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.

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

2013
Open to Public

Open to Public Inspection

OMB No. 1545-0047

Α	For ti	he 2013 calendar year, or tax year beginning 07/01, 20	13, and ending	0	6/30, 20 14
_		C Name of organization		D Employer identif	ication number
В	Check if a	waterkeeper alliance, inc.		13-40713	18
Г	Addr				
		Number and street (or P O box if mail is not delivered to street address)	Room/suite	E Telephone numb	er
	Initia	al return 17 BATTERY PLACE	1329	(212) 747-	0622
	Tern	City or town, state or province, country, and ZIP or foreign postal code			
	Ame	neded NEW YORK, NY 10004		G Gross receipts \$	11,143,060
		ication F Name and address of puncipal officer GT.F.NN RTNK		H(a) Is this a group re	tum for Yes X No
_	penic	SAME AS C ABOVE		subordinates? H(b) Are all subordinates	anctuded? Yes No
ī	Tax-e	xempt status X 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527		ist (see instructions)
J	Webs	site: WWW.WATERKEEPER.ORG		H(c) Group exemption	number >
ĸ	Form	of organization X Corporation Trust Association Other	L Year of fo	ormation 1999 M Stat	e of legal domicile NY
	art I			· · · · · · · · · · · · · · · · · · ·	
		Briefly describe the organization's mission or most significant activities ORGA	NIZED TO S	ERVE AS THE UM	MBRELLA GROUP
œ	1	FOR PROGRAMS THROUGHOUT NORTH AMERICA AND IN C	THER COUNT	RIES. FOCUSES	
900		ON CITIZEN ADVOCACY ON THE ISSUES THAT AFFECT			
E.	2	Check this box ▶ If the organization discontinued its operations or disposit	osed of more than	25% of its net assets	
õ	3	Number of voting members of the governing body (Part VI, line 1a)		•	13.
•6	4	Number of independent voting members of the governing body (Part VI, line 1b			13.
Self	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)			0
Activities & Governance	6	Total number of volunteers (estimate if necessary)			20.
Aci	72	Total unrelated business revenue from Part VIII, column (C), line 12		7a	
?		Net unrelated business taxable income from Form 990-T, line 34			
i	 -	The difference of the second o		Prior Year	Current Year
•	8	Contributions and grants (Part VIII, line 1h)	ļ-	4,004,785.	10,980,966.
• 2	9	Program service revenue (Part VIII, line 2g)		0	
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0	0
ď.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		52,050.	-252,756.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12		4,056,835.	10,728,210.
ļ —	_	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		469,852.	4,850,059.
• •	14	Benefits paid to or for members (Part IX, column (A), line 4)		0	0
	14-	Salaries, other compensation, employee benefits (Part IX, column (A) lines 5-10)	189,114.	236,879.
3 8	16a	Professional fundraising fees (Part IX, column (A), line 11e)	~···	215,650.	274,027.
Expenses	. b	Total fundraising expenses (Part IX, column (D), line 25)	0.65	 -	
ũ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		2,768,912.	3,286,226.
				3,643,528.	8,647,191.
	19	Total expenses Add lines 13-17 (must equal Part IX, column (A)-line 25) Revenue less expenses. Subtract line 18 from line 12.		413,307.	2,081,019.
5 6	1		E	Beginning of Current Year	End of Year
ets	20	Total assets (Part X, line 16)	<u> </u>	2,147,041.	4,360,529.
A 88	21	Total liabilities (Part X, line 26)		122,155.	254,624.
Net Assets or Fund Balances	22	Net assets or fund balances Subtract line 21 from line 20		2,024,886.	4,105,905.
	rt II	Signature Block			<u> </u>
Un	der pe	nalties of perjury, I declare that I have examined this return, including accompanying scheect, and complete Declaration of preparer (other) han officer) is based on all information of w	edules and statemen	nts, and to the best of my	knowledge and belief, it is
tru	e, corre	ect, and complete Declaration of preparer (other than officer) a based on all information of w	which preparer has a		1.
				13/18/1	ζ.
Sig		Signature of officer		Date Date	
He	re	MARL NYAGGE, EXECUTIVE DIR	ECTOR_	•	
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	MAK 17	nnar Check if	PTIN
Paid		JAMES J REILLY	MAK 1/	2015 Check If self-employed	P00183769
	parer	Firm's name CONDON O'MEARA MCGINTY & DONNEDLY		Firm's EIN ▶ 13-	3628255
USE	Only	Firm's address ONE BATTERY PARK PLAZA, NEW YORK, NY 10004-1405	 _		-661-7777
May	the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No
_		rwork Reduction Act Notice, see the separate instructions.		<u> </u>	Form 990 (2013)

		4071318
orm 990 (2		<u> </u>
Part III	Statement of Program Service Accomplishments	
<u> </u>	Check if Schedule O contains a response or note to any line in this Part III	<u> </u>
-	describe the organization's mission.	
SEE S	CHEDULE O.	<u> </u>
		<u> </u>
		<u> </u>
2 Did the	organization undertake any significant program services during the year which were not listed on the	ė
prior F	orm 990 or 990-EZ?	Yes X
If "Yes,	describe these new services on Schedule O.	
3 Did th	e organization cease conducting, or make significant changes in how it conducts, any program	'n
service	57	Yes X
if "Yes,	describe these changes on Schedule O	
	e the organization's program service accomplishments for each of its three largest program servi	
	es Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and	allocations to o
the tot	al expenses, and revenue, if any, for each program service reported	
a (Code:) (Expenses \$ 5,841,405. including grants of \$ 4,850,059.) (Revenue \$)
	KEEPER SUPPORT: SEE SCHEDULE O.	
		
		<u>-</u>
		
		<u> </u>
		<u>.</u>
		<u> </u>
		1
		
b (Code	(Expenses \$ 366,009. including grants of \$) (Revenue \$)
CLEAN	AND SAFE ENERGY: SEE SCHEDULE O.	<u> </u>
_		
		<u> </u>
		1
		1
		T
c (Code:) (Expenses \$ 249,528. including grants of \$) (Revenue \$	1
	L CONFERENCE: SEE SCHEDULE O.	 /
		
		
		<u> </u>
		1
		1
		1
		
		<u> </u>
d Other p	rogram services (Describe in Schedule O.)	<u> </u>
d Other p		
(Expens	es\$ 1,125,662. including grants of\$) (Revenue\$	
(Expens		

Par	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	_ 3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors	i '		
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If	l .		
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		_X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	Ì . i		17
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	}	i	
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			17
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted		х	
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			-
_	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	144-	х	
h	complete Schedule D, Part VI	11a		
D	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
_	Did the organization report an amount for investments-program related in Part X, line 13 that is 5% or more	 		<u></u>
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
•	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	116	x	
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes,"			
-	complete Schedule D, Parts XI and XII	12a	x	
ь	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate		İ	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other		- 1	
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on		l	
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	_ X	
	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	18	X	
	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	19		<u>X</u>
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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Part	Checklist of Required Schedules (continued)			,
			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	,		
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	 x	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States			x
	on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	 -	_^
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			:
	organization's current and former officers, directors, trustees, key employees, and highest compensated		l x	
	employees? If "Yes," complete Schedule J	23	- A	
24 a			1	
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			x
_	through 24d and complete Schedule K If "No," go to line 25a	24a 24b		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		┼─	}
C	to defease any tax-exempt bonds?	24c		
٨	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a		_	1	
25 a	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	ì	x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior		<u> </u>	
_	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	1	1	
	If "Yes," complete Schedule L, Part L	25b	1	Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payable to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II	26	1	Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	Ì	·	Ì
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions).	ļ		Ì
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	<u> </u>	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		X
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	1		
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	ļ	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		· ·	
	conservation contributions? If "Yes," complete Schedule M	30	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			х
20	Part I	31		
32	complete Schedule N, Part II	32	1 1	Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	-		 -
33	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	} {	х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R Part II, III,			
0-7	or IV, and Part V, line 1	34	} }	х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	-		
-	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2.	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	[
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	197 Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990	(2013)

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ι τρούν τι Νοροσιμο ε Γουργαίου ο τρουσιάθο Δε ΠΟΙΔ ΤΟ ΩΝΥ ΜΠΟ ΤΟ ΙΝΙΟ ΜΩΤΙ Υ			
Check if Schedule O contains a response or note to any line in this Part V		Yes	No
4. Falsatha anakan anakadia David at Farm 1000 Fater O if not employable	34	Yes	NO
b Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			- 1
c Did the organization comply with backup withholding rules for reportable payments to vendors	and		
reportable gaming (gambling) winnings to prize winners?		X	
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	o		
b If at least one is reported on line 2a, did the organization file all required federal employment tax ret	turns? 2b		
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		i	<u> </u>
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?			X
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	1 1		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other aut			
over, a financial account in a foreign country (such as a bank account, securities account, or other financial	ancial		
account)?	4a	ļ	X
b If "Yes," enter the name of the foreign country ▶	[`		١.
See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Account	its Lim		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<u>5a</u>		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction			Х
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and die] i	X
organization solicit any contributions that were not tax deductible as charitable contributions?		-	
b If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or 6b	Ì	ı
gifts were not tax deductible?		-	
 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 g 	noods .	1 -	1.
and services provided to the payor?		X	
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		X	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it	• • • • • • • • • • • • • • • • • • • •		
required to file Form 8282?	7c		X
d If "Yes," indicate the number of Forms 8282 filed during the year	, #21.EV		-
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit con-			X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		_X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as req	ured? 7g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098			
B Sponsoring organizations maintaining donor advised funds and section 509(a)(3) suppo		1]	~ ,
organizations. Did the supporting organization, or a donor advised fund maintained by a spons			
organization, have excess business holdings at any time during the year?	8		
Sponsoring organizations maintaining donor advised funds.			- 1
a Did the organization make any taxable distributions under section 4966?	9a	 - 	
b Did the organization make a distribution to a donor, donor advisor, or related person?	30		
Section 501(c)(7) organizations. Enter. a Initiation fees and capital contributions included on Part VIII, line 12			':- <u>,</u>
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			u .
1 Section 501(c)(12) organizations. Enter:		-	-
a Gross income from members or shareholders		= .	
b Gross income from other sources (Do not net amounts due or paid to other sources		1	, ~
against amounts due or received from them)			2,
2a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 104	1? 12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		· \	
3 Section 501(c)(29) qualified nonprofit health insurance issuers.			
a Is the organization licensed to issue qualified health plans in more than one state?	13a		
Note. See the instructions for additional information the organization must report on Schedule O]	
b Enter the amount of reserves the organization is required to maintain by the states in which	:		
the organization is licensed to issue qualified health plans		ı I	
the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c		 	
the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13c 4a Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
the organization is licensed to issue qualified health plans	14b	990	_

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Par	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O	, and	for a	a "No
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			-1-1
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 13			
	If there are material differences in voting rights among members of the governing body, or if the governing			1
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 13	i !		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
_	any other officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	_3	L	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a_	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	 		
	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:		٠,,	
а	The governing body?	8a	X	
þ	Each committee with authority to act on behalf of the governing body?	8b	X	ļ
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			v
<u></u>	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Coae	<i>9.)</i> Yes	No
		40	X	NO
	Did the organization have local chapters, branches, or affiliates?	10a		<u> </u>
D	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	406	х	
44.	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 11a	X	
-	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	IId		
b 122	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
12a	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	120		
D	rise to conflicts?	12b	x	
^	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		$\neg \neg$	
•	describe in Schedule O how this was done	12c	x	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а		15a	x	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	$\neg \neg$		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		[
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	- [
	organization's exempt status with respect to such arrangements?	16b		
Sect	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ ATTACHMENT 1			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	501(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.	``	, -	• • • • • • • • • • • • • • • • • • • •
	X Own website Another's website X 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 inte	rest r	olicy.	, and
	financial statements available to the public during the tax year.	•	•	
20	State the name, physical address, and telephone number of the person who possesses the books and records of th	е		
	Organization ▶ RACHEL COOK, 17 BATTERY PLACE, SUITE 1329, NEW YORK, NY 10004 212-747-0622			

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

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

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

- **1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees; officers; key employees; highest compensated employees, and former such persons.

