	3 Total Less: D P Lo O Plus: In O 3 Balance S Ending 4 6,905 6 626	expenses per fin onated services rior year adjustment osses other ovestment expense other Total expense heet , 587 , 113	ancial statemen ents ses s per return Differences	xpenses ts 2,282,12
Reconciliation of otal revenue per financial statementess: Unrealized gains Donated services Recoveries Other lus: Investment expenses Other Total revenue per return Assets Liabilities	Revenue ts 5,289,71 5,289,71 Beginning 3,680,44 408,55 3,271,88	3 Total Less: D P C C Plus: In C C C Plus: In C C C C C C C C C C C C C C C C C C C	expenses per fin onated services rior year adjustment osses other ovestment expense other Total expense heet , 587 , 113	ancial statemen ents ses s per return Differences	xpenses ts 2,282,12

Form 8	453-TE	Tax Exe	empt Enti	ty Decla	aration a	nd \$	Signatur	e for	E-file	OMB No. 1545-0047
		For calenda	ır year 2024, or ta	x year beginn	ing		and ending			2024
Departmen	t of the Treasury		Forms 990, 990-	EZ, 990-PF,		L, 4720), 8868, 5227, <u>9</u>	5330, an		2024
Name of fil				<u> </u>				EIN or	SSN	<u> </u>
Reef	Environm	ental E	ducation							
	dation							65-	02700	064
	Type of R	eturn and F	Return Inform	nation				•		
Check the	box for the type o	f return being f	iled with Form 84	153-TE and e						
6a, 7a, 8a 6b, 7b, 8l below. Do	5330 filers may en a, 9a, or 10a below, b, 9b, or 10b, which o not complete mor	and the amount never is applicate than one line	nt on that line of ble, blank (do no in Part I.	the return be at enter -0-). If	ing filed with this you entered -0	s form v - on the	was blank, then e return, then e	leave lir nter -0- o	ne 1b , 2b , on the app	3b, 4b, 5b, blicable line
1a Forn	n 990 check here	· 🔼	b Total reve	enue, if any (Form 990, Pa	rt VIII,	column (A), II	ne 12)	. 1b	5,289,713
2a Forn	n 990-EZ check r	lere	b Total reve	Form 1120	(FOIIII 990-EZ,	line 9)		. 2D	
Ja Forn	n 1120-POL chec n 990-PF check h	nere	b Tay based	TOIIII I 120- Lon invoctr	nont incomo	(Eorm	000 DE Port		. 3D	
5a Forn	n 8868 check her	e								
6a Forn	n 990-T check he		h Total tax	Form 990-T	Part III line 4				6b	
7a Forn	n 4720 check her		b Total tax (Form 4720	Part III line 1	'')			7b	
8a Forn	n 5227 check her		b FMV of as	sets at end	of tax vear	Form !	5227. Item D)		8b	
9a Forn	n 5330 check her		b Tax due (Form 5330.	Part II. line 19)	s==: ,s		9b	
10a Forn	n 8038-CP check									
Part II			or Person S				,	,	,	
la in b☐ If ex	ontact the U.S. Trealso authorize the formation necessary a copy of this returned the electror (90-PF) (as specifical)	inancial instituti y to answer inco n is being filed nic disclosure c ly identified in	ons involved in t quiries and resolv with a state age onsent contained Part I above) to	he processing re issues relation ncy(ies) regulation di within this re the selected s	g of the electron ted to the paym ating charities a eturn allowing di state agency(ies	ic payn ent. s part c sclosur).	nent of taxes to of the IRS Fed/S e by the IRS of	receive State pro f this For	confident gram, I ce m 990/99	ertify that I 0-EZ/
Under per	nalties of perjury, I	declare that X	I am an officer	of the above	named entity or	la	m the person s	subject to	tax with	respect to
(name of								(EIN) _		,
knowledge of the ele to the IRS	have examined a dependence and belief, they a ctronic return. I constant to receive from the crocessing the return the constant to the constan	re true, correct, sent to allow n m the IRS (a) a	, and complete. I ny intermediate s an acknowledgen	further decla service providenent of receip	re that the amou er, transmitter, o	unt in P or electr	art I above is the onic return orig	ne amou inator (E	nt shown RO) to se	on the copy and the return
Sign						_Tr	easurer			
Here	Signature of officer	or person subj	ect to tax	Date		Title, if	applicable			
Part II	I Declaratio	n of Electro	onic Return (Originator	(ERO) and	Paid I	Preparer (se	e instr	uctions)	,
I declare I am only The entity be filed w Informatio have example.	that I have reviewed a collector, I am not officer or person sith the IRS to the confor Authorized IR mined the above rend complete. This I	d the above retot responsible fubject to tax wifficer or person as e-file Provide turn and accomp	urn and that the or reviewing the ill have signed the subject to tax, ares for Business apanying schedu	entries on Foreturn and on is form before and have follo Returns. If I alles and stater	rm 8453-TE are ly declare that t e I submit the re wed all other re um also the Paic nents, and, to the	completion	ete and correct n accurately refl will give a copy ents in Pub. 410 rer, under pena of my knowled	to the beliects the of all for 63, Modelities of pge and beliected	est of my data on t ms and in ernized e- erjury I de	he return. formation to File (MeF) eclare that I
	ERO's				Date		Check if	Check if		O's SSN or PTIN
ERO's	signature Maur	een S. Feng	gler CPA				also paid preparer X	self- employed	X I	201270054
Use	Firm's name (or yours if self-employed),	_Sull	ivan & F	engler				EII	۰ 6	5-0002115
Only	address, and ZIP code	3031	NE 22nd	Fort	Lauderd	a FI	33305	Ph	one no. 9	<u>54-561-2826</u>
	, they are true, cor	rect, and comp		of preparer is	based on all in		on of which the	prepare	r has any	
Paid	Print/Type preparer's	name		Preparer's signa	iture		[Date	Check if self-	PTIN
Preparei	-							1	employe	d 🔲 📗
Use Onl	Firm's name							Fin	m's EIN	
	Firm's address							Ph	one no.	0.170 77

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.

