

Form **990**
Department of the Treasury
Internal Revenue Service

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.

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

OMB No. 1545-0047
2019
Open to Public Inspection

A For the **2019** calendar year, or tax year beginning **01-01-2019**, and ending **12-31-2019**

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
NSF INTERNATIONAL

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
789 NORTH DIXBORO ROAD

City or town, state or province, country, and ZIP or foreign postal code
ANN ARBOR, MI 481059723

D Employer identification number
38-1428955

E Telephone number
(734) 769-8010

G Gross receipts \$ 167,804,050

F Name and address of principal officer:

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.NSF.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1952

M State of legal domicile: MI

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
NSF INTERNATIONAL IS A GLOBAL, NOT-FOR-PROFIT PUBLIC HEALTH AND SAFETY ORGANIZATION.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	9
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	8
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	765
6 Total number of volunteers (estimate if necessary)	6	0
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	850,632
b Net unrelated business taxable income from Form 990-T, line 39	7b	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	0	0
9 Program service revenue (Part VIII, line 2g)	122,374,325	122,120,764
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,194,892	2,431,005
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	24,356	27,230
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	124,593,573	124,578,999
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	243,468	182,738
14 Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	51,269,682	61,450,804
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	55,094,860	53,317,713
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	106,608,010	114,951,255
19 Revenue less expenses. Subtract line 18 from line 12	17,985,563	9,627,744
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	411,909,376	472,699,437
21 Total liabilities (Part X, line 26)	125,656,220	174,133,440
22 Net assets or fund balances. Subtract line 21 from line 20	286,253,156	298,565,997

Part II Signature Block

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

Sign Here Signature of officer: MICHAEL P WALSH CFO/VICE PRESIDENT
Date: 2020-11-11

Paid Preparer Use Only
Print/Type preparer's name: DELOITTE TAX LLP
Preparer's signature: [Signature]
Date: [Date]
Check if self-employed
PTIN: P00741382
Firm's EIN: 86-1065772
Firm's address: 200 RENAISSANCE CENTER SUITE 3900, DETROIT, MI 482431313
Phone no. (313) 396-3000

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

NSF INTERNATIONAL IS DEDICATED TO BEING THE LEADING GLOBAL PROVIDER OF PUBLIC HEALTH AND SAFETY-BASED RISK MANAGEMENT SOLUTIONS, WHILE SERVING THE INTERESTS OF ALL STAKEHOLDERS. THESE STAKEHOLDERS INCLUDE THE PUBLIC, THE BUSINESS COMMUNITY, AND GOVERNMENT AGENCIES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 44,872,713 including grants of \$ 180,533) (Revenue \$ 75,752,074)
See Additional Data

4b (Code:) (Expenses \$ 8,484,920 including grants of \$) (Revenue \$ 22,367,529)
See Additional Data

4c (Code:) (Expenses \$ 12,799,625 including grants of \$) (Revenue \$ 18,999,610)
See Additional Data

See Additional Data Table

4d Other program services (Describe in Schedule O.)
(Expenses \$ 6,220,019 including grants of \$) (Revenue \$ 5,001,551)

4e Total program service expenses ▶ 72,377,277

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors 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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		No
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		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V		No
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.		
11a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	Yes	
11b	Did the organization report an amount for investments—other securities—in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	Yes	
11c	Did the organization report an amount for investments—program related—in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		No
11d	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	Yes	
11e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Yes	
11f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		No
12b	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	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	Yes	
14b	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	Yes	
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		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
20b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
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	Yes	

Part IV Checklist of Required Schedules (continued)

Table with 3 main columns: Question/Description, Yes, No. Rows include questions 22 through 38 regarding organizational reporting, compensation, tax-exempt bonds, and controlled entities.

Part 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 [checked]

Table with 3 main columns: Question/Description, Yes, No. Rows include 1a (Form 1096), 1b (Forms W-2G), and 1c (gambling winnings).

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

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 765
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 2b Yes
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3a Yes
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O 3b Yes
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a Yes
b AS, BE, BR, BU, CA, CH, CI, CO, CS, EC, FR, GM, HK, EI, IN, IT, KS, MX, NZ, PE, PL, RO, SA, SF, SP, SZ, TH, TS, UK, VM
5a If "Yes," enter the name of the foreign country: Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? (FBAR). See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5b No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 5c
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 6a No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6b
7 Organizations that may receive deductible contributions under section 170(c).
a 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 No
b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7b
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7c No
d If "Yes," indicate the number of Forms 8282 filed during the year 7d
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8
9 Sponsoring organizations maintaining donor advised funds.
a Did the sponsoring organization make any taxable distributions under section 4966? 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:
a 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:
a Gross income from members or shareholders 11a
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 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.
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. 13a
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b
c Enter the amount of reserves on hand 13c
14a Did the organization receive any payments for indoor tanning services during the tax year? 14a No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? 15 Yes
If "Yes," see instructions and file Form 4720, Schedule N.
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? 16 No
If "Yes," complete Form 4720, Schedule O.

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



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b 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?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the states with which a copy of this Form 990 is required to be filed; 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website, Another's website, Upon request, Other (explain in Schedule O); 19 Describe in 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.; 20 State the name, address, and telephone number of the person who possesses the organization's books and records: MICHAEL P WALSH 789 NORTH DIXBORO ROAD ANN ARBOR, MI 481059723 (734) 769-8010

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

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

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

- 1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, or 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 instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PEER FL DAAMEN BOARD MEMBER	2.00	X					83,000	0	22,410	
(2) MARY JANE ENGLAND BOARD MEMBER	2.00	X					100,973	0	22,410	
(3) THOMAS W GLASGOW JR BOARD MEMBER	2.00	X					90,949	0	22,410	
(4) LESLEY MA VP, CIO	38.00 12.00			X			0	0	211,500	
(5) JOHN D GRAHAM BOARD MEMBER	2.00	X					83,000	0	22,410	
(6) ELISABETH HAGEN BOARD MEMBER	2.00	X					90,805	0	22,410	
(7) KEVAN P LAWLOR PRESIDENT, CEO	38.00 12.00	X		X			1,945,951	0	1,422,855	
(8) JOAN MENKE-SCHAENZER BOARD MEMBER	2.00	X					90,650	0	22,410	
(9) RICHARD E RABBIDEAU BOARD MEMBER	7.00 3.00	X					122,919	0	22,410	
(10) RICHARD K RIEDERER BOARD MEMBER	7.00 3.00	X					94,536	0	22,410	
(11) NANCY E BAUER EXEC. ASSIST., CORP SECRETARY	38.00 12.00			X			125,190	0	17,368	
(12) LORELLE BESTERVELT EXECUTIVE VP, CTO	38.00 12.00					X	3,218,832	0	20,743	
(13) THOMAS CHESTNUT SR VP, GLOBAL FOOD DIVISION	38.00 12.00			X			0	839,268	272,189	
(14) ELIZABETH JONES VP, MARKETING	38.00 12.00			X			694,857	0	455,052	
(15) KAREN KREZA VP, HUMAN RESOURCES	38.00 12.00			X			412,752	0	103,294	
(16) DAVID PURKISS VP, WATER SYSTEMS	38.00 12.00			X			422,996	0	485,471	
(17) JULIE TIMMER VP AND GENERAL COUNSEL	38.00 12.00			X			414,200	0	126,946	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MICHAEL P WALSH VP, CFO	38.00 12.00			X				700,536	0	625,447
(19) DAVID R EMENHEISER HR DIRECTOR (BEG. 2019)	50.00 0.00					X		212,816	0	20,827
(20) IAN M HAYNES M.D. GLOBAL BUSINESS DEVELOP.	50.00 0.00						X	349,280	0	15,669
(21) STANLEY S HAZAN SR. DIRECTOR, REGULAR AFFAIRS	50.00 0.00					X		213,751	0	23,305
(22) KANNAPPAN MANICKAM SR. DIRECTOR OF BUS APPS (BEG. 2019)	50.00 0.00					X		216,298	0	3,696
(23) ROBERT E RHODES II SR. BUS DEV MANAGER (BEG. 2019)	50.00 0.00					X		230,414	0	3,696
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								9,914,705	839,268	3,987,338