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

(A)	(B)	(C) Position						(D)	(E)		(F)	
Name and Title	Average	(do r	not c			e than c	one	Reportable	Reportable	•	Estimated	
	hours per week (list any			-		ıs both tor/trust		compensation from	compensation related	from	amount of other	
	hours for related organizations below dotted	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee	, 	the organization (W-2/1099-MISC)	organization (W-2/1099-M		compensation from the organization and related organizations	
	line)	ıstee	trustee		ă	pensated						
	3.00	Х		х				0		0	o)
(2)GLENN RINK	3.00								-			
CHAIR		X		Х	L			0	<u> </u>	0	0)
(3)PAUL GALLAY TREASURER	3.00	х		X				O		0	0)
(4)WENDY ABRAMS	3.00											
DIRECTOR		X						0		0	0	į
(5)CASI CALLAWAY	3.00											
DIRECTOR		X			L_			0		0	^{*-} 0)
(6)KARL COPLAN	3.00				}						_	
DIRECTOR		_X_						0		0	0	1
(7)GREY HECHT	3.00	.,										
DIRECTOR	2 00	_X					_	0		0	0	1
(8)MARK MATTSON DIRECTOR	3.00	x						0			o	
(9)KRIS MOORE	3.00	_^_			_					0	°	
DIRECTOR		х				į		0		0	0	
(10)LESSING STERN	3.00									 	<u> </u>	
DIRECTOR		x		.				O.		0	0	ı
(11)CHRIS WILKE	3.00									÷Ť		
DIRECTOR		x		- {	i			o		0	0	j
(12)TERRY TAMMINEN	3.00											
DIRECTOR		x	.	-				o		0	0	ı
(13)CHERYL NENN	3.00		\neg							\Box		
DIRECTOR		X	_ (o		0	0	

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(14)MARY BETH POSTMAN

SECRETARY

17) PETER NICHOLS NATIONAL DIRECTOR X 103,846. 0 26,628. 18 103,846. 0 26,628. 19 26,628. 10 26,628. 10 26,628. 20 27 (28 1)	Part VII Section A. Officers, Directors, Tru	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)												
15) MARC YAGGI 50.00 X 169,423. 0 37,909. 16) KELLY FOSTER 40.00 X 103,846. 0 35,645. 17) PETER NICHOLS 40.00 X 103,846. 0 26,628. NATIONAL DIRECTOR X 103,846. 0 26,628. 18 NATIONAL DIRECTOR X 103,846. 0 26,628. 19 PETER NICHOLS 40.00 X 103,846. 0 26,628. 10 PETER NICHOLS 40.00 X 103,846. 0 26,628. 10 Total from continuation sheets to Part VII, Section A 377,115. 0 100,182. 10 Total from continuation sheets to Part VII, Section A 377,115. 0 100,182. 11 Total (add lines 1b and 1c) 442,538. 0 100,182. 12 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization from the organization of the such individual in the compensation and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual for services rendered to the organization? If "Pes," complete Schedule J for such individual for services rendered to the organization? If "Pes," complete Schedule J for such individual for services rendered to the organization? If "Pes," complete Schedule J for such individual for services rendered to the organization? If "Pes," complete Schedule J for such individual for services rendered to the organization? If "Pes," complete Schedule J for such individual for services rendered to the organization? If "Pes," complete Schedule J for such individual for services rendered to the organization? If "Pes," complete Schedule J for such individual for services rendered to the organization? If "Pes," complete Schedule J for such individual for services rendered to the organization? If "Pes," complete Schedule J for such individual for services rendered to the organization? If "Pes," complete Schedule J for such individual for services rendered to the organization? If "Pes," complete Schedule J for such individual for services rendered to the organization? If "Pes," complete Schedule J for such individual for		Average hours per week (list any hours for	box,	Position (do not check more that box, unless person is bo officer and a director/tn				an ee)	Reportable compensation from the	Reporta compensation related organizat	on from d lons	com	stimate nount of other pensal	of con
EXECUTIVE DIRECTOR X 169,423 0 37,909		organizations below dotted	ndividual trustee r director	uonal trus	Officer	ey employee	iighest compensated mployee	ormer		(W-2/1099-	MISC)	org an	anızatı d relate	on ed
16) KELLY POSTER SENIOR ATTORNEY 17) PETER NICHOLS NATIONAL DIRECTOR 18	15) MARC YAGGI	50.00			-			-			†			
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17) PETER NICHOLS 40.00 X 103,846. 0 26,628.		40.00					x		103.846.		0		35,	645.
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Individual	4 For any individual listed on line 1a, is the s	sum of rep	ortab \$15	le c n nr	om)	pen <i>If</i>	satior صحح	ar "	nd other compens	ation from	the			
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								e 113		received			;	

Form	990 (2	WATERKEEPE	R ALLIANCE	INC.		13-4071	318 Page 9
Pa	rt VII						
		Check if Schedule O contains a respo	nse or note to a	ny line in this Part	VIII	<u> </u>	
· v and tappagent and				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts [1a	Federated campaigns 1a			· · · · · · · · · · · · · · · · ·		
ons, Gifts, Grants Similar Amounts	b	Membership dues 1b Fundraising events 1c	1,445,682.				
ns, G Simila	d	Related organizations 1d Government grants (contributions) . 1e					
Contributions, and Other Sim	f	All other contributions, gifts, grants, and similar amounts not included above	9,535,284.				
ig a	9	Noncash contributions included in lines 1a-1f \$		The state of the s			
	h	Total. Add lines 1a-1f	Business Code	10,980,966.	1 1 2		
Program Service Revenue	2a		Buomicos Gue	The second secon	Mark Co. M. at 1904 Tel. Miles		- Marie - Marie - American
vice	b						
n Ser	d				 		
gran	e	All other program service revenue					
<u>P</u>	g	Total. Add lines 2a-2f	<u></u> .▶	0			
	3 4 5	Investment income (including dividends, inter other similar amounts)	proceeds	0 0			
	6a	(i) Real	(II) Personal				
	b	Less. rental expenses			The state of the s		The second transfer of
	7a	Net rental income or (loss) (i) Securities Gross amount from sales of	(II) Other				
	b	Less: cost or other basis and sales expenses					
	c d	Gain or (loss)		0	्यामान्यां व्याप्त		
enne	8a	Gross income from fundraising events (not including \$1,445,682.					
Other Revenue		of contributions reported on line 1c) See Part IV, line 18	128,754.	ا ما الما الما الما الما الما الما الما			
the	b b	Less: direct expenses b Net income or (loss) from fundraising events .	414,850.	-286,096.		and the state of t	-286,096
0	1	Gross income from gaming activities. See Part IV, line 19					
	ľ	Less. direct expenses b			and the second s	and the same of th	and district frameworks assume referen
	10a	Net income or (loss) from gaming activities. Gross sales of inventory, less returns and allowances					
	Ь	Less: cost of goods sold b Net income or (loss) from sales of inventory.		namakati (situmbus) (situmbus) (situmbus) (situmbus)	a dia base & no regaliment personal personal accession	modulus filmonimis di a mitali di aminimi	and the same of th
	᠆᠆	Miscellaneous Revenue	Business Code				*
	11a	LICENSING FEES & OTHER REVENUE	900099	33,340.	33,340.	The second secon	- Turker die Typine Prospiese errossen und Antonio
	b				 		
	C	All other revenue			 		
	d e	All other revenue		33,340.			
	12	Total revenue. See instructions		10,728,210.	33,340.		-286,096

Part IX Statement of Functional Expenses

	ction 501(c)(3) and 501(c)(4) organizations mu				
	Check if Schedule O contains a resp	(A)	(B)	(C)	· · · · · · · · · · · · · · · · · · ·
	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	456,809.	456,809.		
2	Grants and other assistance to individuals in the United States See Part IV, line 22	o			
3	Grants and other assistance to governments,				
	organizations, and individuals outside the United States See Part IV, lines 15 and 16	4,393,250.	4,393,250.		
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	236,879.	176,772.	39,710.	20,397
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	o			
7	Other salaries and wages	0			
8	Pension plan accruals and contributions (include section				
	401(k) and 403(b) employer contributions)	0			
9	Other employee benefits	0			<u> </u>
10	Payroll taxes	0			<u> </u>
11	Fees for services (non-employees).				
а	Management	0			<u> </u>
	Legal	0 704	17.551		1 000
	Accounting	22,784.	17,551.	3,251.	1,982
	Lobbying	274,027.			274,027
	Professional fundraising services See Part IV, line 17.	0			214,021
	Investment management fees	-			<u> </u>
g	Other (If line 11g amount exceeds 10% of line 25, column	470,287.	414,333.	126.	55,828
12	(A) amount, list line 11g expenses on Schedule O)	0			
13		90,808.	59,096.	19,945.	11,767
14	Information technology	0			
15	Royalties	0			
16	Occupancy	113,649.	98,012.	5,488.	10,149
17	Travel	202,184.	170,669.	13,534.	17,981.
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	0			
19		0			<u> </u>
20	Interest	0			
21	Payments to affiliates	8,484.	6,533.	594.	1,357
22	Depreciation, depletion, and amortization	30,036.	12,366.	13,795.	3,875.
23	Insurance	30,030.	12/300.	13,733.	 3,073.
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)				
а	PAYROLL COSTS (SEE SCH. 0)	1,435,734.	1,071,426.	240,684.	123,624.
_	EDUCATIONAL / OUTREACH	627,605.	532,896.	5,703.	89,006.
-	WKA SUPPORT	8,984.			8,984.
d	LITIGATION / REGULATION	167,375.	162,375.	5,000.	
е	All other expenses	108,296.	10,516.	96,351.	1,429.
	Total functional expenses. Add lines 1 through 24e	8,647,191.	7,582,604.	444,181.	620,406.
	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 X if following SOP 98-2 (ASC 958-720)	425,878.	212,939.		212,939.

