

Form **990-EZ**

Short Form

Return of Organization Exempt From Income Tax

OMB No 1545-1150

2013

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.

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2013 calendar year, or tax year beginning July 1, 2013, and ending June 30, 20 14

B Check if applicable

- Address change
- Name change
- Initial return
- Terminated
- Amended return
- Application pending

C Name of organization

Brevard Nature Alliance

Number and street (or P O box, if mail is not delivered to street address)

Room/suite

P. O. Box 517

City or town, state or province, country, and ZIP or foreign postal code

Titusville, FL 32781-0517

D Employer identification number

59-3558063

E Telephone number

321-268-5224

F Group Exemption Number ▶

G Accounting Method: Cash Accrual Other (specify) ▶

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

I Website: ▶

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

K Form of organization: Corporation Trust Association Other

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

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

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

		Revenue		Expenses		NET ASSETS	
1	Contributions, gifts, grants, and similar amounts received	1	36,905	10	Grants and similar amounts paid (list in Schedule O)	10	-0-
2	Program service revenue including government fees and contracts	2	-0-	11	Benefits paid to or for members	11	-0-
3	Membership dues and assessments	3	13,335	12	Salaries, other compensation, and employee benefits	12	-0-
4	Investment income	4	-0-	13	Professional fees and other payments to independent contractors	13	70,860
5a	Gross amount from sale of assets other than inventory	5a	-0-	14	Occupancy, rent, utilities, and maintenance	14	20,528
b	Less: cost or other basis and sales expenses	5b	-0-	15	Printing, publications, postage, and shipping	15	28,003
c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	-0-	16	Other expenses (describe in Schedule O)	16	19,927
6	Gaming and fundraising events			17	Total expenses. Add lines 10 through 16	17	139,318
a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	-0-	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	(7,471)
b	Gross income from fundraising events (not including \$ 36,905 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	182,492	19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	28,724
c	Less: direct expenses from gaming and fundraising events	6c	106,015	20	Other changes in net assets or fund balances (explain in Schedule O)	20	-0-
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	76,477	21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	21,253
7a	Gross sales of inventory, less returns and allowances	7a	-0-	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> RECEIVED MAY 20 2015 OGDEN, UT IRS-OSC </div>			
b	Less: cost of goods sold	7b	-0-				
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	-0-				
8	Other revenue (describe in Schedule O)	8	5,130				
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	131,847				

SCANNED JUN 22 2015

or Paperwork Reduction Act Notice, see the separate instructions.

Cat No 106421

Form **990-EZ** (2013)

910-13, 23
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Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

Table with columns for question number, question text, and Yes/No response. Includes questions 33 through 45b regarding organizational activities, financials, and governance.

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

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

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

	Yes	No
47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	47	✓
48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	✓
49a Did the organization make any transfers to an exempt non-charitable related organization?	49a	✓
b If "Yes," was the related organization a section 527 organization?	49b	✓

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

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
				NA

f Total number of other employees paid over \$100,000 **NA**

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

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
		NA

d Total number of other independent contractors each receiving more than \$100,000 of compensation from the organization

52 Did the organization complete Schedule A? **Note.** All section 501(c)(3) nonexempt charitable trusts must attach a completed Schedule A.

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

Sign Here	Signature of officer	
	See Attached signed Page 4	
Preparer Use Only	Type or print name and title	
	Print/Type preparer's name	Preparer's signature
	Firm's name	
	Firm's address	

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

46 Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

Yes	No
46	✓

Part VI Section 501(c)(3) organizations only

All section 501(c)(3) organizations must answer questions 47-49b and 52, and complete the tables for lines 50 and 51.

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

Yes	No
47	✓
48	✓
49a	✓
49b	✓

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

49a Did the organization make any transfers to an exempt non-charitable related organization?

b If "Yes," was the related organization a section 527 organization?

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

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
				NA

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

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

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
		NA

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

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

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

Sign Here ▶ Bartholomew W. Gaetjens Signature of officer Date 5-7-15
 ▶ Bartholomew W. Gaetjens Chairman, Board of Directors
 ▶ Type or print name and title

Paid Preparer Use Only Print/Type preparer's name Preparer's signature Date Check if self-employed PTIN
 Firm's name ▶ Firm's EIN ▶
 Firm's address ▶ Phone no. ▶

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

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2013

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization Brevard Nature Alliance	Employer identification number 59-3558063
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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 11, check only one box.)