2024 Open to Public

OMB No. 1545-0047

Inter	rnal Rever	nue Service	Go to	www.irs.gov/Form990 for	instructions and	the latest i	nformation.		Inspection
Α	For th	e 2024 <u>cale</u>	endar year, or tax year begi		and ending				
В	Check if a	applicable: C N	Name of organization Reef	Environmental	Education		\neg	D Employe	r identification number
	Address	change	Found	dation					
ಠ	Name cha	ange	Doing business as						270064
님		, N	Number and street (or P.O. box if mail	is not delivered to street address	3)		Room/suite	E Telephone	e number
닏	Initial retu		PO Box 370246	and ZID or foreign to the transport				305-8	852-0030
Ш	Final retu terminated	d	City or town, state or province, country,						
П	Amended	L <u>.</u>	Key Largo	FL 33037				G Gross rec	ceipts\$ 5,289,713
H			Name and address of principal officer:				H(a) Is this a gro	un return for	subordinates Yes X No
Ш	Application	I	James P. Dalle	_				•	.
		:	15 Center Meet	_			H(b) Are all sub		
		7	<u>Wilmington</u>	DE_1	<u>9807 </u>		If "No,"	attach a list.	See instructions
<u>1</u>	Tax-exer	mpt status:	X 501(c)(3) 501(c) () (insert no.)	4947(a)(1) or	527	╛		
J	Website	: ww w	v.reef.org	_	_		H(c) Group exer	mption numb	er
ĸ	Form of	organization:	X Corporation Trust As	sociation Other		L Y	ear of formation: $oldsymbol{1}$	990	M State of legal domicile: DE
F	Part I	Sumr							
	1 E	Briefly descri	ibe the organization's missio	n or most significant act	ivities:				
e		•	hedule O	J					
a	'								
ern									
Governance	2 0	 Check this h	ox if the organization dis	continued its operations	or disposed of m	ore than 2	5% of its net a	ssets	
ত প্			oting members of the govern						10
	4	Number of in	ndependent voting members	of the governing hody (F	2)			4	10
Activities	7 '	Total numbo	r of individuals employed in	calandar voar 2024 (Part	t \/ line 22\			5	17
휹	5 -		er of volunteers (estimate if n						972
Ĭ	7-								
	/a	Total unrelati	ed business revenue from P	art viii, column (C), line					0
	D I	Net unrelated	d business taxable income fr	om Form 990-1, Part I, I	line 11	<u></u>	Prior Yea	. 7b	Current Year
	8 (Contributions	s and grants (Part VIII, line 1	h)		F	2,247		4,449,863
Revenue	9 6	Drogram con	vice revenue (Part VIII, line i	2g)			1,022		815,582
ě	10			,417	17,741				
Re	10 1	Othor roven	ncome (Part VIII, column (A), ue (Part VIII, column (A), line	, IIIIes 3, 4, and 70)		· · · · · · · · · · · · · · · · · · ·		,618	6,527
						II.	3,314		5,289,713
			e – add lines 8 through 11 (I				3,314	, 120	<u> </u>
			similar amounts paid (Part IX						0
	1 4- 6		d to or for members (Part IX,			· · · · · · · · · · · · · · · · · · ·	600	600	<u> </u>
benses	15 3	Salaries, oth	er compensation, employee	benefits (Part IX, column	n (A), lines 5–10)) · · · · · · · -	090	,698	829,195
ë	16a	Professional	fundraising fees (Part IX, co	olumn (A), line 11e)	02 661	 			0
Exp	. ~ '		sing expenses (Part IX, colu		93,661		1 270	770	1 450 030
	17 \	Other expens	ses (Part IX, column (A), line	es 11a-11d, 11f-24e)			1,379		1,452,932
			ses. Add lines 13-17 (must e		, line 25)		2,078		2,282,127
= 2	19	Revenue les	s expenses. Subtract line 18	trom line 12			1,235 Beginning of Curr		3,007,586 End of Year
Net Assets or	20 70 T	Total accets	(Part V line 16)			-	3,680		6,905,587
ASSE	20	Total liakilisi-	(Part X, line 16)			·····		,556	626,113
let /	2 21 S	ı olal ilabilitle Not cossts	es (Part X, line 26) or fund balances. Subtract line	0.01 from line 00			3,271		6,279,474
				e 21 from line 20			3,2/1	,000	0,2/3,4/4
_	Part II		ature Block						
			jury, I declare that I have exami plete. Declaration of preparer (of						f my knowledge and belief, it
·	ide, com	I	piete. Deciaration of preparer (o	ther than officer, is based to	on all information of	i willon prep	arer has any kin	I	
۵.		Oim of 1	#:						
Si	_	Signature of o		_	_			Date	
He	ere		P. Dalle Pazz	e Esq	Treas	urer			
		Type or print r							
		Preparer's nar	me	Preparer's signature	е		Date	Check	X if PTIN
Pai		Maureen S	S. Fengler CPA	Maureen S.	Fengler CPA		08/08/	25 self-em	
	eparer	Firm's name	Sullivan 8				Fi	rm's EIN	65-0002115
Us	e Only		3031 NE 2						
		I	Fort Laude	erdale FT.	33305		ا ا		954-561-2826

May the IRS discuss this return with the preparer shown above? See instructions

No

X Yes

Form	990 (2024) Reef Environm	mental Edu	cation	65-0270064	Page 2
Pa	art III Statement of Program				4.5
			nse or note to any li	ne in this Part III	X
1	Briefly describe the organization's mis	ssion:			

	• • • • • • • • • • • • • • • • • • • •				
2	Did the organization undertake any sig	gnificant program se	ervices during the year w	hich were not listed on the	
	prior Form 990 or 990-EZ?				Yes X No
	If "Yes," describe these new services	on Schedule O.			
3	Did the organization cease conducting	ı, or make significar	nt changes in how it cond	ducts, any program	
					Yes X No
	If "Yes," describe these changes on S				
4		•		e largest program services, as measured by e amount of grants and allocations to others	
	the total expenses, and revenue, if an			s amount or grams and anocations to others	>,
	the total expenses, and revenue, if an	y, for cach program	r service reported.		
4a	(Code:) (Expenses \$	1,993,333	including grants of\$) (Revenue \$)
	• • • • • • • • • • • • • • • • • • • •				
	• • • • • • • • • • • • • • • • • • • •				
	•				
4b	(Code:) (Expenses \$		including grants of\$) (Revenue \$)
	r / 7x				
	•				
	• • • • • • • • • • • • • • • • • • • •				
	•				

4c	(Code:) (Expenses \$		including grants of\$) (Revenue \$)
	I/A		3 3 4		
	•				
	• · · · · · · · · · · · · · · · · · · ·				
	•				
	Other program services (Describe on	Schedule O)			
TU	(Expenses \$	including grants	of\$) (Revenue \$)
4e	Total program service expenses	1,993,	333		, , , , , , , , , , , , , , , , , , ,

			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? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			37
	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)	,		v
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
U	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		х
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	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	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		X
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		X
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	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more			3,5
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more	44-		v
اہ	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
a	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
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	110		
	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? <i>If</i> "Yes," <i>complete</i>			
	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		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
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 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	40		v
47	assistance to 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	47		х
18	Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17		
10	Part VIII lines to and 992 If "Vos." complete Schodule C. Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	10		- 22
	If "Yes," complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a		X
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? If "Yes," complete Schedule I, Parts I and II	21		Х
			000	\ .

_Pa	art IV Checklist of Required Schedules (continued)		Vaa	N.
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	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		X
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		X
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a				
_	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?			3,5
	If "Yes," complete 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%	00		
27	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
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? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule			
20	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? <i>If</i>			
ч	"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
C	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	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 Schedule N, Part II	32		X
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		X
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		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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)? 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		X
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 on Schedule O for Part VI, lines 11b and			
_	19? Note: All Form 990 filers are required to complete Schedule O.	38	X	
Pa	art 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			<u> </u>
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
1a	* * * * * * * * * * * * * * * * * * * *			
b	"" "" "" "" "" "" "" "" "" "" "" "" ""			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and	10	x	