1b Sub-Total			
c Total from continuation sheets to Part VII, Section A			
d Total (add lines 1b and 1c)		9,914,705	839,268

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 132

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3 Yes	
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4 Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
HTC GLOBAL SERVICES INC 3270 WEST BIG BEAVER ROAD TROY, MI 48084	IT SERVICES	937,663
LABWARE HOLDINGS INC 3 MILL ROAD STE 102 WILMINGTON, DE 19806	LAB CONSULTING SERVICES	792,093
PRIMESTAFF INTERNATIONAL LLC 324 EAST MAIN STREET NORTHVILLE, MI 48167	STAFFING AND RECRUITING	640,599
AEROTEK INC 100 PHOENIX DRIVE STE 250 ANN ARBOR, MI 48108	STAFFING AND RECRUITING	561,582
DELOITTE TAX LLP 200 RENAISSANCE CENTER STE 3900 DETROIT, MI 48243	TAX PREPARATION AND ADVISORY SERVICES	497,716

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 77

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e				
	f All other contributions, gifts, grants, and similar amounts not included above	1f				
	g Noncash contributions included in lines 1a - 1f: \$	1g				
	h Total. Add lines 1a-1f ▶					
Program Service Revenue		Business Code				
	2a WATER SYSTEMS	541380	75,752,074	75,752,074		
	b FOOD EQUIPMENT	541380	22,367,529	22,367,529		
	c HEALTH SCIENCES	541380	18,999,610	18,999,610		
	d APPLIED RESEARCH	541380	2,755,799	2,755,799		
	e AUTOCERT	541900	1,404,711	1,404,711		
	f All other program service revenue		841,041	841,041		
g Total. Add lines 2a-2f. ▶		122,120,764				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶		1,827,018		850,632	976,386
	4 Income from investment of tax-exempt bond proceeds ▶					
	5 Royalties ▶					
		(i) Real	(ii) Personal			
	6a Gross rents	6a				
	b Less: rental expenses	6b				
	c Rental income or (loss)	6c				
	d Net rental income or (loss) ▶					
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory	7a	43,829,038			
	b Less: cost or other basis and sales expenses	7b	43,144,223	80,828		
	c Gain or (loss)	7c	684,815	-80,828		
	d Net gain or (loss) ▶		603,987	-80,828		684,815
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a				
	b Less: direct expenses	8b				
c Net income or (loss) from fundraising events ▶						
9a Gross income from gaming activities. See Part IV, line 19	9a					
b Less: direct expenses	9b					
c Net income or (loss) from gaming activities ▶						
10a Gross sales of inventory, less returns and allowances	10a					
b Less: cost of goods sold	10b					
c Net income or (loss) from sales of inventory ▶						
Miscellaneous Revenue	Business Code					
11a MISCELLANEOUS INCOME			27,230	27,230		
b _____						
c _____						
d All other revenue						
e Total. Add lines 11a-11d ▶			27,230			
12 Total revenue. See instructions ▶			124,578,999	122,067,166	850,632	1,661,201

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, 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	182,738	182,738		
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	8,692,147	5,472,876	3,219,271	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	36,664,341	30,675,916	5,988,425	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	8,984,987	1,787,163	7,197,824	
9 Other employee benefits	3,011,869	3,011,869		
10 Payroll taxes	4,097,460	2,742,158	1,355,302	
11 Fees for services (non-employees):				
a Management				
b Legal	802,930		802,930	
c Accounting	994,334		994,334	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	91,557		91,557	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	18,421,584	16,527,749	1,893,835	
12 Advertising and promotion	1,914,739	1,111,915	802,824	
13 Office expenses	2,176,771	677,190	1,499,581	
14 Information technology	342,531	209,393	133,138	
15 Royalties				
16 Occupancy	2,380,738		2,380,738	
17 Travel	4,505,012	3,472,251	1,032,761	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	179,682	109,571	70,111	
20 Interest	2,494,678		2,494,678	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	8,058,306	2,015,647	6,042,659	
23 Insurance	837,845		837,845	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a SUPPLIES	3,917,294	3,585,654	331,640	
b TAXES AND FEES	1,770,577		1,770,577	
c FOREIGN CURRENCY EXCHAN	1,238,875		1,238,875	
d BAD DEBT EXPENSE	1,078,370		1,078,370	
e All other expenses	2,111,890	795,187	1,316,703	
25 Total functional expenses. Add lines 1 through 24e	114,951,255	72,377,277	42,573,978	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	2,427,073	1	4,819
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	9,503,030	4	9,791,185
	5 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net	29,777,085	7	29,158,298
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	4,443,927	9	4,737,108
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	136,367,148		
	b Less: accumulated depreciation	65,804,862		
	11 Investments—publicly traded securities	37,920,023	11	22,177,930
	12 Investments—other securities. See Part IV, line 11	250,924,260	12	251,347,084
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets	0	14	261,145
	15 Other assets. See Part IV, line 11	6,595,900	15	84,659,582
16 Total assets. Add lines 1 through 15 (must equal line 34)	411,909,376	16	472,699,437	
Liabilities	17 Accounts payable and accrued expenses	4,689,987	17	4,236,911
	18 Grants payable	1,313,164	18	1,227,689
	19 Deferred revenue	4,056,491	19	4,429,069
	20 Tax-exempt bond liabilities	12,515,618	20	10,661,450
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	60,000,000	24	115,390,998
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	43,080,960	25	38,187,323
	26 Total liabilities. Add lines 17 through 25	125,656,220	26	174,133,440
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	286,253,156	27	298,565,997
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	286,253,156	32	298,565,997	
33 Total liabilities and net assets/fund balances	411,909,376	33	472,699,437	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	124,578,999
2	Total expenses (must equal Part IX, column (A), line 25)	2	114,951,255
3	Revenue less expenses. Subtract line 2 from line 1	3	9,627,744
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	286,253,156
5	Net unrealized gains (losses) on investments	5	2,655,064
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 in Schedule O)	9	30,033
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	298,565,997