		WATERKEEPER ALLIANCE, INC.		13	4071318
_	n 990 (Page 11
Pa	ırt X				
		Check if Schedule O contains a response or note to any line in this Pa	<u>rt X </u>	<u> '</u>	<u> </u>
			(A) Beginning of year		(B) End of year
_	1	Cash - non-interest-bearing	1,733,398.	1	3,462,018.
	2	Savings and temporary cash investments	0	2	0
	3	Pledges and grants receivable, net	207,000.		789,100.
	4	Accounts receivable, net	145,352.		41,890.
	5	Loans and other receivables from current and former officers, directors,		- 	<u></u>
	-	trustees, key employees, and highest compensated employees.			
			d	5	0
	6	Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
		organizations (see instructions). Complete Part II of Schedule L	q	6	0
Assets	7	Notes and loans receivable, net		7	0
Ass	8	Inventories for sale or use	0	8	0
_	9	Prepaid expenses and deferred charges	18,784.	9	26,299.
	10 a	Land, buildings, and equipment cost or			
		other basis. Complete Part VI of Schedule D 10a 320,004.			
	b	Less accumulated depreciation	9,834.		8,049.
	11	Investments - publicly traded securities		11	0
	12	Investments - other securities See Part IV, line 11		12_	0
	13	Investments - program-related See Part IV, line 11		13	0
	14	Intangible assets		14_	0
	15	Other assets. See Part IV, line 11	32,673.		33,173.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	2,147,041.		4,360,529.
	17	Accounts payable and accrued expenses	122,155.		254,624.
	18	Grants payable		18	0
	19	Deferred revenue	<u>_</u>	19	0
	20	Tax-exempt bond liabilities		20	0
ties	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	1
Liabilities	22	Loans and other payables to current and former officers, directors,			
Lla		trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	ď	22	0
	23	Secured mortgages and notes payable to unrelated third parties	<u>h</u>	23	
	24	Unsecured notes and loans payable to unrelated third parties	d	_	0
	25	Other liabilities (including federal income tax, payables to related third			<u>. </u>
		parties, and other liabilities not included on lines 17-24) Complete Part X		}	
		of Schedule D	d	25	0
1	26	Total liabilities. Add lines 17 through 25	122,155.	26	254,624.
es –		Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34.			1
anc	27	Unrestricted net assets	837,604.	27	117,452.
Bal	28	Temporarily restricted net assets	1,187,282.	28	3,988,453.
p	29	Permanently restricted net assets	q	29	0
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34.			
ts	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-ın or capıtal surplus, or land, building, or equipment fund		31	
t A	32	Retained earnings, endowment, accumulated income, or other funds [32	
Se	33	Total net assets or fund balances	2,024,886.	33	4,105,905.
	34	Total liabilities and net assets/fund balances	2,147,041.	34	4,360,529.

Form **990** (2013)

Form 9	90 (2013)		Pa	ge 12
Par	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)	10,7		
2	Total expenses (must equal Part IX, column (A), line 25)			191.
3	Revenue less expenses. Subtract line 2 from line 1			019.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	2,0	24,8	386.
5	Net unrealized gains (losses) on investments			0
6	Donated services and use of facilities			0
7	Investment expenses			0
8	Prior period adjustments			0
9	Other changes in net assets or fund balances (explain in Schedule O)			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))	4,1	05,9	905.
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>	
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in	1		
	Schedule O.	1		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Х
	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:	1	ı İ	
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Х	
_	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.			
	X 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?	2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
32	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
va	the Single Audit Act and OMB Circular A-133?	3a		Х
h	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	3ь		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.
►Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Employer identification number Name of the organization 13-4071318 WATERKEEPER ALLIANCE, INC. Reason for Public Charity Status (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 X 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) An organization that normally receives: (1) more than 331/3 % 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 331/3 % 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) An organization organized and operated exclusively to test for public safety See section 509(a)(4). 10 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h b Type II c Type III-Functionally integrated d l Type III-Non-functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting f organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and Yes No (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) (i) Name of supported (ii) EIN (iii) Type of organization (iv) is the (v) Did you notify (vi) is the (vii) Amount of monetary (described on lines 1-9 organization in organization the organization organization in support col (i) listed in above or IRC section in col (i) of your col (i) organized your governing (see instructions)) support? in the US? document? Yes No Yes No Yes No (A) (B) (C) (D) (E)

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

Schedule A (Form 990 or 990-EZ) 2013

Total

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support	<u> </u>					
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants")	3,557,863.	3,416,555.	2,873,202.	4,004,785.	10,980,966.	24,833,371.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	3,557,863.	3,416,555.	2,873,202.	4,004,785.	10,980,966.	24,833,371.
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						4 501 520
6	shown on line 11, column (f) Public support. Subtract line 5 from line 4.	77	, , ,				4,591,539.
Sec	tion B. Total Support	l	<u> </u>		L	 	20/211/032.
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	3,557,863.	3,416,555.	2,873,202.	4,004,785.	10,980,966.	24,833,371.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	123.					123.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV) . ATCH. 1	24,633.	39,023.	72,516.	40,254.	33,340.	209,766.
11	Total support. Add lines 7 through 10	<u> </u>					25,043,260.
12	Gross receipts from related activities, etc. (s	•				12	
13 Sec	First five years. If the Form 990 is forganization, check this box and stop here tion C. Computation of Public Sup	<u></u>	<u> </u>	d, third, fourth,	or fifth tax yea	ar as a section	501(c)(3) ▶
14	Public support percentage for 2013 (li			11 column (f)		14	80.83%
15	Public support percentage from 2012					15	90.68%
	331/3% support test - 2013. If the o						
	this box and stop here. The organization						
b	331/3% support test - 2012. If the o	organization did	not check a bo	ox on line 13 o	r 16a, and line	15 is 331/3 % d	or more,
	check this box and stop here. The orga	anization qualıfic	es as a publicly s	supported orgai	nization		▶ 🔲
17a	10%-facts-and-circumstances test - 2						
	10% or more, and if the organization						
	Part IV how the organization meets t			-	•		• •
	organization						▶ 📖
b	10%-facts-and-circumstances test - 2						
	15 is 10% or more, and if the orga				•	1	•
	Explain in Part IV how the organization				•	•	·
18	supported organization	did not chack a	hoy on line 12	16a 16h 17a	or 17h chook	this boy and as-	▶∟
					•		_
	instructions	• • • • • • • • • • • • • • • • • • • •	 	·····	· · · · · · · · · · · · · · · · · · ·		

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.

If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support			· · · · · · · · · · · · · · · · · · ·	-,		
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees]					
	received (Do not include any "unusual grants")					<u> </u>	
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities			1			1
	furnished in any activity that is related to the			1			
	organization's tax-exempt purpose						
•		ļ	-	 	 	 	
3	Gross receipts from activities that are not an						
_	unrelated trade or business under section 513			-		 	
4	Tax revenues levied for the			1			
	organization's benefit and either paid	!					
	to or expended on its behalf		ļ				-
5	The value of services or facilities]				
	furnished by a governmental unit to the						
	organization without charge						<u> </u>
6	Total. Add lines 1 through 5				J		
7 a	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		}	1	}		1
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year		1				1
_	Add lines 7a and 7b						<u> </u>
С 8	Public support (Subtract line 7c from			 	 		
o	line 6)		1			1	1
500				<u> </u>	<u></u>		
	tion B. Total Support	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(0) 2012	(9 Total
	ndar year (or fiscal year beginning in)	(a) 2009	(8) 2010	(0) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6			 			
10 a	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		1	1			
	acquired after June 30, 1975				1		1
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			1	1		1
	loss from the sale of capital assets			1	1		1
	(Explain in Part IV.)			 		<u> </u>	
13	Total support. (Add lines 9, 10c, 11,			1	1		1
	and 12)		L	<u> </u>	<u></u>	L	L
14	First five years. If the Form 990 is for	-			•		• • • •
	organization, check this box and stop here.			<u> </u>	<u></u>	<u> </u>	▶ │
	ion C. Computation of Public Sup						
	Public support percentage for 2013 (line 8,					15	%
16	Public support percentage from 2012 Sche	dule A, Part III, lin	ne 15	<u> ,</u>		16	%
	ion D. Computation of Investmen						
17	Investment income percentage for 2013 (lir	ne 10c, column (f) divided by line	13, column (f))		17	%
	Investment income percentage from 2012					18	%
	331/3% support tests - 2013. If the org						
	17 is not more than 331/3 %, check thi					1 -	
	331/3% support tests - 2012. If the orga						
	line 18 is not more than 331/3 %, check			-	•		 -(
	Private foundation. If the organization	did not check a	a box on line	14, 19a, or 19b			
JSA 3E1221	1 000				S	chedule A (Form	990 or 990-EZ) 2013
	K4H00Y M261						

Schedule A (Form 990 or 990-EZ) 2013

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

SCHEDULE A, PART II -	- OTHER INCOM	1E			ATTACHMENT 1	
DESCRIPTION	2009	2010	2011	2012	2013	TOTAL
OTHER REVENUE	24,633.	39,023.	72,516.	40,254.	33,340.	209,766.
TOTALS	24,633.	39.023.	72,516.	40,254.	33,340.	209,766.

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ▶ Information about Schedule C (Form 990 or 990-EZ) and its

instructions is at www.irs.gov/form990.