Form	990 (2024) Reef Environmental Education 65-0270	064		P	age 5
	rt V Statements Regarding Other IRS Filings and Tax Compliance (col				No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
	Statements, filed for the calendar year ending with or within the year covered by this return	2a 17			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax		2b	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Sche		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or or				
	a financial account in a foreign country (such as a bank account, securities account, or other fina		4a		Х
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Finance	cial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year	ır?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tra		5b		X
С	If "Voo" to line Fo or Fh. did the organization file Form 9996 T2		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and or	lid the			
	organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contril	butions or			
	gifts were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly	for goods			
	and services provided to the payor?		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which	it was			
	required to file Form 8282?		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal beneat	efit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit of	contract?	7 f		
g	If the organization received a contribution of qualified intellectual property, did the organization file	e Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	anization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maint				
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?)	9b		
10	Section 501(c)(7) organizations. Enter:	1 1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	_		
11	Section 501(c)(12) organizations. Enter:	1 1			
a	Gross income from members or shareholders	11a	_		
b	Gross income from other sources. (Do not net amounts due or paid to other sources				
4.0	against amounts due or received from them.)	[11b]	1,		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		425		
а			13a		
L	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which	405			
_	the organization is licensed to issue qualified health plans	13b			
C	Enter the amount of reserves on hand	13c	140		v
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a 14b		X
15	If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation on Sch</i>		140		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remarked payment(s) during the year?		4.5		v
	excess parachute payment(s) during the year?		15		X
16	If "Yes," see instructions and file Form 4720, Schedule N.	mont income?	46		v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investr	nent income?	16		X
17	If "Yes," complete Form 4720, Schedule O. Section 501(c)(21) organizations. Did the trust any disqualified or other person, engage in any	activities			
17	Section 501(c)(21) organizations. Did the trust, any disqualified or other person, engage in any that would result in the imposition of an excise tax under section 4951, 4952, or 4953?		17		
	If "Yes." complete Form 6069.		.,		

	art VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 throu	igh 7b below,	and	for a	"No
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes of	n Schedule (). See	instr	ruct
	Check if Schedule O contains a response or note to any line in this Part VI				_X
ec	ction A. Governing Body and Management				
				Yes	No
la	Enter the number of voting members of the governing body at the end of the tax year	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.	10			
b	Enter the number of voting members included on line 1a, above, who are independent	10	_		
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			v	
	any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct		2	X	
	supervision of officers, directors, trustees, or key employees to a management company or other person?		3		x
	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed	2	4		X
	Did the organization make any significant changes to its governing decements since the prior room 350 was med Did the organization become aware during the year of a significant diversion of the organization's assets?	•	5		X
	Did the ergonization have members or steelchelders?		6	х	
a	Did the organization have members of 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
	Did the organization contemporaneously document the meetings held or written actions undertaken during the ye		ving:		
ı	The governing body?		8a	X	
)	Each committee with authority to act on behalf of the governing body?		8b	X	
	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
)(ction B. Policies (This Section B requests information about policies not required by the Inte	<u>ernal Reven</u>	<u>ue C</u>		
				Yes	_
а	• • • • • • • • • • • • • • • • • • • •		10a		X
)	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	77	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	the form?	11a	X	
)	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		40-	v	
3	Did the organization have a written conflict of interest policy? If "No," go to line 13	to conflicts?	12a 12b	X	
•	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	e to confincts?	120		
•			12c	х	
	Did to the transfer of the tra		13	X	
	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?		14	X	
	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	х	
o	Other officers or key employees of the organization		15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.				
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement				
a	with a taxable entity during the year?		16a		X
а	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its				
a b	maticipation in initiative transfer and a contract and a contract to the following term to the contract and the				
a b	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the				i
)	organization's exempt status with respect to such arrangements?		16b		
,			16b		<u></u>

(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. $\boxed{\mathbf{X}}$ Own website $\boxed{}$ Another's website $\boxed{\mathbf{X}}$ Upon request $\boxed{}$ Other (explain on Schedule O)

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records.

Martha Klitzkie

Key Largo

98300 Overseas Hwy

305-852-0030

FL 33037

Form 990 (2	2024) Reef Environme	<u>ental Ed</u>	<u>ucation</u>	65-02	70064		Pa	age
Part VII	Compensation of Office	rs, Directors	, Trustees,	Key Employees,	Highest	Compensated	Employees,	and
	Independent Contractor	S						_
	Check if Schedule O cont	ains a respor	nse or note t	to anv line in this I	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, box 6 of 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.

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

(A) Name and title	(B) Average hours per week	box,	, unle	ss pei	tion more rson is	than one s both a r/trustee	ın	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	from the organization and related organizations
(1) Byron Bishop										
Trustee	2.00 0.00	$ \mathbf{x} $						0	o	0
(2) Marta Hilton Bo										
	2.00									
Chair	0.00	X		Х				0	0	0
(3) Janet Camp										
Vice Chair	2.00	$ \mathbf{x} $		х				•	_	0
(4) Anna DeLoach	0.00	^		Λ			\dashv	0	0	0
(+)Allia Delicacii	2.00									
Trustee	0.00	$ \mathbf{x} $						0	0	0
(5) Ned DeLoach										
	2.00									
Trustee/Co-Founder	0.00	X						0	0	0
(6) Tamsen DeWitt										
<u></u>	2.00							•		
Trustee	0.00	X						0	0	0
(7) James P. Dalle	Pazze Es	3 4								
Treasurer	0.00	$ \mathbf{x} $		х				0	0	0
(8) Mary McCombie P		22		21				<u> </u>		<u> </u>
(0,110.12)	2.00									
Secretary	0.00	x		Х				0	0	0
(9) Scott Heppell P										
	2.00							_	_	_
Trustee	0.00	X						0	0	0
(10)Chun Wright	2 00									
Trustee	2.00 0.00	$ \mathbf{x} $						0	0	0
(11)	0.00	^					\dashv	<u> </u>	<u> </u>	<u> </u>
· · · /										

	(A) Name and title	(B) Average hours per week	(do	not o	Pos check ess pe	c) ition more rson i	than of the state	one n an tee)	(D) Reportable compensation from the	(E) Reportable compensation from related	Est	(F) timated of oth	amount ier	
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/ 1099-NEC)	organizations (W-2/ 1099-MISC/ 1099-NEC)	or	from t ganizatio	he	S
(12)														
(13)														
(14)														
(15)														
(16)														
(17)														
(18)														
(19)														
1b c d	Subtotal	eets to Part VII	, Se	ctio	n A									
2	Total number of individuals (in reportable compensation from	including but no	t lim	ited					bove) who received more	than \$100,000 of				
3	Did the organization list any				truet	ا مم	kev (emr	ployee or highest compens	sated	[Yes	No
4	employee on line 1a? If "Yes For any individual listed on li organization and related organization	s," complete Sch ne 1a, is the su	<i>edul</i> m of	<i>le J</i> f rep	for s ortal	<i>uch</i> ole c	<i>indi</i> vomp	<i>idu</i> ens	alsation and other compensa	tion from the		3		X
5	individual	1a receive or a		 1e cc	 ompe	 ensa	tion	 fron	n any unrelated organization	on or individual		4		X
Sect	for services rendered to the ion B. Independent Contrac	organization? If	"Ye	s," c	omp	ete	Sche	edul	le J for such person			5		X
1	Complete this table for your compensation from the organ	five highest con									tax vear	-		
		(A) d business address	-	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			0			(B) tion of services	tur your		(C) mpensat	tion
								_						
2	Total number of independent received more than \$100,000									0				