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 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?
 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
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in 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 Single Audit Act and OMB Circular A-133?
- 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 in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID:

Software Version:

EIN: 38-1428955

Name: NSF INTERNATIONAL

Form 990 (2019)

Form 990, Part III, Line 4a:

THE NSF WATER DIVISION CERTIFIES PRODUCTS THAT COME INTO CONTACT WITH DRINKING WATER; SUCH PRODUCTS INCLUDE PLUMBING COMPONENTS, WATER TREATMENT CHEMICALS, DRINKING WATER FILTERS, AND POOL & SPA EQUIPMENT. NSF PIONEERED THE DEVELOPMENT OF THE AMERICAN NATIONAL STANDARDS FOR ALL MATERIALS AND PRODUCTS WHICH TREAT (OR COME IN CONTACT WITH) DRINKING WATER, TO HELP PROTECT PUBLIC HEALTH AND THE ENVIRONMENT, AND MINIMIZE ADVERSE HEALTH EFFECTS. IN 1990, THE U.S. EPA REPLACED ITS OWN DRINKING WATER PRODUCT ADVISORY PROGRAM WITH THESE NSF STANDARDS. TODAY, MOST PLUMBING CODES REQUIRE CERTIFICATION TO NSF STANDARDS FOR PIPES AND PLUMBING COMPONENTS IN COMMERCIAL AND RESIDENTIAL BUILDINGS.

Form 990, Part III, Line 4b:

THE NSF FOOD SAFETY DIVISION OF THE NOT-FOR-PROFIT NSF INTERNATIONAL INCLUDES BOTH FOOD EQUIPMENT AND NONFOOD COMPOUNDS CERTIFICATION. THE FOOD EQUIPMENT PROGRAM TESTS AND CERTIFIES FOOD EQUIPMENT PRODUCTS FOR ACCEPTANCE ACROSS THE US, EUROPE AND OTHER GLOBAL MARKETS. THE NONFOODCOMPOUNDS PROGRAM OFFERS RISK MANAGEMENT SOLUTIONS FOR NONFOOD COMPOUNDS AND PROPRIETARY SUBSTANCES (I.E. LUBRICANTS, CLEANERS AND WATER TREATMENT CHEMICALS USED IN FOOD AND BEVERAGE PROCESSING).

Form 990, Part III, Line 4c:

THE NSF HEALTH SCIENCES DIVISION OFFERS REFERENCE STANDARDS, CERTIFICATION, TRAINING, CONSULTING, RESEARCH/DEVELOPMENT, AND AUDITING SERVICES FOR THE PHARMACEUTICAL AND DIETARY SUPPLEMENT INDUSTRIES.

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code:) (Expenses \$ 2,557,055 including grants of \$) (Revenue \$ 2,755,799)

ARC PROVIDES CUSTOMIZED TEST SERVICES AND CONSULTATION IN THE HEALTHCARE, INFECTION PREVENTION, FOOD SAFETY, EMERGING TECHNOLOGY, HOSPITALITY/TOURISM, GOVERNMENT/ACADEMIA, WATER AND ENVIRONMENTAL SAFETY SECTORS.

(Code:) (Expenses \$ 1,580,101 including grants of \$) (Revenue \$ 1,404,711)

AUTOCERT PROGRAM OFFERS SAFETY TESTING, CERTIFICATION, AND AUDIT SERVICES RELATED TO AFTERMARKET AUTOMOTIVE SUPPLIERS. THIS PROGRAM WAS DISCONTINUED DURING 2019.

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

(Code:) (Expenses \$ 2,082,863 including grants of \$) (Revenue \$ 841,041)
OTHER PROGRAMS

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
NSF INTERNATIONAL

Employer identification number
38-1428955

Employer identification number
38-1428955

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.)

- 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 (Form 990 or 990-EZ).)
- 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 agricultural research organization described in **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:
- 10 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).**
- 12 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **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.**
 - 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.**
 - 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.**
 - d **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.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations _____
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .						
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.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 VI.). . .						
11	Total support. Add lines 7 through 10						
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 2019 (line 6, column (f) divided by line 11, column (f))	14	
15	Public support percentage for 2018 Schedule A, Part II, line 14	15	
16a	33 1/3% support test—2019. 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—2018. 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—2019. 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 organization ▶ <input type="checkbox"/>		
b	10%-facts-and-circumstances test—2018. 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 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 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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.						
c	Add lines 7a and 7b.						
8	Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶		(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6.						
10a	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.						
c	Add lines 10a and 10b.						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on.						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						

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.**

Section C. Computation of Public Support Percentage

15	Public support percentage for 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. 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

b 33 1/3% support tests—2018. 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

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
	4b		
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)? <i>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.</i>		
	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) 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).</i>		
	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
	5c		
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? <i>If "Yes," provide detail in Part VI.</i>		
	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
	9b		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
	10a		
b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings).</i>		
	10b		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>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.</i>		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>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).</i>		

Section 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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3	By reason of the relationship described in (2), 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions):		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions)		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% 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 .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

Additional Data

Software ID:

Software Version:

EIN: 38-1428955

Name: NSF INTERNATIONAL

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047
2019
Open to Public Inspection

▶ 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.

Name of the organization
NSF INTERNATIONAL

Employer identification number
38-1428955

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(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 that the assets held in donor advised 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 advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of an historically 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 conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the 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 in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement 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? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

(ii) Assets included in Form 990, Part X ▶ \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____

b Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**

b If "Yes," explain the arrangement in Part XIII and complete the following table:

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

	Amount
1c	
1d	
1e	
1f	

- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . **Yes** **No**

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment ▶
- b** Permanent endowment ▶
- c** Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** unrelated organizations
- (ii)** related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	1,430,450	3,520,000		4,950,450
b Buildings		64,051,347	22,571,995	41,479,352
c Leasehold improvements		3,577,897	1,214,449	2,363,448
d Equipment		59,410,184	39,820,381	19,589,803
e Other		4,377,270	2,198,037	2,179,233
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				70,562,286

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) INVESTMENT IN SUBSIDIARIES	251,347,084	C
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	251,347,084	

Part VIII Investments—Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)		

Part IX Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) RELATED PARTY RECEIVABLE	77,354,519
(2) WORK IN PROCESS	7,053,763
(3) DEPOSITS AND ADVANCES	248,083
(4) FEDERAL INCOME TAXES RECEIVABLE	3,217
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	84,659,582

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes See Additional Data Table	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	38,187,323

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)		5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)		5	