OMB No 1545-0047

Schedule C (Form 990 or 990-EZ) 2013

Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations. Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)). Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A.

	e of organization			Employer iden	tification number	
WA:	PERKEEPER ALLIANCE,	INC.		13-40	071318	
Pa	rt I-A Complete if the	organization is exempt under	section 501(c) c	r is a section 527 orga	anization.	
1	Provide a description of the	organization's direct and indirect	political campaign	activities in Part IV.		
2	Political expenditures			▶\$		
3	Volunteer hours			· · · · · · · · · · · · · · · · · · ·		
Pa	t I-B Complete if the	organization is exempt under	section 501(c)(3)	·		
1		cise tax incurred by the organization				
2	Enter the amount of any ex	cise tax incurred by organization m	anagers under se	ction 4955 ▶ \$		
3		a section 4955 tax, did it file Form				No
		. 	. 		Yes	No
	If "Yes," describe in Part IV.					
Par		organization is exempt under			3).	
1		expended by the filing organization				
2		ng organization's funds contributed				
		es				
3	Total exempt function exp	enditures. Add lines 1 and 2. En	ter here and on	Form 1120-POL.		
	line 17b					
4	Did the filing organization fil	e Form 1120-POL for this year?				
4 5	Did the filing organization fil Enter the names, addresses	e Form 1120-POL for this year? and employer identification numb	er (EIN) of all sec	tion 527 political organiz	ations to which the	e filing
	Did the filing organization fil Enter the names, addresses organization made payment	e Form 1120-POL for this year? and employer identification numb s. For each organization listed, en	er (EIN) of all sec ter the amount pa	tion 527 political organized from the filing organized	ations to which the	e filino ente
	Did the filing organization fill Enter the names, addresses organization made payment the amount of political confi	e Form 1120-POL for this year? and employer identification numb	er (EIN) of all sec ter the amount pa ptly and directly o	tion 527 political organizated from the filing organizately	cations to which the zation's funds. Also olitical organization	e filino ente n, sucl
	Did the filing organization fill Enter the names, addresses organization made payment the amount of political confi	e Form 1120-POL for this year? and employer identification numb s. For each organization listed, en tributions received that were prom	er (EIN) of all sec ter the amount pa ptly and directly o	tion 527 political organizated from the filing organizately	cations to which the zation's funds. Also olitical organization	e filing o ente n, sucl
	Did the filing organization fil Enter the names, addresses organization made payment the amount of political contast a separate segregated fur	e Form 1120-POL for this year? and employer identification numb s. For each organization listed, en tributions received that were promoted or a political action committee (F	er (EIN) of all sec ter the amount pa ptly and directly of PAC) If additional	tion 527 political organizated from the filing organizate perspace is needed, provide (d) Amount paid from filing organization's	zations to which the zation's funds Also olitical organization in Part (e) Amount of policions received.	e filing o ente n, suci IV. Iitical ved and
	Did the filing organization fil Enter the names, addresses organization made payment the amount of political contast a separate segregated fur	e Form 1120-POL for this year? and employer identification numb s. For each organization listed, en tributions received that were promoted or a political action committee (F	er (EIN) of all sec ter the amount pa ptly and directly of PAC) If additional	tion 527 political organizated from the filing organizate personal televered to a separate personal pace is needed, provide (d) Amount paid from	zations to which the zation's funds Also olitical organization information in Part (e) Amount of policontributions receive promptly and directions.	e filing o ente n, suci iV. litical ved and ectly
	Did the filing organization fil Enter the names, addresses organization made payment the amount of political contast a separate segregated fur	e Form 1120-POL for this year? and employer identification numb s. For each organization listed, en tributions received that were promoted or a political action committee (F	er (EIN) of all sec ter the amount pa ptly and directly of PAC) If additional	tion 527 political organizated from the filing organizate perspace is needed, provide (d) Amount paid from filing organization's	zations to which the zation's funds Also olitical organization information in Part (e) Amount of pol contributions receive promptly and directly delivered to a sep	e filing o ente n, suc itV. litical ved and ectly parate
	Did the filing organization fil Enter the names, addresses organization made payment the amount of political contast a separate segregated fur	e Form 1120-POL for this year? and employer identification numb s. For each organization listed, en tributions received that were promoted or a political action committee (F	er (EIN) of all sec ter the amount pa ptly and directly of PAC) If additional	tion 527 political organizated from the filing organizate perspace is needed, provide (d) Amount paid from filing organization's	zations to which the zation's funds Also olitical organization information in Part (e) Amount of policontributions receive promptly and directions.	o enten, such Itical ved and ectly parate ion If
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' Sch	nedule C (Form 990 or 990-EZ) 2013	WATERKEE	PER A	ALLIANCE, INC.		13-4	1071318 Page
P	art II-A Complete if the or section 501(h)).	ganization i	s exe	mpt under section	n 501(c)(3) and	l filed Form 5768 (ele	
A				to an affiliated grou d share of excess I		art IV each affiliated g ditures).	roup member's
В	Check ▶ if the filing orga	anization che	<u>ecked</u>	box A and "limited	control" provisi	ions apply	
		on Lobbying				(a) Filing	(b) Affiliated
	(The term "expendi	tures" means	amou	ints paid or incurred.	.)	organization's totals	group totals
18	Total lobbying expenditures t	o influence pu	iblic op	oinion (grass roots lo	bbying)	725.	
ŀ	Total lobbying expenditures t	to influence a	legisla	tive body (direct lobb	yıng)	1,095.	
c	Total lobbying expenditures (add lines 1a a	and 1b)			1,820.	
(d Other exempt purpose exper					7,580,784.	
e						7,582,604.	
f							
	columns.					529,130.	
	If the amount on line 1e, column (a	a) or (b) is: The	lobbyi	ng nontaxable amount	is:		
	Not over \$500,000	20%	of the	amount on line 1e			
	Over \$500,000 but not over \$1,000	0,000 \$10	0,000 p	lus 15% of the excess	over \$500,000		
	Over \$1,000,000 but not over \$1,5			lus 10% of the excess			
	Over \$1,500,000 but not over \$17,		5,000 p	lus 5% of the excess of	ver \$1,500,000		
	Over \$17,000,000	\$1,0	000,000)	1		
g	Grassroots nontaxable amou	nt (enter 25%	of line	1f)		132,283.	
h	Subtract line 1g from line 1a	If zero or less	, enter	- 0	<u>.</u> [0	
i	Subtract line 1f from line 1c					0	
j	If there is an amount other					ation file Form 4720	
	reporting section 4911 tax for	r this year? .			<u></u> <u>.</u>		Yes X No
				raging Period Under			
	(Sama arganizat				, ,	o complete all of the fiv	
				instructions for lin		•	/e
		Lobbying	Expe	nditures During 4-Ye	ar Averaging Pe	riod	
	Calendar year (or fiscal year beginning in)	(a) 2010) 	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a	Lobbying nontaxable amount	282,	633.	273,453.	295,10	1. 529,130.	1,380,317.
	Lobbying ceiling amount (150% of line 2a, column (e))						2,070,476.
	Total lobbying expenditures	2,	031.	2,229.	2,06	6. 1,820.	8,146.
d	Grassroots nontaxable amount	70,	658.	68,363.	73,77	5. 132,283.	345,079.
е	Grassroots ceiling amount (150% of line 2d, column (e))				·		517,619.
f	Grassroots lobbying expenditures	1,	911.	2,172.	1,65	8. 725.	6,466.

Schedule C (Form 990 or 990-EZ) 2013

Page 3

During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of a Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Mailings to members, legislators, or the public? Mailings to members, legislators, or the public? Mailings to members, legislators, or the public? Mailings to members, legislators, their staffs, government officials, or a legislative body? Mailings demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total Add lines 1c through 1: Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Part IIII-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received noneducutible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization make only in-house lobbying and political expenditures from the prior year? 3 Dies, assessments and similar amounts from members Section 150(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 150(e) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members Carryover from last year Carryover from last year Carryover from last year Carryover f	-or	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(a)	1	(b)	
legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? b Mailings to members, legislators, or the public? b Mailings to members, legislators, or the public? c Publications, or published or broadcast statements? d Mailings to members, legislators, their staffs, government officials, or a legislative body? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? j Total Add lines 1c through 1i a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred under section 4912 d If the fitting organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? 2 Did the organization agree to carry over lobbying and political expenditures from the prior year? Dives, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year C Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover t			Yes	No		Am	ount	
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A Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1))? Media advertisements? Media advertisements? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Publications, seminars, conventions, speeches, lectures, or any similar means? Next and dines 1c through 11 Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? Next if 'Yes," enter the amount of any tax incurred by organization managers under section 4912 If 'Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures from the prior year? Intelligible Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year. Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year. Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agr		legislation, including any attempt to influence public opinion on a legislative matter or]				
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h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total Add lines 1c through 1: a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b if "Yes," enter the amount of any tax incurred under section 4912 c if "Yes," enter the amount of any tax incurred by organization managers under section 4912 lif the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Did the organization agree to carry over lobbying and political expenditures from the prior year? Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues if notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Total Supplemental Information Povide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line 2, and		Direct contact with legislators, their staffs, government afficials, or a legislative body?			 			
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Taxable amount of lobbying and political expenditures (see instructions)			-	- I	4			
rovide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line 2, and	;				5			
	ar							
art II-B, line 1. Also, complete this part for any additional information.	rov	de the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated g	roup i	ıst); P	art II-A	l, line	2, and	Ī
	art	II-B, line 1. Also, complete this part for any additional information.						
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Schedule C (Form 990 or 990-EZ) 2013

Part IV Supplemental Information (continued)

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Employer identification number Name of the organization WATERKEEPER ALLIANCE, INC. 13-4071318 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part i Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate contributions to (during year) 3 Aggregate 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. 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 Tax Year 2a Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register...............2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ ______ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 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)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and 9 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" to Form 990, Part IV, line 8. 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. 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: 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:

▶ \$ |

Pa	rt III Organizations Maintaining Colle	ections of Art,	Historical T	reasures,	or Other Sin	nilar Asse	ts (cont	inued)
3	Using the organization's acquisition, accessoilection items (check all that apply):	ssion, and other r	records, chec	k any of th	e following tha	t are a sign	nificant u	se of its
а	Public exhibition	d	Loan	or exchange	e programs			
b	Scholarly research	е	Other					
С				-~-~		·		
4	Provide a description of the organization's	collections and	explain how t	hey further	the organization	on's exemp	t purpose	e in Part
	XIII.		•	-	-			
5	During the year, did the organization solicit	or receive donatic	ons of art, hist	orical treasi	ures, or other sir	milar		
	assets to be sold to raise funds rather than t						Yes	No
Pa	rt IV Escrow and Custodial Arrangem or reported an amount on Form !	ents. Complete	if the organ				0, Part I\	/, line 9,
	Is the organization an agent, trustee, custod included on Form 990, Part X?						Yes	No
	•	·			1	Amount		
С	Beginning balance			1c	ļ			
	Additions during the year							
е	Distributions during the year	<i></i>		1e				
f	Ending balance					<u></u>		
2a	Did the organization include an amount on l	Form 990, Part X,	line 21?				Yes	No
b	If "Yes," explain the arrangement in Part XIII	. Check here if the	e explanation	has been p	rovided in Part X			
	rt V Endowment Funds. Complete if							
-) Prior year	(c) Two yea		e years back	(e) Four y	ears back
1a	Beginning of year balance 1,1	87,282. 1	,137,998.	857	,031. 2	92,838.	2	74,535
b	Contributions 8,4	58,025. 1	,132,000.	1,102	,000. 1,4	54,341.	1,0	65,797
С	Net investment earnings, gains,							
	and losses			!	1			
d	Grants or scholarships							
е	Other expenditures for facilities							
	and programs 5,6	556,854. 1	,082,716.	821	,033. 8	90,148	1,0	47,494
f	Administrative expenses							
g	End of year balance 3,9	88,453. 1	,187,282.	1,137	,998. 8	57,031.	2	92,838
2	Provide the estimated percentage of the cur	rent year end bal	ance (line 1g,	column (a))	held as			
а	Board designated or quasi-endowment	%	, ,					
b	Permanent endowment ▶ %							
С	Temporarily restricted endowment ▶ 100	.0000 %						
	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%.						
3a	Are there endowment funds not in the poss	ession of the orga	anization that	are held an	d administered f	or the		
	organization by:						Y	es No
	(i) unrelated organizations						3a(i)	X
	(ii) related organizations						3a(ii)	X
b	If "Yes" to 3a(II), are the related organization						3b	
4	Describe in Part XIII the intended uses of the	organization's er	ndowment fun	ds.				
Par	t VI Land, Buildings, and Equipment.							
	Complete if the organization ans	wered "Yes" to F (a) Cost or other bas (investment)	sis (b) Cost o	other basis her)	(c) Accumulated depreciation		X, line 1 I) Book value	
1a	Land							
b	Buildings					 		
C	Leasehold improvements					 		
d	Equipment		3	20,004.	311,955	5	- 1	8,049.
е	Other					1		
	I. Add lines 1a through 1e (Column (d) must	equal Form 990, F	Part X, column	(B), line 10	(c).),	-		3,049.
	<u></u>						ule D /Form	

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Part VII	Complete if the organization answer	ered "Yes" to 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 valuati Cost or end-of-year marke	on.
(1) Financi	al derivatives			
	-held equity interests			<u> </u>
(3) Other_				
				
(C)				
(C)				
10)				<u>' </u>
(F)				:
(G)				1
(H)				
	n (b) must equal Form 990, Part X, col (B) line 12)			!
Part VIII	Investments - Program Related.			
	Complete if the organization answe	red "Yes" to 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	
(1)	·			<u> </u>
(2)				
(3)				
(4) (5)				
(6)				.
(7)				<u></u>
(8)				
(9)				
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 13)			
Part IX	Other Assets. Complete if the organization answe	red "Yes" to Form 990,	Part IV, line 11d. See Form 990,	Part X, line 15.
		(a) Description		(b) Book value
(1)				
(2)				<u> </u>
(3)				<u> </u>
(5)				
(6)				
(7)				
(8)				<u> </u>
(9)				
Total. (Cold	umn (b) must equal Form 990, Part X, col. (B) line 15)	,.,.,., >	
Part X	Other Liabilities. Complete if the organization answe line 25.	red "Yes" to Form 990,	Part IV, line 11e or 11f. See Form	990, Part X,
1.	(a) Description of Irability	(b) Book value		
	ral income taxes			
(2)				
(3)				
(4)				
(5)				
_(6)				
_(7)				
(8)				
(9) Tatal (Calva	(1)	25)		
	nn (b) must equal Form 990, Part X, col. (B) line 2			
Z. Liability for	or uncertain tax positions. In Part XIII, provide t	ne text of the footnote to the	organization's financial statements that rep	orts the

Part XIII Supplemental Information (continued)

PART V - LINE 4

THE TEMPORARILY RESTRICTED NET ASSETS REPRESENT CONTRIBUTIONS AND GRANTS THAT ARE RESTRICTED BY THE DONOR FOR A SPECIFIC PURPOSE OR PERTAIN TO FUTURE PERIODS (TIMING). ONCE THAT SPECIFIC PURPOSE HAS BEEN MET OR THE TIME RESTRICTION EXPIRES, THE FUNDS ARE RELEASED AND REFLECTED AS NET ASSETS RELEASED FROM RESTRICTIONS. THE FUNDS PURPOSE ARE TO FURTHER THE WATERKEEPER ALLIANCE, INC.'S MISSION.

PART X - LINE 2

AS OF JUNE 30, 2014, NO AMOUNTS WERE RECOGNIZED FOR UNCERTAIN INCOME TAX POSITIONS. THE ALLIANCE'S TAX RETURNS FOR THE 2011 FISCAL YEAR AND FORWARD ARE SUBJECT TO THE USUAL REVIEW BY THE APPROPRIATE AUTHORITIES.

PART XI - LINE 2D

DIRECT FUNDRAISING EXPENSES: 414,850.

PART XII - LINE 2D

DIRECT FUNDRAISING EXPENSES: 414,850.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990. ► See separate instructions.

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization				Employer identif	ication number
WATERKEEPER ALLIANCE,	INC.			13-40713	18
Part I General Informati Form 990, Part IV, Ir		Outside the	United States. Complete	e if the organization ans	wered "Yes" on
1 For grantmakers. Does the					
assistance, the grantees' ele	gibility for the gran	ts or assistanc	e, and the selection criter	a used to award the	
grants or assistance?			• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •	X Yes No
2 For grantmakers. Describe assistance outside the Unite		ganization's p	rocedures for monitoring	the use of its grants	and other
3 Activities per Region. (The f	ollowing Part I, line	3 table can be	e duplicated if additional sp	pace is needed)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., 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 region	(f) Total expenditures for and investments in region
(1) EAST ASIA AND THE PACIFIC		i	GRANTMAKING	GRANTS & SCHOLARSHIP	155,216.
(2) NORTH AMERICA			GRANTMAKING	SCHOLARSHIP	2,550.
(3) CENTRAL AMERICA/CARIBBEAN			GRANTMAKING	GRANTS & SCHOLARSHIP	4,217,529.
(4) EUROPE			GRANTMAKING	SCHOLARSHIP	1,663.
(5) MIDDLE EAST AND NORTH AFRIC	CA		GRANTMAKING	SCHOLARSHIP	1,963.
(6) SOUTH ASIA			GRANTMAKING	SCHOLARSHIP	14 320
(6) SOUTH ASIA		, , ,	GRANIPARING	SCHOLLARSHIP	14,329.
(7)					
(8)					
(9)					
10)					
11)					
12)		-			
13)					
14)		 .		-	
15)					
16)					
17)					
3a Sub-total	- 	<u></u>			4,393,250.
b Total from continuation	on	·			1,333,200.
sheets to Part I					
c Totals (add lines 3a and 3	b)		I	_	4,393,250.

13-4071318

WATERKEEPER ALLIANCE, INC.

Schedule F (Form 990) 2013

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 dunlicated if additional space is needed Part II

				 					_			<u> </u>				
											:					
VARIOUS	VARIOUS	VARIOUS														
4,217,529.	155, 216.	14,329.						1								
SUPPORT	SUPPORT	SUPPORT														
SENT. AMERICA/CARIBBEAN	ZAST ASIA/PACIFIC	SOUTH ASIA														
		ومواد المراد الم				The state of the s					The state of the s					
									(0)			(3)	(A)	(2)	(6)	
	GENT. AMERICA/CARIBBEAN SUPPORT 4,217,529.	CENT. AMERICA/CARIBBEAN SUPPORT 4,217,529. VARIOUS SUPPORT 155,216. VARIOUS	CENT. AMERICA/CARIBBEAN SUPPORT 4,217,529. VARIOUS EAST ASIA/PACIFIC SUPPORT 155,216. VARIOUS SOUTH ASIA SIA SUPPORT 14,329. VARIOUS	CENT. AMERICA/CARIBBEAN SUPPORT 4,217,529. VARIOUS EAST ASIA/PACIFIC SUPPORT 155,216. VARIOUS SOUTH ASIA SUPPORT 14,329. VARIOUS	CENT. AMERICA/CARIBBEAN SUPPORT 4,217,529. VARIOUS EAST ASIA/PACIFIC SUPPORT 155,216. VARIOUS SOUTH ASIA SUPPORT 14,329. VARIOUS	CENT. AMERICA/CARIBBEAN SUPPORT 4,217,529. VARIOUS EAST ASIA/PACIFIC SUPPORT 155,216. VARIOUS SOUTH ASIA SUPPORT 14,329. VARIOUS	CENT. AMERICA/CARIBBEAN SUPPORT 4,217,529. VARIOUS EAST ASIA/PACIFIC SUPPORT 155,216. VARIOUS SOUTH ASIA SUPPORT 14,329. VARIOUS	CENT. AMERICA/CARIBBEAN SUPPORT 4,217,529. VARIOUS EAST ASIA/PACIFIC SUPPORT 115,216. VARIOUS SOUTH ASIA SUPPORT 14,329. VARIOUS	CENT. AMERICA/CARIDBEAN SUPPORT 4,217,529. VARIOUS EAST ASIA/PACIFIC SUPPORT 155,216. VARIOUS SOUTH ASIA. SUPPORT 14,329. VARIOUS	CENT. AMERICA/CARIBBEAN SUPPORT 4,217,529. WARIOUS SOUTH ASIA SUPPORT 1155,216. WARIOUS SOUTH ASIA SUPPORT 14,329. WARIOUS	CENT. AMERICA/CARIBBEAN SUPPORT 4,217,529. VARIOUS SOUTH ASIA. SUPPORT 115,729. VARIOUS SOUTH ASIA. SUPPORT 114,329. VARIOUS	SOUTH ASIA, SUPPORT 153,216, VARIOUS SOUTH ASIA, SUPPORT 114,229, VARIOUS SOUTH ASIA, SUPPORT 114,229, VARIOUS	CDPT. AMERICA/CARIBBEAN SUPPORT 4,211,529. VARIOUS SOUTH ASIA SUPPORT 114,329. VARIOUS SOUTH ASIA SUPPORT 14,329. VARIOUS SOUTH ASIA SUPPORT 14,329. VARIOUS SOUTH ASIA SUPPORT 14,329. VARIOUS	CEPT. AMERICA/CARIBERNI SUPPORT 4,227,529. WARTONS COUTL ASTA. SUPPORT 114,329. WARTONS SUPPORT 14,329. WARTONS	SOUTH ASTA ASTA PROTECT SUPPORT 155,216. VARIOUS 155,216. VARIOUS 155,216. VARIOUS 15,229. VAR	Cerr. August CA/CANTINEAN SUPPORT 115,233, VANTOUS

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. Enter total number of other organizations or entities. e

Schedule F (Form 990) 2013

13-4071318

WATERKEEPER ALLIANCE, INC.