Pa	rt V			of Revenue nedule O cor	ntains	a resp	onse or no	ote to any line in	this Part VIII		
						<u> </u>		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
& Ω											Sections 512-514
E a	1a	Federated cam	paign	S	1a						
تَ وَا	b	Membership du	ies		1b						
rts,	С	Fundraising even			1c						
اعَق	d	Related organiz			1d						
Si.	e	Government grants (contribut	ions)	1e						
달	ī	All other contributions and similar amounts r			1f	4,	449,863				
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions			1g	¢	152,051				
and	h	lines 1a-1f Total. Add lines						4,449,863			
		101011 7100 11110					Business Code				
ا بو	2a	Education	trip	s				663,298	663,298		
ΞŢ	b							47,190	47,190		
S M	C	Member Ser						44,498	44,498		
eve	d			: 				30,502	30,502		
Program Service Revenue	е	Conservati	on S	Science				26,494	26,494		
▔│	f	All other progra						3,600	3,600		
		Total. Add lines						815,582			
	3	Investment inco						-			
		other similar an	,	•	•	•		17,741	17,741		
	4	Income from inv			npt bor	nd proce	eds				
	5	Royalties			•						
				(i) Real			Personal				
	6a	Gross rents	6a								
	b	Less: rental expenses	6b								
	С	Rental inc. or (loss)	6c								
	d	Net rental incon	ne or	(loss)							
	7a	Gross amount from		(i) Securities	S	(i	i) Other				
		sales of assets other than inventory	7a								
ne	b	Less: cost or other									
len/		basis and sales exps.	7b								
Revenue	С	Gain or (loss)	7c								
	d	Net gain or (los	s)								
Other		Gross income from									
		(not including \$		J							
		of contributions re									
		1c). See Part IV, li			8a						
	b	Less: direct exp	ense		8b						
		Net income or (g ever	nts					
	9a	Gross income f	rom g	aming							
		activities. See F	art IV	′, line 19	9a						
	b	Less: direct exp			9b						
		Net income or (ctivities	3					
		Gross sales of									
		returns and allo	wanc	es	10a						
	b	Less: cost of go			10b						
		Net income or (vento	ry					
<u>s</u>							Business Code				
Miscellaneous Revenue	11a	Other						6,527	6,527		
lan enu	b										
e če	С										
Ξ	d	All other revenu	ле								
	е	Total. Add lines	s 11a-	-11d				6,527			
	12	Total revenue.	See	instructions				5,289,713	839,850	0	O

Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must co Check if Schedule O contains a respon			complete column (A).	
	not include amounts reported on lines 6b, 7b, Pb, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising 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				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)	760 605	621 150	04 666	F2 070
7	Other salaries and wages	769,695	631,150	84,666	53,879
8	Pension plan accruals and contributions (include				
•	section 401(k) and 403(b) employer contributions)				
9 10	Other employee benefits	59,500	48,790	6,545	4,165
11	Payroll taxes Fees for services (nonemployees):	39,300	1 0,790	0,010	±,103
	Management				
u h	Legal	2,614		2,614	
c	Accounting	22,295	8,918	4,459	8,918
d				-/	3/2=3
	Professional fundraising services. See Part IV, line 7				_
	Investment management fees				
	Other. (If line 11g amount exceeds 10% of line 25, column				
_	(A), amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	50,511	50,511		
13	Office expenses	116,806	94,814	612	21,380
14	Information technology				
15	Royalties				
16	Occupancy	40,839	30,252	10,477	110
17	Travel				
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	18,719	17,203	1 516	
22 23	Depreciation, depletion, and amortization	69,171	6,609	1,516 61,998	564
23 24	Insurance Other expenses. Itemize expenses not covered	09,111	0,009	01,990	J04
4	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.)				
а	Educational programs	848,226	831,728	16,498	
b	Contract labor	165,571	160,726	200	4,645
С	Interns	59,193	59,193		
d	Small equipment	26,602	26,602		
е	All other expenses	32,385	26,837	5,548	
25	Total functional expenses. Add lines 1 through 24e	2,282,127	1,993,333	195,133	93,661
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 her if				
	following SOP 98-2 (ASC 958-720)				
DAA					Form 990 (2024)

P	art 2	X Balance Sheet					
		Check if Schedule O contains a response or no	te to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			1,355,624	1	1,354,564
	2	Savings and temporary cash investments			265,947	2	481,739
	3	Pledges and grants receivable, net		3			
	4	Accounts receivable, net			176,188	4	264,799
	5	Loans and other receivables from any current or form	ner office	r, director,	•		•
		trustee, key employee, creator or founder, substantia					
		controlled entity or family member of any of these pe				5	
	6	Loans and other receivables from other disqualified					
κ		under section 4958(f)(1)), and persons described in				6	
Assets	7	Notes and loans receivable, net				7	
Ÿ	8	Inventories for sale or use			131,487	8	42,507
	9	Prepaid expenses and deferred charges			18,158	9	19,964
		Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	5,034,379			
	b	basis. Complete Part VI of Schedule D Less: accumulated depreciation	10b	292,365	1,730,290	10c	4,742,014
	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			2,750	15	
	16	Total assets. Add lines 1 through 15 (must equal lin	e 33)		3,680,444	16	6,905,587
	17	Accounts payable and accrued expenses			62,320	17	119,893
	18	Grants payable		18			
	19	Deferred revenue			346,236	19	506,220
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part I				21	
es	22	Loans and other payables to any current or former of					
Ħ		trustee, key employee, creator or founder, substantia					
Liabilities		controlled entity or family member of any of these pe				22	
_	1	Secured mortgages and notes payable to unrelated				23	
	24	Unsecured notes and loans payable to unrelated thin				24	
	25	Other liabilities (including federal income tax, payable					
		parties, and other liabilities not included on lines 17-2	24). Comp	olete Part X			
		of Schedule D			400 EEC	25	626 112
	26	Total liabilities. Add lines 17 through 25			408,556	26	626,113
es		Organizations that follow FASB ASC 958, check I	nere 🔼				
and	27	and complete lines 27, 28, 32, and 33. Net assets without donor restrictions			2,070,089	27	5,447,026
Bal	27 28				1,201,799	27 28	832,448
pu	20	Organizations that do not follow FASB ASC 958,	chock be	; 	1,201,199	20	032,110
₫		and complete lines 29 through 33.	CHECK HE	"-			
ō	29	Capital stock or trust principal, or current funds				29	
ets	30	Paid-in or capital surplus, or land, building, or equipment of the surplus or land, building, or equipment of the surplus or land, building, or equipment of the surplus of	nent fund			30	
\ss	31	Retained earnings, endowment, accumulated income				31	
Net Assets or Fund Balances	32				3,271,888	32	6,279,474
ž	33	Total liabilities and net assets/fund balances			3,680,444		6,905,587
	100	ויסומו וומטוווופיס מוזע דופו מסספנס/זעוזע טמומוזעפיס			J,000,444	JJ	- 000

Form **990** (2024)

Forn	n 990 (2024) Reef Environmental Education 65-0270064			Pag	<u>је 12</u>
Pa	art 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	5,28		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,28		
3	Revenue less expenses. Subtract line 2 from line 1	3	3,00		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,27	71,8	888
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			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	6,27	79,4	<u> 174</u>
Pa	art XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				$oxedsymbol{oxed}$
				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?		2a		X
	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	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				
	separate 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				
	the 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				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
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		3b		

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Employer identification number

Open to Public Inspection

Attach to Form 990 or Form 990-EZ.