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 38-1428955

Name: NSF INTERNATIONAL

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	PER CONSOLIDATED AUDITED FINANCIAL STATEMENTS OF NSF INTERNATIONAL AND SUBSIDIARIES: THE ORGANIZATION ESTIMATES WHETHER THE RECOVERABILITY OF THE DEFERRED TAX ASSETS IS "MORE LIKELY THAN NOT." IN THIS ESTIMATE, THE ORGANIZATION USES HISTORICAL RESULTS, PROJECTED FUTURE OPERATING RESULTS BASED UPON BUSINESS PLANS, ELIGIBLE CARRYFORWARD PERIODS, TAX-PLANNING OPPORTUNITIES, AND RELEVANT CONSIDERATIONS. THE ORGANIZATION REVIEWS THE LIKELIHOOD THAT IT WILL BE ABLE TO REALIZE THE BENEFIT OF ITS DEFERRED TAX ASSETS ON AN ANNUAL BASIS OR WHEN EVER EVENTS INDICATE A REVIEW IS REQUIRED.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
NSF INTERNATIONAL

Employer identification number
38-1428955

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3** Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
See Add'l Data					
3a Sub-total	45	246			16,113,450
b Total from continuation sheets to Part I	0	0			19,434,615
c Totals (add lines 3a and 3b)	45	246			35,548,065

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

- 2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ _____
- 3 Enter total number of other organizations or entities ▶ _____

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).* Yes No

Part V Supplemental Information

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

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 3:	ACCRUAL ACCOUNTING METHOD IS USED.

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART III ACCOUNTING METHOD:	

Additional Data

Software ID:

Software Version:

EIN: 38-1428955

Name: NSF INTERNATIONAL

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	1	1	PROGRAM SERVICES	WATER TREATMENT DEVICES, PLUMBING COMPONENTS, AND FOOD EQUIPMENT TESTING	115,753
EAST ASIA AND THE PACIFIC	13	43	PROGRAM SERVICES	WATER TREATMENT DEVICES, PLUMBING COMPONENTS, AND FOOD EQUIPMENT TESTING	4,287,252

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE (INCLUDING ICELAND & GREENLAND)	14	100	PROGRAM SERVICES	WATER TREATMENT DEVICES, PLUMBING COMPONENTS, AND FOOD EQUIPMENT TESTING	9,683,913
MIDDLE EAST AND NORTH AFRICA	4	6	PROGRAM SERVICES	WATER TREATMENT DEVICES, PLUMBING COMPONENTS, AND FOOD EQUIPMENT TESTING	685,433

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA	3	79	PROGRAM SERVICES	WATER TREATMENT DEVICES, PLUMBING COMPONENTS, AND FOOD EQUIPMENT TESTING	702,658
SOUTH AMERICA	8	9	PROGRAM SERVICES	WATER TREATMENT DEVICES, PLUMBING COMPONENTS, AND FOOD EQUIPMENT TESTING	209,372

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH ASIA	1	6	PROGRAM SERVICES	WATER TREATMENT DEVICES, PLUMBING COMPONENTS, AND FOOD EQUIPMENT TESTING	419,431
SUB-SAHARAN AFRICA	1	2	PROGRAM SERVICES	WATER TREATMENT DEVICES, PLUMBING COMPONENTS, AND FOOD EQUIPMENT TESTING	9,638

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC			INVESTMENTS		8,070,721
NORTH AMERICA			INVESTMENTS		6,286,140

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EUROPE (INCLUDING ICELAND & GREENLAND)			INVESTMENTS		5,077,754

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization NSF INTERNATIONAL

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Attach to Form 990. Go to www.irs.gov/Form990 for the latest information.

Employer identification number 38-1428955

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation, (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 9
3 Enter total number of other organizations listed in the line 1 table 0

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2:	PRIOR TO ISSUANCE OF GRANTS, THE ORGANIZATION CONFIRMS THAT FUND RECIPIENTS ARE QUALIFYING SEC. 501(C) ORGANIZATIONS AS NOTED ON IRS TAX EXEMPT ORGANIZATION DATABASE. FOR 501(C)(3) ORGANIZATIONS, NO ADDITIONAL MONITORING OF THE FUNDS IS CONDUCTED.

Additional Data

Software ID:
Software Version:
EIN: 38-1428955
Name: NSF INTERNATIONAL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANSI - AMERICAN NATIONAL STANDARDS INSTITUTE 1899 L STREET NW 11TH WASHINGTON, DC 20036	18-1635253	501(C)(3)	25,000				GENERAL SUPPORT
FISHER HOUSE MICHIGAN 3250 PLYMOUTH ROAD ANN ARBOR, MI 48105	81-2586691	501(C)(3)	10,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOOD GATHERERS 1 CARROT WAY ANN ARBOR, MI 48105	38-2853858	501(C)(3)	14,705				GENERAL SUPPORT
THE WOMEN'S CENTER OF SOUTHEASTERN 501 S MAPLE ROAD ANN ARBOR, MI 48103	36-4338567	501(C)(3)	10,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF WASHTENAW COUNTY 2305 PLATT ROAD ANN ARBOR, MI 48103	38-1951024	501(C)(3)	64,183				GENERAL SUPPORT
CLEARY UNIVERSITY 3750 CLEARY DRIVE HOWELL, MI 48843	38-1393811	501(C)(3)	25,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHELTER ASSOCIATION OF WASHTENAW COUNTY 312 W HURON STREET ANN ARBOR, MI 48103	38-2533030	501(C)(3)	10,000				GENERAL SUPPORT
ANN ARBOR HANDS ON MUSEUM 220 EAST ANN STREET ANN ARBOR, MI 48104	38-2236345	501(C)(3)	5,000				GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANN ARBOR SPARK 330 EAST LIBERTY STREET ANN ARBOR, MI 48104	38-2436899	501(C)(3)	10,000				GENERAL SUPPORT