Schedule F (Form 950) 2013

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.

are in car to define a dedical space is needed.	montal 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 non-cash assistance	(g) Description of non-cash assistance	(h) Method of Valuation (book, FMV, appraisal, other)
(1)		:		 		·	
(2)							
(3)							
(4)							
(5)							
(9)							
(2)							
(8)							
(6)							
(10)							
(11)						•	
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
						Cche	Schodule E (Form 900) 2042

Schedule F (Form 990) 2013

JSA

3E1276 1 000 K4H00Y M261

1	Was the organization a US 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 US Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to 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)	Yes	X 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	X 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	X 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	X 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 file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

Schedule F (Form 990) 2013

Part V

Supplemental Information

Complete this part to 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).

PART I - OUESTION 2

CRITERIA FOR ALLOCATING FUNDS FOR INTERNATIONAL PROGRAM SUPPORT PROJECT:

- PRIORITY OF FUNDING GIVEN TO FIRST TIME APPLICANTS.
- APPLICANTS ARE REQUIRED TO COMPLETE AN APPLICATION FORM.
- THE WATERKEEPER ORGANIZATION MUST HAVE BEEN ACCEPTED WITHIN THE ALLIANCE FOR AT LEAST 12 MONTHS.
- FUNDS REQUESTED MUST BE UTILIZED TO FULFILL OR CONTINUE COMPLIANCE OF A SPECIFIC WATERKEEPER ALLIANCE'S QUALITY STANDARD.
- FUNDS CANNOT BE UTILIZED FOR TRAVEL SCHOLARSHIPS UNLESS DESIGNATED BY OUTSIDE FUNDER.
- REPORT OF EXPENDED FUNDS WITH DOCUMENTATION REQUIRED WITHIN TWELVE MONTHS OF GRANT ISSUANCE OR WITHIN TWO MONTHS OF EXPENSE, WHICHEVER COMES FIRST.
- GRANTS CHANNELED FROM WKA FROM OUTSIDE FUNDERS ARE REQUIRED TO COMPLY WITH ADDITIONAL REPORTING IN ACCORDANCE WITH FUNDER RULES.

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete If the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Attach to Form 990 or Form 990-EZ.

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

Inspection

Name of the organization			_		Employer identification	on number
WATERKEEPER ALLIANCE, INC.					13-407131	
Part I Fundraising Activities. Cor Form 990-EZ filers are not	•			"Yes" to Form 9	90, Part IV, line	17 .
1 Indicate whether the organization ra				activities Check a	all that apply.	
a X Mail solicitations	e		_	non-government g		
b X Internet and email solicitations	f			government grant		
c Phone solicitations	g			ising events		
d X In-person solicitations	J			9		
2a Did the organization have a written	or oral agreement w	uth any in	dividual (in	cluding officers d	irectors trustees	
or key employees listed in Form 990					ising services?	X Yes No
b If "Yes," list the ten highest paid inc	lividuals or entities	(fundraise	ers) pursua	ant to agreements	-	
compensated at least \$5,000 by the	organization			-		
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	ndraiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1	PR/ EVENT		"			
CW & CO.	PRODUCTION	İ	x	1,571,052.	140,027.	1,431,028.
2		 	<u> </u>			
GGD ENTERTAINMENT	FUNDRAISING	ļ	X	45,000.	47,000.	
RH DEVELOPMENT	FUNDRAISING		x	50,000.	15,000.	35,000.
4					20,000.	33,000.
LW ROBBINS	DIRECT MAIL)) x	290,451.	72,000.	218,451.
5						
6						
7						
8						
9						
10						'
					_	
Total				1,956,503.	274,027.	1,684,479.
3 List all states in which the organiza	tion is registered of		to solicit			
registration or licensing	don is registered of	110011000	10 3011011	CONTRIBUTIONS OF I	as been notined	it is exempt itom
AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA	A.HI.IL.					
KS, KY, LA, ME, MD, MA, MI, MN, MS, MO		NJ, NM,	NY, NC, N	ND, OH,		
OK, OR, PA, RI, SC, SD, TN, TX, UT, VA	A, WA, WV, WI,					
						
	··· ·		<u> </u>			<u> </u>
						<u> </u>
						<u> </u>

Pa	irt l	Fundraising Events. Complete than \$15,000 of fundraising ever gross receipts greater than \$5,0	nt contributions and gro			
		grood roccipio groater than \$0,0	(a) Event #1 ART FOR WATER	(b) Event #2 CELEB SKI	(c) Other events	(d) Total events (add col. (a) through
a)			(event type)	(event type)	(total number)	col (c))
Revenue	1	Gross receipts	928,962.	553,049.	92,425.	1,574,436
œ		Less Contributions	859,400.	506,282.	80,000.	1,445,682
_	3	Gross income (line 1 minus line 2)	69,562.	46,767.	12,425.	128,754
	4	Cash prizes				
	5	Noncash prizes				
nses	6	Rent/facility costs				
Direct Expenses	7	Food and beverages	13,934.		2,810.	16,744
Direc	8	Entertainment				<u> </u>
	9	Other direct expenses	161,298.	231,561.	5,247.	398,106
	10 11	Net income summary. Subtract line 1	0 from line 3, column (d) . <u></u>	<u>.</u>	414,850
Pa	rτι	Gaming. Complete if the orgathan \$15,000 on Form 990-E		es" to Form 990, Par	IV, line 19, or repo	rtea more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col. (c))
Rev	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Noncash prizes	· · · · · · · · · · · · · · · · · · ·			
Direct [4	Rent/facility costs	<u> </u>			
_	5	Other direct expenses				
	6	Volunteer labor	Yes%	Yes%	Yes%	
	7	Direct expense summary Add lines 2	through 5 in column (d)		▶	
	8	Net gaming income summary. Subtra	act line 7 from line 1, col	umn (d)		
	E:	nter the state(s) in which the organizat	ion operates gaming act	ivities:of these states?		. Yes No
		ere any of the organization's gaming li "Yes," explain:		nded or terminated durin		. Yes No
_	_				Schedule G	(Form 990 or 990-EZ) 2013

Sched	dule G (Form 990 or 990-EZ) 2013		Page 3
11	Does the organization operate gaming activities with nonmembers?	Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity		
	formed to administer charitable gaming?	. Yes	No
13	Indicate the percentage of gaming activity operated in		
а			%
b			%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and		
	records.		
	Name ►		
	Address ▶		
15 a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	Yes	No
b	, , ,	3	
	amount of gaming revenue retained by the third party ▶ \$		
С	If "Yes," enter name and address of the third party:		
	Name ▶		
	Address ►		
16	Gaming manager information:		
	Name ►		
	Gaming manager compensation ► \$		
	Description of services provided ▶		
	Director/officer Employee Independent contractor		
17	Mandatony diatributions:		
11' a	Mandatory distributions. Is the organization required under state law to make charitable distributions from the gaming proceeds	to	
а	retain the state gaming license?		No
h	Enter the amount of distributions required under state law to be distributed to other exempt organization	ne	
-	or spent in the organization's own exempt activities during the tax year > \$		
Part		d (v), and	
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to prov		
	additional information (see instructions).	 	
	Schedule G (F	orm 990 or 990	-F7\ 2013

SCHEDULE (Form 990)

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

rmation	► Attach to Form 990.	formation about Schedule I (Form 990) and its instructions is at www irs nov/form
<u>.</u>		formation about

OMB No 1545-0047	2013
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Open to Public Inspection

Employer Identification number 13-4071318

instructions is at www.irs.gov/form990. ► Inform

Assistance	
Grants and	
nformation on	
General II	
art 1	

WATERKEEPER ALLIANCE, INC.

Department of the Treasury Internal Revenue Service Name of the organization

- å X Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?
 - Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

1 (a) Name and address of organization or government	(p) 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
(1) YADKIN RIVERKEEPER, INC.							
308 N.PATTERSON AVE.	26-1874687	501 (C) (3)	21,211.				GRANT & SCHOOL
(2) MESTERN NORTH CAROLINA ALLIANCE							
28801	56-1422691	501 (C) (3)	15,742.				GRANT
(3) WACCAMAW RIVERKEEPER							
AY,	57-1118288	501(C) (3)	12,968.				GRANT & SCHOOL
(4) CATAWBA RIVERKEEPER FOUNDATION							
421 MINUTE IN. CHARLOTTE, NC 28217	56-2034780	501(0)(3)	6,866.				GRANT & SCHOOL
(5) CHARLESTON WATERKEEPER							
P.O. BOX 29 CHARLESTON, SC 29402	26-4178586	501(C)(3)	141,443.				GRANT & SCHOOL
(6) HAW RIVERKEEPER							
P.O. BOX 187 BYNUM, NC 27228	58-1510282	501 (C) (3)	13,759.				SCHOLARSHIPS & GRANT
(7) LOS ANGELES WATERKEEPER	i				i		
120 BROADWAY STE 105 SANTA MONICA, CA 90401	95-4444787	501(C)(3)	21,000.				GRANT
(8) NEUSE RIVERKEEPER FOUNDATION							
P.O. BOX 15451 NEW BERN, NC 28561	56-1281376	501 (C) (3)	11,693.				GRANT
(9) PAMLICO-TAR RIVER FOUNDATION							
P.O. BOX 1854 WASHINGTON, NC 27889	58-1475258	501(C)(3)	16,729.				GRANT
(10) COAL ASH CHRONICLES	· ·						
6424 157TH PL NE REDMOND, WA 98052			20,106.				GRANT
(11) LIVING RIVERS							
PO BOX 466 MOAB, UT 84532	87-0668658	501(C)(3)	10,000.				GRANT
(12) MOBILE BAYKEEPER 4500 GOVERNMENT STREET MORITE, AL 36602	63-1190615	501 (C) (3)	9				EN MA
TOTAL DES TRANSPORTED TOTAL TOTAL OF THE PARTY OF THE PAR	112211	101 101 100		_			Turoup

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

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Enter total number of other organizations listed in the line 1 table

Schedule 1 (Form 990) (2013)

3E1288 1 000 K4H00Y M261

SCHEDULEI (Form

Grants and Other Assistance to Organizations,

OMB No 1545-0047	2013	Open to Public
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tion number