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

Environmental Education

Foundation 65-0270064 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12d, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s) (i) Name of supported (iv) Is the organization (iii) Type of organization (v) Amount of monetary (vi) Amount of listed in your governing organization (described on lines 1-10 support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D) (E)

Page 2

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 Calendar year (or fiscal year beginning in) (a) 2020 **(b)** 2021 (c) 2022 (d) 2023 (e) 2024 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 649,705 1,390,932 1,097,024 2,247,232 4,449,863 9,834,756 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities 3 furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 649,705 1,390,932 1,097,024 2,247,232 4,449,863 9,834,756 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) Public support. Subtract line 5 from line 4 9,834,756 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2020 **(b)** 2021 (c) 2022 (d) 2023 (e) 2024 (f) Total Amounts from line 4 649,705 1,390,932 1,097,024 2,247,232 4,449,863 9,834,756 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from 844 10,924 38,417 17,741 67,990 similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 11 **Total support.** Add lines 7 through 10 9,902,746 Gross receipts from related activities, etc. (see instructions) 12 12 3,416,764 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 organization, check this box and stop here Section C. Computation of Public Support Percentage Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) 14 99.31% Public support percentage from 2023 Schedule A, Part II, line 14 15 99.60% 16a 33 1/3% support test — 2024. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 33 1/3% support test — 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test — 2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test — 2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

instructions _____

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						
Caler	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(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 tax-exempt purpose						
3	Gross receipts from activities 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						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
200	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9		(a) 2020	(b) 2021	(6) 2022	(u) 2023	(e) 2024	(I) Iolai
	Amounts from line 6						
l0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	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.)						
3	Total support. (Add lines 9, 10c, 11,						
	and 12.)			<u> </u>	<u> </u>	<u> </u>	
4	First 5 years. If the Form 990 is for the			-			
200	organization, check this box and stop he						<u> </u>
	tion C. Computation of Public S			aluma (f)		1 45	0/
5	Public support percentage for 2024 (line						%
6 Sec	Public support percentage from 2023 Sction D. Computation of Investm					16	%
7	Investment income percentage for 2024			12 column (f)		17	%
	Investment income percentage for 2024 Investment income percentage from 2023					40	%
∣8 ∣9a				nn line 14 and line			
Ja	17 is not more than 33 1/3%, check this						
b	33 1/3% support tests — 2023. If the o	_	_	•		_	
	line 18 is not more than 33 1/3%, check	-					
20	Private foundation. If the organization of	-	_	· ·		-	

Page 4

Part IV Supporting Organizations

(Complete only if you checked a box on 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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 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 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.
- **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.
- **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.
- 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.
- **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.
- 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.
- 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).
- **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?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 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 or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of 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).
- **8** Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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.
- **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.
- **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.
- 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.
 - **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.)

	Yes	No
1		
2		
3a		
3b		
20		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
35		
9с		
10a		
10b 	(Form 9	90) 2024

Schedule A (Form 990) 2024

	ule A (Form 990) 2024 Reef Environmental Education 65-027006	4		Page 5
Par	t IV Supporting Organizations (continued)			
11	Has the organization accepted a gift or contribution from any of the following persons?		Yes	No
	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		
b	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? <i>If</i> "Yes" to line 11a, 11b, or 11c,	110		
·	provide detail in Part VI.	11c		
Sect	ion B. Type I Supporting Organizations			
			Yes	No
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.	1		
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.	2		
Sect	ion C. Type II Supporting Organizations			
	71 11 5 5		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		
Sect	ion D. All Type III Supporting Organizations			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	organization's governing documents in effect on the date of notification, to the extent not previously provided? Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI			
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI			
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's			
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
3	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's	2		
3	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. ion E. Type III Functionally Integrated Supporting Organizations	2		
3 Sect	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	2		
3 <u>Sect</u> 1	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. ion E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below.	2 3		
3 <u>Sect</u> 1 a	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. ion E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction or the organization satisfied the Activities Test. Complete line 2 below.	2 3	ctions).	
Sect 1 a b c	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. ion E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction organization satisfied the Activities Test. Complete line 2 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	2 3		No
3 <u>Sect</u> 1 a b	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. ion E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction organization satisfied the Activities Test. Complete line 2 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see Activities Test. Answer lines 2a and 2b below.	2 3	ctions).	No
3 Sect 1 a b c	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. ion E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction organization satisfied the Activities Test. Complete line 2 below. The organization satisfied the Activities Test. Complete line 2 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see Activities Test. Answer lines 2a and 2b below. 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	2 3	ctions).	No
3 Sect 1 a b c	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. ion E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct. The organization satisfied the Activities Test. Complete line 2 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see Activities Test. Answer lines 2a and 2b below. Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations) 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,	2 3	ctions).	No
3 Sect 1 a b c	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. ION E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct.) The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see Activities Test. Answer lines 2a and 2b below. 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 each of its supported organizations, and how the organization determined	2 3	ctions).	No
3 Sect 1	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. ION E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct. The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see Activities Test. Answer lines 2a and 2b below. 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 each of its supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	3 ions).	ctions).	No
3 Sect 1 a b c	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. In E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct.) The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see Activities Test. Answer lines 2a and 2b below. 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 each of its supported organizations, and how the organization determined that these activities constituted substantially all of its activities that, but for the organization's	3 ions).	ctions).	No
3 Sect 1	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. Ion E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct. The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see Activities Test. Answer lines 2a and 2b below. 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 each of its supported organizations, and how the organization determined that these activities constituted substantially all of its activities. Did the activities described on line 2a, above, constitute activities that, but for the organization's line organization	2 ions). instruc	ctions).	No
3 Sect 1	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. In E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruct.) The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see Activities Test. Answer lines 2a and 2b below. 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 each of its supported organizations, and how the organization determined that these activities constituted substantially all of its activities that, but for the organization's	3 ions).	ctions).	No

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.

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.

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Sched	ule A (Form 990) 2024 Reef Environmental Education	on	65-0270	064 Page 6
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgan	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on	Nov.	20, 1970 (<i>explain in Part</i>	VI). See
	instructions. All other Type III non-functionally integrated supporting organizations r	nust c	complete Sections A throu	ıgh E.
Sect	ion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	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		
Sect	tion 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		
k	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	I 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		
Sect	tion 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	Distributable Amount. 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 integral	ed Ty	pe III supporting organiza	ation

Schedule A (Form 990) 2024

(see instructions).

Reef Environmental Education 65-0270064 Schedule A (Form 990) 2024 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D - Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 1 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 Amounts paid to acquire exempt-use assets Qualified set-aside amounts (prior IRS approval required—provide details in Part VI) 5 Other distributions (describe in Part VI). See instructions. 6 Total annual distributions. Add lines 1 through 6. 7 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. Distributable amount for 2024 from Section C, line 6 9 10 Line 8 amount divided by line 9 amount 10 (i) (ii) (iii) Section E - Distribution Allocations (see instructions) **Excess Distributions Underdistributions** Distributable Pre-2024 Amount for 2024 Distributable amount for 2024 from Section C, line 6 Underdistributions, if any, for years prior to 2024 (reasonable cause required-explain in Part VI). See instructions. 3 Excess distributions carryover, if any, to 2024 **a** From 2019 **b** From 2020 **c** From 2021 **d** From 2022 e From 2023 f Total of lines 3a through 3e **g** Applied to underdistributions of prior years h Applied to 2024 distributable amount i Carryover from 2019 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 4 Distributions for 2024 from Section D, line 7: a Applied to underdistributions of prior years **b** Applied to 2024 distributable amount c Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions. 6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2025. Add lines 3j and 4c. 8 Breakdown of line 7: a Excess from 2020. **b** Excess from 2021 c Excess from 2022 ... **d** Excess from 2023 e Excess from 2024

Schedule A (Form 990) 2024

Schedule A (For	rm 990) 2024	Reef	Environmental	Education	65-0270064	Page 8
Part VI	Supplemental III, line 12; Part B, lines 1 and 2 3a, and 3b; Part	Information. IV, Section A ; Part IV, Section IV, Section IV, Section IV, Iv	Provide the explanation in Provide the explanation in Provided A, lines 1, 26, 36, 4b, 26, 16, 16, 16, 16, 16, 16, 16, 16, 16, 1	ons required by Part II, 4c, 5a, 6, 9a, 9b, 9c, Section D, lines 2 and Frant V, Section D, li	, line 10; Part II, line 17a of , 11a, 11b, and 11c; Part IV d 3; Part IV, Section E, line nes 5, 6, and 8; and Part V formation. (See instructions	r 17b; Part /, Section s 1c, 2a, 2b, /,
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DAA Schedule A (Form 990) 2024