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
NSF INTERNATIONAL

Employer identification number
38-1428955

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input type="checkbox"/> First-class or charter travel <input checked="" type="checkbox"/> Travel for companions <input type="checkbox"/> Tax idemnification and gross-up payments <input type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	2 Yes	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
<input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations		
<input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?	4a Yes	
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b Yes	
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	No
b Any related organization?	5b	No
If "Yes," on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?	6a	No
b Any related organization?	6b	No
If "Yes," on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7 Yes	
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 1A	EXPENSES PAID FOR TRAVEL FOR COMPANIONS WERE INCURRED FOR THE FOLLOWING INDIVIDUALS IN 2019: MARY JANE ENGLAND, ELISABETH HAGEN, JOAN MENKE-SCHAENZER, RICHARD RABBIDEAU, AND RICHARD RIEDERER. THE TRAVEL EXPENSES INCLUDED: SPOUSE AIRFARE AND MEALS. THE BENEFITS RECEIVED FOR THE COMPANION TRAVEL WAS TREATED AS TAXABLE COMPENSATION TO EACH OF THE INDIVIDUALS LISTED.
PART I, LINES 4A-B	LORELLE BESTERVELT RECEIVED SEVERANCE COMPENSATION IN THE AMOUNT OF \$732,000. IAN HAYNES RECEIVED SEVERANCE COMPENSATION IN THE AMOUNT OF \$106,967. CERTAIN SENIOR MANAGEMENT EMPLOYEES ARE PROVIDED WITH THE OPPORTUNITY TO PARTICIPATE IN A NON-QUALIFIED DEFERRED COMPENSATION PLAN ORGANIZED UNDER IRC SECTION 457(F). THE FOLLOWING EMPLOYEE RECEIVED PAYMENTS DURING 2019: LORELLE BESTERVELT-\$931,413
PART I, LINE 7	CERTAIN EXECUTIVES AND EMPLOYEES ARE ELIGIBLE FOR PARTICIPATION IN THE ANNUAL BONUS PLAN. THE PLAN PROVIDES PARTICIPANTS WITH THE OPPORTUNITY TO RECEIVE A BONUS BASED ON ATTAINMENT OF THE PREVIOUSLY ESTABLISHED INDIVIDUAL, BUSINESS UNIT AND CORPORATE GOALS. THE COMPANY HAS A LONG-TERM INCENTIVE PLAN (LTIP) WHEREBY CERTAIN MANAGEMENT IS AWARDED DEFERRED COMPENSATION BASED ON SEVERAL CRITERIA. THE AMOUNTS AWARDED EACH YEAR ARE REPORTED ON FORM 990 AS "RETIREMENT AND DEFERRED COMPENSATION." BEGINNING YEAR ONE (TWO YEARS PREVIOUS TO 1/1/2016) AFTER THE AMOUNTS ARE AWARDED EFFECTIVE JANUARY 1ST IN THE YEAR AFTER A PLAN YEAR, THEY ARE HELD FOR A PARTICIPANT AND BEGIN TO VEST OVER A THREE-YEAR PERIOD. THE VESTED AMOUNTS ARE INCLUDED IN THE "BONUS AND INCENTIVE COMPENSATION" ON SCHEDULE J, FORM 990. UNDER THE TERMS OF THE PLAN, SUCH LONG-TERM INCENTIVE COMPENSATION WILL BE CONSISTENTLY REPORTED FOR FORM 990 PURPOSES TWICE: WHEN AWARDED AND WHEN VESTED.

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule K (Form 990)

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
NSF INTERNATIONAL

Employer identification number

38-1428955

Part I Bond Issues

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pool financing	
						Yes	No	Yes	No	Yes	No
A MICHIGAN STRATEGIC FUND	52-1417332	NONEXXXX	09-06-2013	22,250,000	REFUND BONDS ISSUED 2/26/04 & 12/31/07, LAND PURCHASE FOR FUTURE EXPANSION		X		X		X

Part II Proceeds

		A	B	C	D				
1	Amount of bonds retired	11,588,550							
2	Amount of bonds legally defeased								
3	Total proceeds of issue	22,250,000							
4	Gross proceeds in reserve funds								
5	Capitalized interest from proceeds								
6	Proceeds in refunding escrows								
7	Issuance costs from proceeds	117,941							
8	Credit enhancement from proceeds								
9	Working capital expenditures from proceeds								
10	Capital expenditures from proceeds	3,520,000							
11	Other spent proceeds	18,612,059							
12	Other unspent proceeds								
13	Year of substantial completion	2013							
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a current refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?	X							
15	Were the bonds issued as part of an advance refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		X						
16	Has the final allocation of proceeds been made?	X							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X							

Part III Private Business Use

		A		B		C		D	
		Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2	Are there any lease arrangements that may result in private business use of bond-financed property?		X						

Part III Private Business Use (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
3a Are there any management or service contracts that may result in private business use of bond-financed property?	X							
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?	X							
c Are there any research agreements that may result in private business use of bond-financed property?		X						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government ▶		0 %						
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government ▶		0 %						
6 Total of lines 4 and 5		0 %						
7 Does the bond issue meet the private security or payment test?		X						
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		X						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of.								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?		X						

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?		X						
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?		X						
b Exception to rebate?	X							
c No rebate due?		X						
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?	X							
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	X							
b Name of provider	WELLS FARGO NA							
c Term of hedge	1200.0000000000 %							
d Was the hedge superintegrated?		X						
e Was the hedge terminated?		X						

Part IV Arbitrage (Continued)

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the requirements of section 148?		X						

Part V Procedures To Undertake Corrective Action

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations?		X						

Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. (See instructions).

SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury

Name of the organization
NSF INTERNATIONAL

Employer identification number

38-1428955

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 3	THE AUTOCERT PROGRAM WAS DISCONTINUED ON SEPTEMBER 30, 2019 IN ORDER TO ALLOW NSF INTERNATIONAL TO FOCUS ON PROGRAMS AND SERVICES THAT ARE MORE DIRECTLY ALIGNED WITH THE LONG-TERM VISION OF THE ORGANIZATION.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	PRIOR TO THE FILING WITH THE IRS, A COMPLETED COPY OF THE CURRENT YEAR FORM 990 IS POSTED ON THE BOARD OF DIRECTOR'S WEBSITE. ALL BOARD MEMBERS HAVE ACCESS TO THE FORM 990 AND CAN DOWNLOAD AND REVIEW THE DOCUMENT. THE AUDIT/FINANCE COMMITTEE (COMPRISED OF MEMBERS OF THE BOARD OF DIRECTORS) IS RESPONSIBLE FOR MONITORING THIS PROCESS AND FOR CONFIRMING THAT FORM 990 IS POSTED TO THE WEBSITE IN A TIMELY MANNER.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ALL OFFICERS, DIRECTORS AND KEY EMPLOYEES MUST DISCLOSE TO THE GENERAL COUNSEL ANY POTENTIAL CONFLICT OF INTEREST THAT THEY MIGHT HAVE. IN ADDITION, ALL EMPLOYEES ARE REQUIRED TO UNDERGO CODE OF ETHICS TRAINING ANNUALLY. AS A PART OF THE TRAINING, EMPLOYEES ARE REMINDED OF THE CONFLICT OF INTEREST POLICY AND THEIR CONTINUING OBLIGATION TO REPORT POTENTIAL CONFLICTS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	EACH YEAR DURING THE JANUARY BOARD MEETING AND AFTER THE PUBLICATION OF THE PRIOR YEAR FINANCIAL RESULTS, THE COMPENSATION COMMITTEE (COMPRISED OF MEMBERS OF THE BOARD OF DIRECTORS) REVIEWS THE COMPENSATION OF ALL CORPORATE OFFICERS AND BOARD MEMBERS AND RECOMMENDS ADJUSTMENTS TO COMPENSATION AS NECESSARY. THE FULL BOARD OF DIRECTORS REVIEWS THE RECOMMENDATIONS OF THE COMPENSATION COMMITTEE AND APPROVES ADJUSTMENTS TO COMPENSATION, IF DEEMED APPROPRIATE. THIS COMPENSATION REVIEW/RECOMMENDATION/APPROVAL PROCESS WAS LAST DONE IN JANUARY 2019. IN ADDITION, COMPENSATION STUDIES ARE PERFORMED PERIODICALLY BY AN OUTSIDE FIRM TO ASSIST THE COMPENSATION COMMITTEE IN THE REVIEW OF THE OFFICER'S COMPENSATION. THE LAST COMPENSATION STUDY WAS PERFORMED IN 2018.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S CONFLICT OF INTEREST POLICY AND FORM 990 ARE BOTH AVAILABLE TO THE PUBLIC UPON REQUEST. REQUESTS CAN BE MADE BY EMAILING TO INFO@NSF.ORG OR CALLING (734) 769-8010.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	PROFESSIONAL FEES: PROGRAM SERVICE EXPENSES 0. MANAGEMENT AND GENERAL EXPENSES 967,920. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 967,920. EMPLOYEE TRAINING: PROGRAM SERVICE EXPENSES 180,708. MANAGEMENT AND GENERAL EXPENSES 80,074. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 260,782. RECRUITMENT: PROGRAM SERVICE EXPENSES 0. MANAGEMENT AND GENERAL EXPENSES 845,841. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 845,841. SERVICE CONTRACTS: PROGRAM SERVICE EXPENSES 1,231,929. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 1,231,929. SUBCONTRACT LABOR: PROGRAM SERVICE EXPENSES 5,387,484. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 5,387,484. SUBCONTRACT SERVICES: PROGRAM SERVICE EXPENSES 8,752,335. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 8,752,335. PURCHASED SERVICES: PROGRAM SERVICE EXPENSES 975,293. MANAGEMENT AND GENERAL EXPENSES 0. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 975,293.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	CONTINGENT CONSIDERATION GAIN 30,033. PRIOR YEAR SUBS EARNINGS