Inspection

ž

X Yes

(Form 990)	Governments, and Individuals in the United States	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.	
Department of the Treasury	► Attach to Form 990.	
Internal Revenue Service	► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.	
Name of the organization	Employer Identifica	· identifica
WATERKEEPER ALLIANCE, INC.	LIANCE, INC.	107131
Part General In	Part General Information on Grants and Assistance	
1 Does the organiz	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	ice, and
the selection crite	the selection criteria used to award the grants or assistance?	•
2 Describe in Part	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 Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (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
(1) PACIFIC ENVIRONMENT 369 PINE STREET SAN FRANCISCO, CA 94104	94-2628924	501(C)(3)	38,625.				GRANT
(2) POTOMAC RIVERKEEPER INC 1615 M STREET NW WASHINGTON DC, 20036	54-1982624	501 (C) (3)	6,000.				GRANT
(3) SAVANNAH RIVERKEEPER PO BOX 14908 AUGUSTA, GA 30919	58-2630660	501(C)(3)	45,000.				GRANT
(4) UPPER MISSOURI WATERKEEPER PO BOX 128 BOZEMAN, MT 59771	46-2954392	501 (C) (3)	14,505.				SCHOLARSHIPS & GRANT
(5) UTAH RIVERS COUNCIL 1055 E 2100 ST SALT LAKE CITY, UT 84106	87-0538450	501(C)(3)	10,000.				GRANT
(9)							
(2)							
(8)							
(6)							
(10)							
(11)							
(12)							
2 Enter total number of section 501(c)(3) and government or 3 Enter total number of other organizations listed in the line 1	overnment o	rganizations list 1 table	ganizations listed in the line 1 table table	θ			17.
=	structions fo	r Form 990.				Sched	Schedule I (Form 990) (2013)

3E1288 1 000 K4H00Y MZ61

Page 2 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2013) Part III

	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV appraisal, other)	(f) Description of non-cash assistance
-						
8	i					
က						
4						
S.						
ဖ						
,						
Part IV	Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional	is part to prov	vide the informat	tion required in	Part I, line 2, Part III,	column (b), and any other additional

information.

- QUESTION 2 PART I WE MONITOR THE USE OF FUNDS IN THE UNITED STATES BY REQUIRING REPORTS

FROM EACH GRANTEE DETAILING THE ACTIVITIES AND ACCOMPLISHMENTS GENERATED

BY THE FUNDS. IN THE CASE OF CAPITAL EXPENDITURES, WE ADDITIONALLY

REQUIRE DOCUMENTATION OF PURCHASE.

SCHEDULE J (Form 990)

Compensation Information

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions.

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

WATERKEEPER ALLIANCE, INC.

Employer identification number 13-4071318

Par	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 in Form			
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			[
	Travel for companions Payments for business use of personal residence			i
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			ļ
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	1b		ļ
2	explain Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
-	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line			1
	, , , , , , , , , , , , , , , , , , , ,	2		
_	1a?			
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.			ŀ
	Independent compensation consultant Form 990 of other organizations Compensation survey or study X Approval by the board or compensation committee			
	, we compensation assume the compensation of the compensatio			1
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization.	1.1		Х
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	O L COMPANY LEGAL VAN A COMPANY L			
_	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any		i	
	compensation contingent on the revenues of:			17
а	The organization?	5a		X
þ	Any related organization?	5b		Х
	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	. (
	compensation contingent on the net earnings of:		İ	_
а	The organization?	6a		<u> </u>
b	Any related organization?	6b		X
	If "Yes" to line 6a or 6b, describe in Part III.	1 1		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described in lines 5 and 6? If "Yes," describe in Part III	7		<u> </u>
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject		1	
	to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe		[
	in Part III	8		X
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9	İ	

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2013

Page 2

Schedule J (Form 990) 2013

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 in Schedule J, report compensation from the organization 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.

		(B) Breakdown of W-2 and		for 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990
MARC YAGGI	€	1				37,909.	207,332.	0
1 EXECUTIVE DIRECTOR	(E)	•	b					0
	€							
2	(11)							1 1 1 1 1 1 1 1 1
	(E)							
8	E		1				 	1 1 1 1 1 1 1 1 1 1
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16	▣							
							400	100 1000 mm 2017

Schedule J (Form 990) 2013

Part III Supplemental Information

Complete this part to 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.

Schedule J (Form 990) 2013

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Noncash Contributions

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Open To Public Inspection

Name of the organization
WATERKEEPER ALLIANCE, INC.

Employer identification number

WA:	ATERKEEPER ALLIANCE, INC. 13-4071318								
Pa	Types of Property								
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contributio amounts reported or Form 990, Part VIII, line	n e 1g no	Method ncash co	(d) I of dete		
1	Art - Works of art	X	36.	701,77	70. FM	V			
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household								
_	goods			 		<u>i</u>			
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded			<u> </u>					
10	Securities - Closely held stock								
11	Securities - Partnership, LLC,								
	or trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation								
	contribution - Historic				1				
	structures								
14	Qualified conservation								
	contribution - Other								
15	Real estate - Residential		· ···-						
16	Real estate - Commercial		· · ·	<u> </u>					
17	Real estate - Other								
18	Collectibles	i i							
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy				-				
22	Historical artifacts						_		
23	Scientific specimens								
24	Archeological artifacts								
25	Other ►()					- 1			
26	Other ►()								
27	Other ►()							_	
	Other ►()				_				
29	Number of Forms 8283 received		-]			
	which the organization completed F	·OIIII 0203,	Part IV, Donee Acknowledg	ement	. [23	<u> </u>		Yes	No
30 a	During the year, did the organizat	ion receive	by contribution any proper	ty reported in Part I	lines 1.	28. tha	. [163	110
oo u	it must hold for at least three year		• • • •	•			1		
	used for exempt purposes for the er						30a		х
b	If "Yes," describe the arrangement in		ponoa			• • • •	Jua		
31	Does the organization have a		ance policy that require	s the review of an	v non-s	tandare			
٠.									х
32 a	contributions? Does the organization hire or use	third narti	es or related organizations	s to solicit process	or sell r	oncast	; ' '	\vdash	
- - u	contributions?		-				32a		x
b	If "Yes," describe in Part II.			• • • • • • • • • • • • •			324	 	_ -
	If the organization did not report an	amount in	column (c) for a type of pro	nerty for which colum	n (a) is c	hecked		1 1	

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2013)

describe in Part II

Schedule M (Form 990) (2013)

Page 2

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

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.

2013
Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

WATERKEEPER ALLIANCE, INC.

Employer identification number 13-4071318

PART III - LINE 1

WATERKEEPER ALLIANCE IS A GLOBAL ENVIRONMENTAL ORGANIZATION UNITING MORE THAN 215 WATERKEEPER ORGANIZATIONS AROUND THE WORLD AND FOCUSING CITIZEN ADVOCACY ON THE ISSUES THAT AFFECT OUR WATERWAYS, FROM POLLUTION TO CLIMATE CHANGE. WATERKEEPERS PATROL MORE THAN 100,000 MILE OF RIVERS, STREAMS AND COASTLINES IN THE AMERICAS, EUROPE, AUSTRALIA, ASIA AND AFRICA. PART SCIENTIST, TEACHER, AND LEGAL ADVOCATE, WATERKEEPERS COMBINE FIRSTHAND KNOWLEDGE OF THEIR WATERWAYS WITH AN UNWAVERING COMMITMENT TO THE RIGHTS OF THEIR COMMUNITIES AND TO THE RULE OF LAW. WHETHER ON THE WATER, IN A CLASSROOM, OR IN A COURTROOM, WATERKEEPERS SPEAK FOR THE WATERS THEY DEFEND - WITH THE BACKING OF THEIR LOCAL COMMUNITY AND THE COLLECTIVE STRENGTH OF WATERKEEPER ALLIANCE. WATERKEEPER ALLIANCE ENSURES THAT THE WORLD'S WATERKEEPERS ARE AS CONNECTED TO EACH OTHER AS THEY ARE TO THEIR LOCAL WATERS, ORGANIZING THE FIGHT FOR CLEAN WATER INTO A COORDINATED GLOBAL MOVEMENT AND PROVIDING A WAY FOR COMMUNITIES TO STAND UP FOR THEIR RIGHT TO CLEAN WATER AND FOR THE WISE AND EQUITABLE USE OF WATER RESOURCES, BOTH LOCALLY AND GLOBALLY. THE VISION OF THE WATERKEEPER MOVEMENT IS FOR FISHABLE, SWIMMABLE AND DRINKABLE WATERWAYS WORLDWIDE. OUR MISSION IS TO SUPPORT AND EMPOWER MEMBER WATERKEEPER ORGANIZATIONS TO PROTECT COMMUNITIES, ECOSYSTEMS AND WATER QUALITY; PROMOTE THE WATERKEEPER MODEL FOR WATERSHED PROTECTION WORLDWIDE; AND ADVOCATE FOR ISSUES COMMON TO WATERKEEPER PROGRAMS.

Employer identification number 13-4071318

PART III - LINE 4A

WATERKEEPER SUPPORT:

WATERKEEPER ALLIANCE CONNECTS OVER 220 (AND GROWING) INDIVIDUAL WATERKEEPER ORGANIZATIONS TO EACH OTHER AND SUPPORTS THEM BY PROVIDING EXPERTISE IN SCIENCE, LAW, STRATEGIC PLANNING AND COMMUNICATIONS, INCREASING THEIR EFFECTIVENESS IN COURTROOMS, TOWN HALLS, CLASSROOMS, AND IN THE MEDIA. AS A GLOBAL GRASSROOTS MOVEMENT, OUR ANNUAL CONFERENCES, REGIONAL MEETINGS AND LISTSERV PROVIDE INVALUABLE OPPORTUNITIES FOR WATERKEEPER ORGANIZATIONS TO NETWORK AND LEARN FROM EACH OTHERS' CHALLENGES AND SUCCESSES, AND CAPACITY-BUILDING AND TECHNICAL WORKSHOPS, AND DRAW INSIGHTS AND INSPIRATION FROM WORLD-RENOWNED SPEAKERS. REGIONAL MEETINGS AFFORD WATERKEEPER ORGANIZATIONS THE CHANCE TO DEVELOP REGIONAL ADVOCACY STRATEGIES, SHARE RESOURCES AND CONTINUE CAPACITY BUILDING AND TECHNICAL LEARNING. WATERKEEPER ALLIANCE PROVIDES WATERKEEPERS WITH A WEALTH OF RESOURCES, INCLUDING A TEAM OF EXPERTS IN ENVIRONMENTAL LAW, SCIENCE AND ENGINEERING, COMMUNITY ORGANIZING, COMMUNICATIONS, AND CAPACITY BUILDING TO HELP THEIR ADVOCACY EFFORTS AND ORGANIZATIONAL MANAGEMENT AND DEVELOPMENT. WHETHER IT IS ASSISTANCE IN DRAFTING PERMIT COMMENTS, REVIEWING ENVIRONMENTAL IMPACT STATEMENTS, PREPPING FOR A PRESS CONFERENCE OR DEVELOPING STRATEGIC OR SMALL-BUSINESS PLANS, OUR TEAM DRAWS ON THE EXPERIENCES OF FELLOW WATERKEEPERS AND A NETWORK OF OUTSIDE SPECIALISTS AND AUTHORITIES ON WATER RESOURCE PROTECTION TO FURTHER ENHANCE AND STRENGTHEN THE EFFECTIVENESS OF OUR MOVEMENT. BY WORKING TOGETHER, WATERKEEPERS AROUND THE WORLD CAN MORE EFFECTIVELY ADDRESS

Employer identification number 13-4071318

LOCAL THREATS TO THEIR WATERWAYS. THE ACCUMULATED SUCCESS OF OUR MOVEMENT ADDS TO THE STRENGTH OF LOCAL ACTION- POLLUTERS KNOW THAT THE ENTIRE ALLIANCE STANDS BEHIND EACH OF OUR WATERKEEPERS. ONCE WAY WE EVALUATE OUR SUCCESS IS IN THE EFFECTIVENESS OF OUR NETWORK OF CLEAN WATER ADVOCATES, THE RETENTION OF HIGH QUALITY WATERKEEPER ORGANIZATIONS, AND THE CAPACITY OF WATERKEEPER ORGANIZATIONS TO MEET OUR TRADEMARK STANDARDS.