Schedule B

(Form 990) (Rev. December 2024)) Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Name of the organization

Employer identification number

Reef

Foundation	mental Education	65-0270064				
Organization type (check of	one):					
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule.	al Rule. See				
General Rule						
_	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totalion property) from any one contributor. Complete Parts I and II. See instructions for detrontributions.	_				
Special Rules						
regulations under se 16b, and that receiv	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ / ₃ % support actions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line d from any one contributor, during the year, total contributions of the greater of (1) \$ at on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and	ne 13, 16a, or 5,000; or				
contributor, during the literary, or education	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.					
contributor, during the contributions totaled during the year for a General Rule applies	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					
must answer "No" on Part I	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B V, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form eet the filing requirements of Schedule B (Form 990).					

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (Rev. 12-2024)

Page 1 of 1

age 2

Name of organization

Reef Environmental Education

Employer identification number 65-0270064

Part I	Contributors (see instructions). Use duplicate copies of	Part I if additional space i	s needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Jim and Judy Kewley 3460 Hill Circle Colorado Springs CO 80904	\$ 253,012	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Anonymous PO 370246 Key Largo FL 33037	\$ 138,706	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	Bob and Tammy DeWitt 1294eresford Court McClean VA 22101	\$ 140,005	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	Antonia Lenstra 1288 Ala Moana Blvd 28C Honolulu HI 96814	\$ 155,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	Michael J. Zupan & Anne Statham c/o Hershoff, Lupino Yagel LLP 88539 Oversea Hwy Taverier FL 33070	\$ 137,425	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	Walcott Henry 600 South US 1 310 Jupiter FL 33477	\$ 125,000	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Page 1 of 1

age 3

Name of organization

Reef Environmental Education

Employer identification number 65-0270064

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions.) 11 Atlantic Ave Key Laro ,FL 5 \$ **137,425** 11/22/24 (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I \$ (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions.) \$ (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions.) (a) No. (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions.) (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received (See instructions.) Part I

SCHEDULE D

(Form 990) (Rev. December 2024) Department of the Treasury Internal Revenue Service

Supplemental Financial Statements
Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization		Employer identification number
Reef Environmental Education		
Foundation		65-0270064
Part I Organizations Maintaining Donor Advised Complete if the organization answered "Yes"		or Accounts
	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing		
funds are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6 Did the organization inform all grantees, donors, and donor advisor	rs in writing that grant funds can be use	d
only for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose	
		Yes No
Part II Conservation Easements	5 000 D 1 N 1 1 7	
Complete if the organization answered "Yes"		
1 Purpose(s) of conservation easements held by the organization (cl	heck all that apply).	
Preservation of land for public use (for example, recreation or	education Preservation of a historical	lly important land area
Protection of natural habitat	Preservation of a certified	historic structure
Preservation of open space		
2 Complete lines 2a through 2d if the organization held a qualified or	onservation contribution in the form of a	conservation
easement on the last day of the tax year.		Held at the End of the Tax Year
a Total number of conservation easements		2a
b Total acreage restricted by conservation easements		2b
c Number of conservation easements on a certified historic structure	included on line 2a	2c
d Number of conservation easements included on line 2c acquired a		
on a historic structure listed in the National Register		2d
3 Number of conservation easements modified, transferred, released		
the organization during the tax year		
4 Number of states where property subject to conservation easemen	nt is located	
5 Does the organization have a written policy regarding the periodic	monitoring, inspection, handling of	
violations, and enforcement of the conservation easements it holds	s?	Yes No
6 Staff and volunteer hours devoted to monitoring, inspecting, handli	ing of violations, and enforcing	
conversation easements during the year		
7 Amount of expenses incurred in monitoring, inspecting, handling o		
conservation easements during the year		\$
8 Does each conservation easement reported on line 2d above satisf		
(i) and section 170(h)(4)(B)(ii)?		Yes No
9 In Part XIII, describe how the organization reports conservation ea	sements in its revenue and expense sta	atement and balance
sheet, and include, if applicable, the text of the footnote to the org	anization's financial statements that des	cribes the
organization's accounting for conservation easements.		
Part III Organizations Maintaining Collections of A		her Similar Assets
Complete if the organization answered "Yes"	on Form 990, Part IV, line 8.	
1a If the organization elected, as permitted under FASB ASC 958, not	t to report in its revenue statement and	balance sheet works
of art, historical treasures, or other similar assets held for public ex	xhibition, education, or research in further	erance of public
service, provide in Part XIII the text of the footnote to its financial s	statements that describes these items.	
b If the organization elected, as permitted under FASB ASC 958, to	report in its revenue statement and bala	ance sheet works of
art, historical treasures, or other similar assets held for public exhibit	bition, education, or research in furthera	nce of public service,
provide the following amounts relating to these items.		
(i) Revenue included on Form 990, Part VIII, line 1		\$
(ii) Appete included in Form COO Dort V		rh .
2 If the organization received or held works of art, historical treasure		ain, provide the
following amounts required to be reported under FASB ASC 958 re		•
a Revenue included on Form 990, Part VIII, line 1	_	\$
b Assets included in Form 990. Part X		\$

Sche	edule D (Form 990) (Rev. 12-2024) Reet	Environme	ntal Educa	ation	65-02	270064		Page 2
Pa	art III Organizations Maintaini	ng Collections of	of Art, Historica	I Treasures,	or Other S	imilar Ass	sets (co	ntinued)
3	Using the organization's acquisition, acceleration items (check all that apply).	ssion, and other reco	ords, check any of th	e following that	make significar	it use of its		
а	Public exhibition	d 🗌	Loan or exchange p	orogram				
b	Scholarly research	—	Other	-				
С	Preservation for future generations							
4	Provide a description of the organization'	s collections and exp	lain how they further	the organization	n's exempt pur	oose in Part		
·	XIII.	o componente ana oxp		o. gaa	. o onompt pan			
5	During the year, did the organization soli	cit or receive donation	ns of art historical tr	easures or othe	r similar			
•	assets to be sold to raise funds rather the						Yes	s ∏ No
Pa	art IV Escrow and Custodial		as part of the organiz	Eation's collection			103	
	Complete if the organizate 990, Part X, line 21.	•	es" on Form 990	, Part IV, line	9, or report	ed an amo	ount on	Form
10	Is the organization an agent, trustee, cus	tadian ar athar intern	andian, for contribution	ana ar athar aga	oto not			
ıa							□ vos	. — Na
	included on Form 990, Part X?	VIII					Yes	i ∐ No
D	If "Yes," explain the arrangement in Part	XIII and complete the	e following table.		ſ		Λ	
					-		Amount	
С	Beginning balance					1c		
d	Additions during the year					1d		
	Distributions during the year					1e		
f	Ending balance				l	1f		
	Did the organization include an amount of							_
	If "Yes," explain the arrangement in Part	XIII. Check here if the	e explanation has be	en provided in F	Part XIII			
Pa	art V Endowment Funds							
	Complete if the organizat	ion answered "Ye	es" on Form 990	<u>, Part IV, line</u>	10.			
		(a) Current year	(b) Prior year	(c) Two years b	oack (d) Thr	ee years back	(e) Four y	ears back
1a	Beginning of year balance							
b	Contributions							
	Net investment earnings, gains,							
	and losses							
d	Grants or scholarships							
	Other expenditures for facilities and							
	programs							
f	Administrative expenses							
	End of year balance							
2	Provide the estimated percentage of the	current vear end bala	nce (line 1a. column	(a)) held as:				
	Board designated or quasi-endowment	•	(13,	(=),				
	Permanent endowment %							
	Term endowment %	•						
·	The percentages on lines 2a, 2b, and 2c	should equal 100%						
3a	Are there endowment funds not in the po	•	nization that are held	l and administer	ed for the			
ou	organization by:	oscosion of the organ	iization that are note	and administer	od for the		Г	res No
	(i) Uprelated arranimations?						3a(i)	110
	(!) Deleted energia-tion-0						3a(ii)	
h	If "Yes" on line 3a(ii), are the related organizations:	nizationa liatad aa ra	guired on Schodule	 D2				
				Nf			30	
	Describe in Part XIII the intended uses o		ndowment lunds.					
Γċ	art VI Land, Buildings, and Ed			Dort IV line	110 Coo F		Dort V II	ina 10
	Complete if the organizat							
	Description of property	(a) Cost or other	1 ''	other basis	(c) Accumulate	0	(d) Book va	Bur
		(investment)	`	her)	depreciation		~ -	
	Land			11,475		24.5		1,475
	Buildings		4,6	90,037	163,	315	4,526	5 , 722
	Leasehold improvements							
d	Equipment		1	.32,867	129,	050		3,817
е	Other							
Tota	I. Add lines 1a through 1e. (Column (d) m	ust equal Form 990. I	Part X, line 10c. colu	ımn (B))			4,742	2,014