- 1 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.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 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)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 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.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 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 that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III—Functionally integrated d Type III—Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		✓
11g(ii)		✓
11g(iii)		✓

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						NA

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 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 IV.)						
11 Total support. Add lines 7 through 10						NA
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	NA %
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	NA %
16a 33 1/3% support test—2013. 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		<input type="checkbox"/>
b 33 1/3% support test—2012. 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		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2013. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2012. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	72,918	37,618	27,761	27,558	50,240	214,125
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	122,277	149,149	157,941	209,429	182,492	821,140
3 Gross receipts from activities that are not an unrelated trade or business under section 513	-0-	-0-	-0-	-0-	-0-	-0-
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	-0-	-0-	-0-	-0-	-0-	-0-
5 The value of services or facilities furnished by a governmental unit to the organization without charge	-0-	-0-	-0-	-0-	-0-	-0-
6 Total. Add lines 1 through 5	195,195	186,619	185,702	237,012	232,732	0,037,260
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	-0-	-0-	-0-	-0-	-0-	-0-
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	15,500	21,000	5,000	10,000	5,000	56,500
c Add lines 7a and 7b	15,500	21,000	5,000	10,000	5,000	56,500
8 Public support (Subtract line 7c from line 6.)						980,760

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6	195,195	186,619	185,702	237,012	232,732	1,037,260
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	-0-	-0-	-0-	-0-	-0-	-0-
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	-0-	-0-	-0-	-0-	-0-	-0-
c Add lines 10a and 10b	-0-	-0-	-0-	-0-	-0-	-0-
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	-0-	-0-	-0-	-0-	-0-	-0-
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	-0-	-0-	-0-	40,887	5,130	46,017
13 Total support. (Add lines 9, 10c, 11, and 12.)	195,195	186,619	185,702	277,899	237,862	1,083,277
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f))	15	90 %
16 Public support percentage from 2012 Schedule A, Part III, line 15	16	90 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))	17	-0 %
18 Investment income percentage from 2012 Schedule A, Part III, line 17	18	-0 %
19a 33 1/3% support tests—2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/>		
b 33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here . The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ <input type="checkbox"/>		

Part IV **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

NA

Area with horizontal dashed lines for supplemental information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

Brevard Nature Alliance

Employer identification number

59-3558063

Part 1, Line 8 = Other Revenue

Petty Cash returned to account \$ 1,830.00(SCBWF- \$690 BWCE - \$1,140)

Refunds to SCBWF 727.00

Ads purchased in Adventure Guide 1,200.00

Return of an overcharge 40.00

Misc Income 463.00

Event payment at door 180.00

Void/Returned checks 550.00

Merchant Account charge back refund 140.00

TOTAL for Other Revenue = \$ 5,130.00

Line 16 - Other Expenses

FL Dept of Agriculture, etc Annual Solicitation Certification \$ 150.00

Bank Fee & Merchant Account Fees 4,211.00 (15.00 + 4,196.00)

Marketing at other events 3,410.00

Petty Cash for events 970.00

Other Advertising expenses 865.00

D&O Insurance 759.00

Meetings at other sites 595.00

Supplies 2,909.00

Misc expenses 761.00

Event Bags and Badges 2,112.00

Membership & Dues to others 1,360.00

Sub-Total This Page \$ 18,102.00

BREVARD NATURE ALLIANCE, INC.
59-3558063

Fiscal year ending: June 30, 2014

Part II – Line 24 – Listed on Schedule O

OTHER ASSETS:

Item	Estimated Value
Office chair	\$ 60.00
Computer (Desk top) x2	50.00
Telephone	10.00
Misc. office items (desks & chairs)	35.00
Laptop x3	30.00
Ausis Lap Top (new)	400.00
APC Powerpac replaced with nes	30.00
Software Program (to capture statistics - updated)	2,000.00
New HP 5520 Printer/Copier/Fax	200.00
HP Flat screen monitor	25.00
Windows XP	20.00
120GB,etc. Hard Drive x2	25.00
External Hard Drive (backup)	20.00
HP Printer Photosmart Premier	25.00
Document Binding Machine	25.00
Misc Supplies (continuously updated as needed)	300.00
 Sub Total:	 \$ 3,255.00
 Prepaid Assets	 \$ 0.00
 TOTAL:	 \$ 3,255.00

BYLAWS OF THE BREVARD NATURE ALLIANCE

ARTICLE I – NAME

The name of this organization shall be the Brevard Nature Alliance, Incorporated.

ARTICLE II – PURPOSE

Section 1: Mission

The mission of the Brevard Nature Alliance, Inc. is to build public awareness and appreciation of the value of Brevard County's natural resources by fostering and promoting ethical nature based ecotourism.

Section 2: Vision

BNA's vision is that nature and environmental systems will become an important part of everyone's life to enrich our community. The BNA will serve as one of the primary advocates of community-based nature and natural resource activities in Brevard County. It dedicates itself to the enrichment of all members of our community through an understanding and appreciation of nature, natural resources, ecosystems, environmental sciences, nature-based tourism, conservation, preservation, site visitations, education, and museums of natural sciences.