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

Open to Public Inspection

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
NSF INTERNATIONAL

Employer identification number
38-1428955

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) AMAREX CLINICAL RESEARCH LLC 20201 CENTURY BLVD SUITE 450 GERMANTOWN, MD 20874 52-2138315	MEDICAL DEVICE AND PHARMA/BIOTECH CONSULTING	MD	NSF HEALTH SCIENCES LLC	RELATED	424,914	74,379,379	Yes			Yes		69.600 %
(2) AMAREX TAIWAN LLC 20201 CENTURY BLVD SUITE 450 GERMANTOWN, MD 20874 82-2032375	MEDICAL DEVICE AND PHARMA/BIOTECH CONSULTING	MD	NSF HEALTH SCIENCES LLC	RELATED	83,205	327,071		No		Yes		69.600 %
(3) AMAREX EUROPE LLC 20201 CENTURY BLVD SUITE 450 GERMANTOWN, MD 20874 81-2832952	MEDICAL DEVICE AND PHARMA/BIOTECH CONSULTING	MD	NSF HEALTH SCIENCES LLC	RELATED				No		Yes		69.000 %
(4) AMAXON LLC 9400 KEY WEST AVENUE ROCKVILLE, MD 20850 83-1881519	CLINICAL RESEARCH	MD	NSF HEALTH SCIENCES LLC	RELATED		75,189		No		Yes		34.800 %

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

See Additional Data Table

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	Yes	
b Gift, grant, or capital contribution to related organization(s)	Yes	
c Gift, grant, or capital contribution from related organization(s)		No
d Loans or loan guarantees to or for related organization(s)	Yes	
e Loans or loan guarantees by related organization(s)		No
f Dividends from related organization(s)	Yes	
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)		No
k Lease of facilities, equipment, or other assets from related organization(s)		No
l Performance of services or membership or fundraising solicitations for related organization(s)	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		No
o Sharing of paid employees with related organization(s)		No
p Reimbursement paid to related organization(s) for expenses		No
q Reimbursement paid by related organization(s) for expenses		No
r Other transfer of cash or property to related organization(s)		No
s Other transfer of cash or property from related organization(s)		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

See Additional Data Table

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. (see instructions).

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 38-1428955
Name: NSF INTERNATIONAL

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
NSF EURO CONSULTANTS SA AVENUE PASTEUR 21 WAVRE BE	FOOD SAFETY AUDITS AND CONSULTING	BE	NSF INTERNATIONAL UK LTD	C	-528,030	12,359,955	100.000 %		No
FIELD QUALITY CONTROL BVBA OUDAAN 15 ANTWERPEN BE	FOOD SAFETY AUDITS AND CONSULTING	BE	THIRD PARTY	C			48.000 %		No
QUALITY MARKETING SOLUTIONS BVBA SINT-LAUREISSTRAAT 83 ANTWERPEN BE	FOOD SAFETY AUDITS AND CONSULTING	BE	NSF EURO CONSULTANTS SA	C			70.000 %		No
NSF BRAZIL - PRESTAO DE SERVIOS DE ANLISES E CERTIFICAO LTDA PALERMO STREET 257 VIAMAO VILA SANTA ISABEL RS BR	ISO 9000/1400 AND REGISTRATION SERVICES	BR	NSF INTERNATIONAL STRATEGIC REGISTRATIONS LTD	C	-571,944	5,406,506	100.000 %		No
EC BUL LTD 87 KNIAZ ALEKSANDAR DONDUKOV BLVD SOFIA BU	FOOD SAFETY AUDITS AND CONSULTING	BU	NSF EURO CONSULTANTS SA	C	14,300	253,954	80.000 %		No
NSF CANADA 125 CHANCELLORS WAY GUELPH, ONTARIO CA	EDUCATION AND TRAINING	CA	NSF INTERNATIONAL	C	-1,831,503	94,270,236	100.000 %		No
NSF CANADA AGRICULTURAL CERTIFICATION COMPANY 125 CHANCELLORS WAY GUELPH, ONTARIO CA	EDUCATION AND TRAINING	CA	NSF INTERNATIONAL	C			100.000 %		No
NSF INTERNATIONAL STRATEGIC REGISTRATIONS CANADA COMPANY 125 CHANCELLORS WAY GUELPH, ONTARIO CA	EDUCATION AND TRAINING	CA	NSF INTERNATIONAL STRATEGIC REGISTRATIONS LTD	C	610,813	99,055,121	100.000 %		No
NSF SHANGHAI CO LTD NO 258 WUYI ROAD 4TH FLOOR BLDG SHANGHAI CH	PRODUCT CERTIFICATION FOR WATER AND FOOD	CH	NSF INTERNATIONAL	C	610,526	6,763,151	80.000 %		No
NSF SHANGHAI TESTING TECHNOLOGY CO LTD 1188 LIAN HANG ROAD INTELLIGENCE V SHANGHAI CH	LAB TESTING	CH	NSF INTERNATIONAL	C	671,933	6,077,297	100.000 %		No
NSF INTERNATIONAL CHILE SA AV IV CENTENARIO 92 757-0015 LAS CONDES SANTIAGO CI	FOOD SAFETY AUDITS AND CONSULTING	CI	NSF INTERNATIONAL FOOD SAFETY LLC	C	253,214	2,219,958	98.000 %		No
NSF COSTA RICA SA EDIFICIO TERAL II TERCER PISO AVEN SAN JOSE CS	FOOD SAFETY AUDITS AND CONSULTING	CS	NSF AGRICULTURE LLC	C	83,292	1,653,922	100.000 %		No
NSF ECUADOR SA KM 15 VA SAMBORONDON SAMBORONDON EC	FOOD SAFETY AUDITS AND CONSULTING	EC	NSF AGRICULTURE LLC	C	27,573	354,217	100.000 %		No
NSF CERTIFICATION GERMANY GMBH AMSELWEG 5 RHEDAWIDENBRUCK GM	FOOD SAFETY AND ISO 9000/14000	GM	NSF ERDMANN ANALYTICS GMBH	C			100.000 %		No
NSF DEUTSCHLAND GMBH AMSELWEG 5 RHEDAWIDENBRUCK GM	FOOD SAFETY AND ISO 9000/14000	GM	NSF INTERNATIONAL STRATEGIC REGISTRATIONS LTD	C	-1,145,598	56,510,675	100.000 %		No