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

scne	edule D (Form 990) (Rev. 12-202 E) CET ETIVITOTILIETTAL EQ	lucation	03-02/0004	Page 4
Pa	Reconciliation of Revenue per Audited Financial Complete if the organization answered "Yes" on Form		•	'n
1	Total revenue, gains, and other support per audited financial statements			5,289,713
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		·····	3,209,113
	Net unrealized gains (losses) on investments	2a		
h	Donated services and use of facilities	2b		
C	Recoveries of prior year grants	2c		
q	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	5,289,713
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	I I		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	Other (Describe in Part XIII.)			
	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)	5	5,289,713
Pa	art XII Reconciliation of Expenses per Audited Financia			turn
	Complete if the organization answered "Yes" on Fore	m 990, Part IV, line 12	2a	
1	Total expenses and losses per audited financial statements		1	2,282,127
	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1		
	Donated services and use of facilities			
b	Prior year adjustments	2b		
С	Other losses			
d	Other (Describe in Part XIII.)	2d		
	Add lines 2a through 2d		2e	0 000 100
	Subtract line 2e from line 1		3	2,282,127
	Amounto included on Form 000 Port IV line 2F but not on line 1:			
3 4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1.1		
3 4 a	Investment expenses not included on Form 990, Part VIII, line 7b			
3 4 a b	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	4b		
3 4 a b c	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b	4b		2 282 127
3 4 a b c	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	4b		2,282,127
3 4 a b c 5	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line art XIII Supplemental Information	4b ⇒ 18.)	5	
3 4 a b c 5 Pa	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4b	p; Part V, line 4; Part	-
3 4 a b c 5 Pa	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line art XIII Supplemental Information	4b	p; Part V, line 4; Part	
3 4 a b c 5 Pa	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4b	p; Part V, line 4; Part	
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3 4 a b c 5 Pa	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4b	p; Part V, line 4; Part	-
3 4 a b c 5 Pa	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4b	p; Part V, line 4; Part	-
3 4 a b c 5 Pa	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4b	p; Part V, line 4; Part	-
3 4 a b c 5 Pa	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4b	p; Part V, line 4; Part	-
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3 4 a b c 5 Pa	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.) Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line art XIII Supplemental Information ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4b	p; Part V, line 4; Part	-
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Schedule D (F	Form 990) (Rev. 12-	202 K)eei	Environmental	Education	65-0270064	Page 5
Part XIII	Supplemental	Informati	ion (continued)			
I dit Aiii	Oupplemental	momat	ion (continued)			
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SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Noncash Contributions

Complete if the organizations answered "Yes" 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.

OMB No. 1545-0047

Employer identification number

2024

Open To Public Inspection

Foundation 65-0270064 Part I Types of Property (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g Art — Works of art 1 Art — Historical treasures 2 Art — Fractional interests 3 Books and publications 4 5 Clothing and household goods Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 Securities — Publicly traded 9 Securities — Closely held stock 10 Securities — Partnership, LLC, 11 or trust interests Securities — Miscellaneous 12 Qualified conservation contribution — Historic structures 14 Qualified conservation contribution — Other Real estate — Residential 15 Real estate — Commercial 16 Real estate — Other X 137,425 17 Collectibles 18 Food inventory 19 Drugs and medical supplies 20 Taxidermy 21 Historical artifacts 22 23 Scientific specimens Archeological artifacts 24 Other (various) 14,626 X 1 25 26 Other (______) 27 28 Number of Forms 8283 received by the organization during the tax year for contributions for 29 which the organization completed Form 8283, Part V, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? Х 30a **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard X 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Х contributions? If "Yes," describe in Part II. 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.

Schedule M (Fo	orm 990) 2024 Reef	Environmental	Education	65-0270064	Page 2
Part II	Supplemental the organization	Information. Provide the	information required lumn (b), the numbe	by Part I, lines 30b, 32b, and r of contributions, the number	33, and whether
	Of a COMBINATION	1 of both. Also complete	this part for any aud	illional information.	

SCHEDULE O (Form 990)

(Rev. December 2024)

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 Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Reef Environmental Education Employer identification number Foundation 65-0270064

Form 990 - Organization's Mission
Reef Environmental Education Foundation (REEF) was established as a
nonprofit organization in 1990. REEF conserves marine environments
worldwide. Our mission is to protect biodiversity and ocean life by
actively engaging and inspiring the public through citizen science,
education, and partnerships with the scientific community. REEF connects
ocean enthusiasts and the dive community with scientists and resource
managers through data collection activities and education initiatives. The
REEF Campus in Key Largo, FL serves as a visitors center for education and
outreach to the public.

Form 990, Part III, Line 4a - First Accomplishment In 2023, REEF continued to protect marine environments through education, service and research. REEF provides education and outreach activities to build and inspire a community of ocean stewards. The REEF Campus in Key Largo FL serves as a visitors center to educate and engage the public with marine conservation. We also conduct online programming such as webinars and other interactive content. We conduct in-person programming led by REEF staff as well as the wide network of partners including dive shops and clubs, nature centers, and public aquaria. Public engagement with conservation is also fulfilled through the Volunteer Fish Survey Project, regarded as one of the most effective and powerful ocean citizen science programs. It gives divers and snorkelers an engaging and meaningful way to support marine conservation. Participants SCUBA dive and snorkel to collect and report information on marine fish populations as well as sea turtles and select invertebrate and algae species. This data is used to better understand and protect ocean ecosystems worldwide. Fisheries protections around the world depend on high-quality data. With REEF data, submitted by citizen scientists, researchers are making exciting discoveries about marine ecosystems, and policymakers have more information to refine conservation efforts. Volunteers collect and submit data on marine life sightings. It has generated the largest marine life sightings database, an unparalleled source of information that provides invaluable insight into the health, status, and threats of ocean habitats and animals.