Section 3: Local Nature and Ecosystems Agency Designation

If accorded designation by the Brevard County Board of County Commissioners, the Corporation shall act as the local community affairs nature agency for Brevard County, serving as the umbrella organization for all county community-based nature and natural resource activities.

ARTICLE III – MEMBERSHIP

Section 1: Member Organizations

Any organization (scientific, civic, business, governmental, not-for-profit, etc.) may become a member of the BNA by payment of annual dues as established by the Board of Directors.

BREVARD NATURE ALLIANCE BOARD MEMBER LIST 2013 - 2014

Last Name	First Name	Board Position	Salaried	Title/Company	Address	City	Postal Code
Bankert	Stephen	Director	N	Computer Programer	365 Spoonbill Lane	Melbourne Bch	32951-3218
Barker	Virginia	Treasurer	N	Mgmt. Section Svsn./Brevard County NRMO	2725 Judge Fran Jamieson Way	Viera	32940
Birch	Anne	Director	N	The Nature Conservancy	2205 Sea Avenue	Indialantic	32903
Carlson	Sue	Secretary	N	Community Advocate	3422 Kent Avenue	Melbourne	32935
Day, P.W.S.	Robert	Vice Chair	N	Community Advocate	114 Chipola Road	Cocoa Beach	32931-2604
Donnelly	Melinda	Director	N	University of Central Florida	3855 Pennsylvania Avenue	Mims	32754
Evans	Nancy	Director	N	Fairfield Inn & Suites by Marriott	4735 Helen Houser Blvd	Titusville	32780
Gaetjens	Bart	Chairman	N	FPL Company	1535 Mallard Court	Titusville	32796
George	Don	Vice Chair	N	Geomar Environmental Consultants	241 City Point Road	Cocoa	32926
Groh	Aliona	Director	n	Embrarer Air	1111 General Aviation Drive	Melbourne	32935
Lamb	Vince	Director	N	Community Advocate	11590 Dragon Point Drive	Merritt Island	32952
Long	Martha	Director	N	Titusville City Council	300 York Avenue	Titusville	32796
Noble	Carol	Director	n	Canaveral Port Authority	445 Challenger Road	Cape Canaversl	32920
Thompson	Laurilee	Director	N	Dixie CrossRoads	1475 Garden Street	Titusville	32796
Tucker	Beth Ann	Director	N	Tucker Alarm Systems	3654 Royal Oak Drive	Titusville	32780
Winsten	Keith	Director	N	Brevard Zoo	8225 North Wickham Road	Melbourne	32940
Harris	Neta		Contract	ExecutiveDirector	P. O. Box 517	Titusville	32781
Harris	Rhonda		Contract	Programs Coordinator	1606 York Town Ave	Titusville	32796
George	Dianne		Contract	Community Relations Coordinator	241 City Point Road	Cocoa	32926
			Office Fax	fax:321-268-0921			

BREVARD NATURE ALLIANCE, INC.

The Brevard Nature Alliance, Inc. (BNA) was formed in December 1998 to provide a strategic alliance among all Brevard stakeholders for natural resource initiatives. The BNA is chartered as a not-for-profit corporation under the laws of the state of Florida and is designated by the Internal Revenue Service as a 501 (c) (3) tax-exempt, charitable organization. BNA members are a coalition of representatives from key organizations who combine their knowledge to protect the distinct ecology and raise the awareness of citizens and visitors to the value and importance of the natural resources of Brevard County, Florida.

The BNA seeks to increase citizen's awareness of the County's natural resources and work with the community toward sensible growth management. The BNA does this by offering technical and funding support to educational projects such as the annual Space Coast Birding & Wildlife Festival, organizing community workshops to form a strategic conservation plan for the County as part of the *Brevard Tomorrow* initiative, providing environmental documentation to *myregion.org* and working to assist with growth management issues within the county. BNA members and staff have been appointed to County Ordinance Working Group, Comprehensive Land Use Plan Working Group, Charter Review Commission and Parks and Recreation Commission.

The mission of the Brevard Nature Alliance, Inc. is to build public awareness and appreciation of the value of Brevard County's natural resources by fostering and promoting ethical nature based ecotourism.

The purpose of the Brevard Nature Alliance is to serve as a catalyst for community environmental development and appreciation of natural systems. The Alliance sponsors and supports educational programs and community activities to protect and enhance the natural environment, inventory natural assets of the area and maintain a database of expertise to support nature-based activities in Brevard County.

The vision of the Brevard Nature Alliance is that through education and understanding, natural resources will become an important part of everyone's life to enrich the community. The Alliance serves as one of the primary advocates of community-based nature activities in Brevard County, dedicated to the enrichment of the community through an understanding and appreciation of natural resources, nature-based tourism and ecosystem needs.

Membership is by application and extends to individuals, organizations and corporations dedicated to sound environmental practices and the preservation of natural resources for educational, recreational and research uses.

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