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust									
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
NSF PROSYSTEM AG AMSELWEG 5 RHEDAWIDENBRUCK GM	FOOD SAFETY AND ISO 9000/14000	GM	NSF DEUTSCHLAND GMBH	C	-1,280,427	14,480,721	100.000 %		No
NSF ERDMANN ANALYTICS GMBH AMSELWEG 5 RHEDAWIDENBRUCK GM	FOOD SAFETY AND ISO 9000/14000	GM	NSF DEUTSCHLAND GMBH	C	-1,564,099	14,401,293	100.000 %		No
NSF ITALY SRL CORSO ROMA 45 BORGOMANERO NOVARA IT	FOOD SAFETY AND ISO 9000/14000	IT	NSF SAFETY & QUALITY UK LTD	C	-19,580	1,418,594	100.000 %		No
NSF KOREA LLC 82-13 SUSAN BUILDING 5TH FLOOR NO SEOUL KS	FOOD SAFETY AUDITS AND CONSULTING	KS	NSF INTERNATIONAL FOOD SAFETY LLC	C	33,812	1,225,388	100.000 %		No
EURO CONSULTANTS SARLAU ZONE VILLA 1065 GROUP HOCINE SALE EL JADIDA MC	FOOD SAFETY AUDITS AND CONSULTING	MC	NSF EURO CONSULTANTS SA	C			100.000 %		No
SHOPPERS ANON LTD 14 QUEEN STREET BRITOMART AUCKLAND NZ	FOOD SAFETY AUDITS AND CONSULTING	NZ	NSF INTERNATIONAL FOOD SAFETY LLC	C	19,897	220,120	100.000 %		No
THE FOOD AUDITOR LTD 14 QUEEN STREET BRITOMART AUCKLAND NZ	FOOD SAFETY AUDITS AND CONSULTING	NZ	NSF INTERNATIONAL FOOD SAFETY LLC	C	427,724	108,817	100.000 %		No
THE NEW ZEALAND SCHOOL OF FOOD HYGIENE LTD 14 QUEEN STREET BRITOMART AUCKLAND NZ	FOOD SAFETY AUDITS AND CONSULTING	NZ	NSF INTERNATIONAL FOOD SAFETY LLC	C	-10,064	1,122,813	100.000 %		No
NSF INASSA SAC AV LA MARINA NO 3035 SAN MIGUEL PE	FOOD SAFETY AUDITS AND CONSULTING	PE	NSF AGRICULTURE LLC	C	-3,214,277	9,945,632	100.000 %		No
NSF PERU SAC AV LA MARINA NO 3035 SAN MIGUEL PE	FOOD SAFETY AUDITS AND CONSULTING	PE	NSF AGRICULTURE LLC	C		91,102	100.000 %		No
EURO CONSULTANTS POLSKA SP Z OO LONDYNSKA 16 M 1 WARSAW PO	FOOD SAFETY AUDITS AND CONSULTING	PO	NSF EURO CONSULTANTS SA	C	74,435		70.000 %		No
NSF INTERNATIONAL ROMANIA SRL STREET COMPASULUI 8 ETAGE 1 BUCAREST RO	FOOD SAFETY AUDITS AND CONSULTING	RO	EC BUL LTD	C	139,785	224,395	84.000 %		No
NSF - AFRICA (PROPRIETARY) LTD 21 ELECTRON AVE TECHNOPARK UNIT F4 NORTHERN CAPE SF	FOOD SAFETY AUDITS AND CONSULTING	SF	NSF SAFETY & QUALITY UK LTD	C	266,044	986,061	100.000 %		No
NSF HEALTH AND SAFETY SPAIN SA AVDA CARLOS III 1 EL PARADOR ALMERIA SP	FOOD SAFETY AUDITS AND CONSULTING	SP	NSF SAFETY & QUALITY UK LTD	C	43,280	816,792	100.000 %		No
EURO CONSULTANTS IT-ECIT SARL IMEUBLE TAMAYOUZ BUR H1 CENTRE URBA TUNIS TS	FOOD SAFETY AUDITS AND CONSULTING	TS	NSF EURO CONSULTANTS SA	C	-12,227	13,680	99.000 %		No