Form 990, Part VI, Line 2 - Related Party Information Among Officers
Ned DeLoach Paul Humann
Trustee Board Emerit
Business relationship

Ned DeLoach Anna DeLoach
Trustee Chairman
Spousal relationship

Form 990, Part VI, Line 6 - Classes of Members or Stockholders
Members are non-voting members that sign up for membership, there are no restrictions on membership. There are no stockholders.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 The Boards finance committee reviews the 990 before filing. The full board

SCHEDULE O (Form 990)

(Rev. December 2024)

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 Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Reef Environmental Education	Employer identification number
Foundation	65-0270064
will receive it and have access to review it, but	
done by the finance committee.	
done by the imance committee.	
Form 990, Part VI, Line 12c - Enforcement of Confl	icta Policy
Annually the Board of Trustees are required to dis	
interest and to sign a conflict of interest statem	ent.
Form 990, Part VI, Line 15a - Compensation Process	for Top Official
Compensation Process for top Official: The two Exe	
reviewed by the board, it is comparable to other r	
adheres to the compensation policy outlined in the	e employee handbook.
Form 990, Part VI, Line 15b - Compensation Process	for Officers
Compensation Process for top key employees are re	
is comparable to other not for profit entities, ac	
policy outlined in the employee handbook.	meres co che compensacion
portey outlined in the emproyee handbook.	
Form 000 Doub III Time 10 Comming Designants I	
Form 990, Part VI, Line 19 - Governing Documents I	Disclosure Explanation
Documents not included on the website are available	e upon request.
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Two Year Comparison Report 2023 & 2024 Form **990** For calendar year 2024, or tax year beginning Taxpayer Identification Number Name Reef Environmental Education 65-0270064 Foundation 2023 2024 Differences 1. 2,247,232 4,449,863 2,202,631 1. Contributions, gifts, grants 2. Membership dues and assessments 2. 3. Government contributions and grants 3. 1,022,153 815,582 -206,571 4. Program service revenue 4. 5. Investment income 5. 38,417 17,741 -20,676 6. Proceeds from tax exempt bonds 6. 7. 7. Net gain or (loss) from sale of assets other than inventory 8. Net income or (loss) from fundraising events 8. 9. Net income or (loss) from gaming 9. **10.** Net gain or (loss) on sales of inventory 10. -91 6,618 6,527 11. 12. Total revenue. Add lines 1 through 11 12. 3,314,420 5,289,713 1,975,293 13. Grants and similar amounts paid 13. 14. Benefits paid to or for members 14. **15.** Compensation of officers, directors, trustees, etc. 15. 829,195 130,497 16. Salaries, other compensation, and employee benefits 698,698 16. 17. Professional fundraising fees 17. 18. Other professional fees 19,843 24,909 5,066 18. 31,709 40,839 9,130 **19.** Occupancy, rent, utilities, and maintenance 19. 23,237 20. Depreciation and Depletion 18,719 -4,518 20. 1,304,989 1,368,465 63,476 21. Other expenses 21. **22. Total expenses.** Add lines 13 through 21 22. 2,078,476 2,282,127 203,651 1,235,944 3,007,586 1,771,642 23. Excess or (Deficit). Subtract line 22 from line 12 23. 3,314,420 5,289,713 1,975,293 24. 24. Total exempt revenue 25. Total unrelated revenue 25. -227,338 1,067,188 26. Total excludable revenue 839,850 26. 3,225,143 27. Total assets 3,680,444 6,905,587 27. 28. Total liabilities 217,557 408,556 626,113 28. 29. Retained earnings 3,271,888 6,279,474 3,007,586 29. 9 10 **30.** Number of voting members of governing body 30.

9

1021

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31.

32.

31. Number of independent voting members of governing body

32. Number of employees

33. Number of volunteers

10

17

972

Form 990	Tax Return History	2024
Name	Reef Environmental Education Foundation	Employer Identification Number 65-0270064

_	2020	2021	2022	2023	2024	2025
Contributions, gifts, grants	649,705	1,390,932	1,097,024	2,247,232	4,449,863	
Membership dues						
Program service revenue	224,983	472,147	736,986	1,022,153	815,582	
Capital gain or loss						
Investment income			10,924	38,417	17,741	
Fundraising revenue (income/loss)						
Gaming revenue (income/loss)						
Other revenue	26,706	37,136		6,618	6,527	
Total revenue		1,900,215	1,844,934	3,314,420	5,289,713	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc						
Other compensation	434,372	510,401	624,379	698,698	829,195	
Professional fees	17,150	15,889	18,249	19,843	24,909	
Occupancy costs	20,978	23,588	77,485	31,709	40,839	
Depreciation and depletion	21,884	22,853	23,504	23,237	18,719	
Other expenses	361,336	635,255	1,018,642	1,304,989	1,368,465	
Total expenses	855,720	1,207,986	1,762,259	2,078,476	2,282,127	
Excess or (Deficit)	46,518	692,229	82,675	1,235,944	3,007,586	
_						
Total exempt revenue	902,238	1,900,215	1,844,934	3,314,420	5,289,713	
Total unrelated revenue						
Total excludable revenue	252,533	509,283	747,910	1,067,188	839,850	
Total Assets	1,640,592	2,620,574	2,706,224	3,680,444	6,905,587	
Total Liabilities	413,697	667,305	670,280	408,556	626,113	
Net Fund Balances	1,226,895	1,953,269	2,035,944	3,271,888	6,279,474	

REEF Reef Environmental Education

65-0270064

FYE: 12/31/2024

Federal Statements

Form 990, Part IX, Line 24e - All Other Expenses

Description	<u></u>	Total xpenses	 Program Service	agement & General	 Fund Raising
Dues and subscriptions Bank fees License/permits/fees	\$	18,932 12,990 463	\$ 15,146 11,691	\$ 3,786 1,299 463	\$
Total	\$	32,385	\$ 26,837	\$ 5,548	\$ 0

8/8/2025 10:21 AM

REEF Reef Environmental Education 65-0270064

Federal Statements

8/8/2025 10:21 AM

FYE: 12/31/2024

Schedule A, Part II, Line 1(e)

Description	 Amount
Individual/foundation/corporate	\$ 3,413,963
Jim and Judy Kewley	
Cash Contribution	253,012
Anonymous	
Cash Contribution	138,706
Bob and Tammy DeWitt	
Cash Contribution	140,005
Janet and Doug Camp	
Cash Contribution	86,752
Antonia Lenstra	
Cash Contribution	155,000
Michael J. Zupan & Anne Statham	
11 Atlantic Ave Key Laro ,FL	137,425
Walcott Henry	
Cash Contribution	 125,000
Total	\$ 4,449,863

REEF Reef Environmental Education

Federal Statements

8/8/2025 10:21 AM

FYE: 12/31/2024

65-0270064

Schedule A, Part II, Line 5 - Excess Gifts

Donor Name		Excess		
Donor	\$	11,096	\$	
Total	\$	11,096	\$	(

REEF Reef Environmental Education 65-0270064

8/8/2025 10:21 AM

Federal Statements

FYE: 12/31/2024

Schedule A, Part II, Line 12 - Current year

Description	Amount
Education trips VFSP Program Member Services Intern Program Conservation Science Materials Campus Education Taxable Interest on Savings and Temporary Cash Investments Other	\$ 663,298 3,000 44,498 600 26,494 30,502 47,190 17,741 6,527
Total	\$ 839,850