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust									
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								Yes	No
QUASAR CONSULTING SA RUE SAAD ZAGHLOUL 14 ARIANA TS	FOOD SAFETY AUDITS AND CONSULTING	TS	NSF EURO CONSULTANTS SA	C	-59,607	181,753	99.990 %		No
BUILDCERT LTD 30 FERN CLOSE PEN-Y-FAN INDUSTRIAL OAKDALE GWENT WALES UK	WATER SAFETY CERTIFICATION AND CONSULTING	UK	NSF INTERNATIONAL	C			100.000 %		No
INTEGRA FOOD SECURE LIMITED 23 HANBOROUGH PARK LONG HANBOROUGH OXFORD UK	FOOD SAFETY AUDITS AND CONSULTING	UK	NSF AGRICULTURE UK LTD	C		3	100.000 %		No
NSF AGRICULTURE UK LTD 23 HANBOROUGH PARK LONG HANBOROUGH OXFORD UK	FOOD SAFETY AUDITS AND CONSULTING	UK	NSF SAFETY & QUALITY UK LTD	C	1,477,375	35,318,949	100.000 %		No
NSF CERTIFICATION UK LTD 23 HANBOROUGH PARK LONG HANBOROUGH OXFORD UK	FOOD SAFETY AUDITS AND CONSULTING	UK	NSF SAFETY & QUALITY UK LTD	C	-39,038	16,290,645	100.000 %		No
NSF HEALTH SCIENCES UK LTD 23 HANBOROUGH PARK LONG HANBOROUGH OXFORD UK	FOOD SAFETY AUDITS AND CONSULTING	UK	NSF INTERNATIONAL UK LTD	C	1,444,950	5,824,239	100.000 %		No
NSF INTERNATIONAL UK LIMITED 23 HANBOROUGH PARK LONG HANBOROUGH OXFORD UK	FOOD SAFETY AUDITS AND CONSULTING	UK	NSF INTERNATIONAL FOOD SAFETY LLC	C	-2,333,879	39,372,668	100.000 %		No
NSF KNIGHT LTD 23 HANBOROUGH PARK LONG HANBOROUGH OXFORD UK	FOOD SAFETY AUDITS AND CONSULTING	UK	NSF SAFETY & QUALITY UK LTD	C			100.000 %		No
NSF SAFETY AND QUALITY UK LTD 23 HANBOROUGH PARK LONG HANBOROUGH OXFORD UK	FOOD SAFETY AUDITS AND CONSULTING	UK	NSF INTERNATIONAL UK LTD	C	-1,162,253	65,874,446	100.000 %		No
NSF WALES LTD 30 FERN CLOSE PEN-Y-FAN INDUSTRIAL OAKDALE GWENT WALES UK	WATER SAFETY CERTIFICATION AND CONSULTING	UK	NSF INTERNATIONAL	C	498,775	20,391,875	100.000 %		No
NSF HEALTH SCIENCES LLC 789 N DIXBORO ROAD ANN ARBOR, MI 48105 26-2838494	FOOD SAFETY AUDITS AND CONSULTING	MI	NSF INTERNATIONAL HOLDINGS	C	-335,338	116,016,363	100.000 %		No
NSF INTERNATIONAL FOOD SAFETY LLC 789 N DIXBORO ROAD ANN ARBOR, MI 48105 20-2009916	FOOD SAFETY AUDITS AND CONSULTING	MI	NSF INTERNATIONAL HOLDINGS	C	-5,817,440	121,666,620	100.000 %		No
NSF INTERNATIONAL HOLDINGS 789 N DIXBORO ROAD ANN ARBOR, MI 48105 20-2031751	HOLDING COMPANY	MI	NSF INTERNATIONAL	C	2,257,635	246,311,218	100.000 %		No
NSF INTERNATIONAL STRATEGIC REGISTRATIONS CANADA LTD 789 N DIXBORO ROAD ANN ARBOR, MI 48105 20-0014596	TESTING AND CERTIFICATION SERVICES	MI	NSF INTERNATIONAL STRATEGIC REGISTRATION LTD	C	571,767	13,558,971	100.000 %		No
NSF INTERNATIONAL STRATEGIC REGISTRATIONS LTD 789 N DIXBORO ROAD ANN ARBOR, MI 48105 38-3278080	ISO 9000/14000 REGISTRATION SERVICES	MI	NSF INTERNATIONAL HOLDINGS	C	977,699	76,722,860	100.000 %		No

Form 990, Schedule R, Part IV - Identification of Related Organizations Taxable as a Corporation or Trust									
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
NSF SEAFOOD INC (FKA SUREFISH INC) 3900 W 15TH PL BLDG C-10 SEATTLE, WA 981191628 91-1561182	FOOD SAFETY AUDITS AND CONSULTING	WA	NSF INTERNATIONAL FOOD SAFETY LLC	C	-429,393	2,819,484	100.000 %		No
QAI INC 9191 TOWNE CENTER DRIVE SUITE 200 SAN DIEGO, CA 92122 33-0615965	ORGANIC FOOD CERTIFICATION	CA	NSF ACQUISITION 2 LLC	C	1,383,303	16,506,316	100.000 %		No
NSF COLOMBIA SAS CALLE 26 NO 68C 61 OFICINA 527 BOGOTA CO	AUDITING AND TRAINING FOOD SAFETY SERVICES	CO	NSF INTERNATIONAL FOOD SAFETY LLC	C	104,896	355,243	100.000 %		No
NSF SAUDI ARABIA NO 203 SADA BUSINESS CENTRE BLDG RIYADH SA	INSPECTION AND TESTING OF FOOD AND WATER	SA	NSF SAFETY & QUALITY UK LTD	C	-22,644	232,305	100.000 %		No
NSF CERTIFICATION IRELAND 62 PLASSEY VILLAGE NEWCASTLE CAST LIMERICK EI	CERTIFICATION FOR MEDICAL DEVICES IN- VITRO DIAGNOSTICS	EI	NSF INTERNATIONAL UK LTD	C	-10,649	10,413	100.000 %		No
NSF VIETNAM LTD CO 220 LE THANH TON STREET DISTRICT 1 HO CHI MINH CITY VM	AUDIT, INSPECTION, CONSUTING AND TRAINING	VM	NSF INTERNATIONAL HOLDINGS	C	17,298	146,832	100.000 %		No
NSF AUSTRALIA PTY LTD LEVEL 33 264 GEORGE STREET SYDNEY AU	FOOD SAFETY AUDITING AND CONSULTING	AU	THE NEW ZEALAND SCHOOL OF FOOD HYGIENE LTD	C	-233,911	226,357	100.000 %		No
PROSYSTEM CONSULTING SCHWEIZ AG WENGER PLATTNER SEESTRASSE 398700 KSNACHT SZ	CONSULTING AND SERVICE COMPANY IN MEDICAL DEVICES	SZ	NSF PROSYSTEM GMBH	C	-7,266	445,018	100.000 %		No
CIBUS BIOTECH GMBH AMSELWEG 5 RHEDAWIDENBRUCK GM	INTEREST AND CERTIFICATION SERVICES	GM	NSF ERDMANN ANALYTICS GMBH	C	-207,508	-163,547	100.000 %		No
NSF FRANCE SARL AVENUE DU PRESIDENT KENNEDY 65 LILLE BE	FOOD SAFETY AUDITS AND CONSULTING	FR	NSF EURO CONSULTANTS SA	C	94,865	1,137,423	100.000 %		No
NSF JAPAN 25 ALMA LINK BUILDING 8TH FLOOR S BANGKOK TH	INSPECTION AND TESTING OF FOOD AND WATER	TH	NSF INTERNATIONAL HOLDINGS	C	22,575	132,769	100.000 %		No
NSF HK TESTING TECHNOLOGY COMPANY LIMITED 1188 LIAN HANG ROAD INTELLIGENCE V SHANGHAI CH	LAB TESTING	HK	NSF SHANGHAI TESTING TECHNOLOGY CO LTD	C	-19,083	22,435	100.000 %		No
SHANGHAI NFKA CERTIFICATE CO LTD BUILDING B BNEQ PLAZA NO 207 SHANGHAI CH	TESTING AND CERTIFICATION SERVICES	CH	NSF SHANGHAI CO LTD	C	-139,012	249,157	48.000 %		No

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
NSF DEUTSCHLAND GMBH	A	850,632	COST
NSF SHANGHAI TESTING TECHNOLOGY CO LTD	B	1,500,000	COST
NSF DEUTSCHLAND GMBH	D	34,158,884	COST
NSF INTERNATIONAL STRATEGIC REGISTRATIONS LTD	L	4,887,240	COST
QAI INC	L	2,159,280	COST
NSF INTERNATIONAL FOOD SAFETY LLC	L	8,530,080	COST
NSF SEAFOOD INC (FKA SUREFISH INC)	L	300,240	COST
NSF HEALTH SCIENCES LLC	L	7,028,400	COST
NSF SHANGHAI CO LTD	F	935,416	COST