PART III - LINE 4B

CLEAN & SAFE ENERGY:

TO HELP DRIVE THE SHIFT AWAY FROM COAL AS OUR PRIMARY ENERGY SOURCE,
WATERKEEPER IS ENGAGED IN LOCAL, NATIONAL AND INTERNATIONAL EFFORTS BUILT
AROUND LEGAL ADVOCACY, GRASSROOTS MOBILIZATION AND AGGRESSIVE MEDIA
ATTENTION AND PUBLIC EDUCATION. THESE ACTIVITIES INCLUDE CHALLENGING
FEDERAL RULEMAKING; TAKING ON INDIVIDUAL COAL-FIRED POWER PLANTS; TESTING
WATER NEAR COAL ASH PONDS. WE ARE EVALUATING OUR SUCCESS THROUGH THE
AWARENESS CREATED BY THE CAMPAIGN; INCREASED ADOPTION OF RENEWABLE ENERGY
SOURCES BY CONSUMERS; THE CREATION OF STRINGENT CONTROLS FOR MERCURY
EMISSIONS BY COAL-FIRED POWER PLANTS; THE EXTENT TO WHICH WE CAN PREVENT
INCREASES IN NEW COAL-FIRED POWER PLANTS; INFLUENCE THE FORMATION OF A
NEW ENERGY POLICY THAT INCORPORATES AN ACCELERATED PHASING OUT OF COAL
FROM OUR ENERGY PORTFOLIO AND ARE COMMITMENT TO A HEALTHY, CLEAN AND
RENEWABLE ENERGY FUTURE FOR THE COUNTY; AND PROTECT OUR FOOD SYSTEMS AND
CHILDREN FROM MERCURY A POTENT NEUROTOXIN THAT NEEDLESSLY RELEASED BY
COAL.

Employer identification number 13-4071318

PART III - LINE 4C

ANNUAL CONFERENCE:

THE CORNERSTONE OF OUR MOVEMENT. THE CONFERENCE EDUCATES, INSPIRES, AND ENERGIZES INDIVIDUAL WATERKEEPER ORGANIZATIONS AND STRENGTHENS THEIR FIGHT FOR CLEAN WATER. AS THE WATERKEEPER MOVEMENT INCREASES ITS GLOBAL PRESENCE, THE ANNUAL CONFERENCE BECOMES INCREASINGLY IMPORTANT AS A WAY TO KEEP WATERKEEPER ORGANIZATIONS CONNECTED, TO MAINTAIN THE UNIQUE WATERKEEPER IDENTITY, AND TO INCREASE THE EFFECTIVENESS OF THE INDIVIDUAL ORGANIZATIONS. NEARLY 300 WATERKEEPER, WATER EXPERTS AND STAKEHOLDERS CONVENE EACH YEAR TO SHARE INFORMATION AND INSIGHTS FROM OUR GLOBAL NETWORK, LEARN CUTTING EDGE ADVOCACY STRATEGIES, AND BECOME REINVIGORATED TO CONTINUE THEIR WORK PROTECTING THEIR WATERSHEDS AND LEADING THE FIGHT FOR CLEAN WATER. TO PROMOTE THE SHARING OF FORWARD-LOOKING STRATIFIES AND THE DEVELOPMENT OF NEW TOOLS TO ADDRESS THREATS TO OUR COMMUNITIES AND WATERWAYS, THE ANNUAL CONFERENCE BRINGS TOGETHER RENOWNED EXPERTS TO SHARE THEIR KNOWLEDGE IN WORKSHOPS, STRATEGY SESSIONS AND ROUNDTABLE DISCUSSIONS, AND TO SHARE THEIR VISION FOR A MORE SUSTAINABLE WORLD IN PLENARY SPEECHES. THE CONFERENCE FEATURES MORE THAN 30 PANELS OVER ITS THREE DAYS COVERING TOPICS SUCH AS ENVIRONMENTAL LAW

SINCE ITS INCEPTION, THE ANNUAL WATERKEEPER ALLIANCE CONFERENCE HAS BEEN

PART III - LINE 4D

FUNDRAISING AND WATER QUALITY MONITORING.

OTHER PROGRAMS:

THE REMAINDER OF OUR MISSION PROGRAMS INCLUDES PROMOTING THE WATERKEEPER

AND ECONOMICS, MEDIA AND COMMUNICATIONS, ORGANIZATIONAL DEVELOPMENT,

METHOD OF ADVOCACY AND ISSUERS OF COMMON CONCERN TO WATERKEEPER

ORGANIZATIONS THROUGH WEB, MAGAZINE AND OTHER TOOLS; LICENSING NEW

WATERKEEPER ORGANIZATIONS; PROTECTING THE TRADEMARKED WATERKEEPER FAMILY

OF NAMES; ADVOCATING FOR STRONGER ENVIRONMENTAL REGULATIONS INCLUDING

LEGISLATION SUCH AS THE CLEAN WATER RESTORATION ACT; AND UTILIZING EVENTS

AND OUTREACH CAMPAIGNS TO INCREASE AWARENESS FOR THE WATERKEEPER

MOVEMENT, THREATS TO CLEAN WATER AND HEALTHY ECO SYSTEMS AND STEPS

INDIVIDUALS CAN TAKE TO MAKE A DIFFERENCE. A SIGNIFICANT AREA OF ADVOCACY

IS THE WATERKEEPER ALLIANCE PURE FARMS PURE WATERS CAMPAIGN WHICH AIMS TO

PROTECT RURAL WATERSHEDS BY WORKING TO PREVENT THE SPREAD OF

FACTORY-STYLE AGRICULTURE AND PROMOTING THE SECURITY OF FAMILY-OWNED,

SUSTAINABLE FARMS. THE PURE FARMS PURE WATERS CAMPAIGN COMBINES

HARD-NOSED LITIGATION WITH EDUCATION AND OUTREACH ON SUSTAINABLE

AGRICULTURE. WE ARE WORKING WITH FARMERS, ENVIRONMENTALISTS AND POLITICAL

LEADERS TO SUPPORT REAL ALTERNATIVES TO FACTORY-RAISED FOOD.

PART VI, SECTION A. - QUESTION 6

THE WATERKEEPER ALLIANCE, INC. WAS INCORPORATED AS A MEMBERSHIP ORGANIZATION.

PART VI, SECTION A. - QUESTION 7A

THE DIRECTORS SHALL FROM TIME TO TIME ENTERTAIN APPLICATIONS FOR
MEMBERSHIP IN THE ALLIANCE FROM NOT-FOR-PROFIT ORGANIZATIONS THAT ENGAGE
IN ACTIVITIES THAT ARE CONSISTENT WITH THE MISSION OF THE ALLIANCE. EACH
ORGANIZATION THAT IS APPROVED FOR MEMBERSHIP BY THE DIRECTORS (A
"MEMBERSHIP ORGANIZATION") SHALL SELECT AS ITS REPRESENTATIVE TO THE

13-4071318

ALLIANCE (A "MEMBER") THE ORGANIZATION'S WATERKEEPER OR A PERSON WHO IS A MEMBER OF THE ORGANIZATION'S GOVERNING BOARD OR OF THE ORGANIZATION'S SENIOR MANAGEMENT. THE DIRECTORS MAY LEVY DUES OR FEES AS A CONDITION FOR MEMBERSHIP AS IT SEES FIT. EACH MEMBER SHALL BE ENTITLED TO ONE VOTE IN ALL MATTERS THAT COME BEFORE THE MEMBERS, INCLUDING THE ELECTION OF EACH AT-LARGE DIRECTOR. ALL MATTERS, EXCEPT AS OTHERWISE REQUIRED BY STATUTE OR BY THESE BY-LAWS, SHALL BE DECIDED BY THE MAJORITY OF THE MEMBERS PRESENT OR BY PROXY. ANY MEMBER MAY APPOINT A PROXY TO VOTE FOR THE MEMBER IN THE MEMBER'S ABSENCE. ALL PROXIES SHALL BE IN WRITING AND SHALL BE FILED WITH THE SECRETARY OF THE ALLIANCE. NO PROXY SHALL BE VALID AFTER THE EXPIRATION OF ELEVEN MONTHS FROM ITS DATE.

PART VI, SECTION B. - QUESTION 11B THE FORM 990 WILL BE PRESENTED TO THE TREASURER AND AUDIT COMMITTEE FOR REVIEW PRIOR TO FILING.

PART VI, SECTION B. - QUESTION 12C

THE POLICY IS REVIEWED AT MEETINGS OF THE EXECUTIVE COMMITTEE FOR ANY NEW CONFLICTS AND ANNUAL DISCLOSURE STATEMENTS ARE REQUIRED.

PART VI, SECTION B. - QUESTION 15A

THE EXECUTIVE DIRECTOR IS REVIEWED ANNUALLY BY THE CHAIRMAN OF THE BOARD OF DIRECTORS, THE CHAIRMAN OF THE BOARD OF TRUSTEES AND OTHER EXECUTIVE COMMITTEE MEMBERS.

PART VI, SECTION C. - QUESTION 19

THE ORGANIZATION MAKES ITS BY-LAWS AND FINANCIAL STATEMENTS AVAILABLE ON

13-4071318

THEIR WEBSITE. THE CONFLICT OF INTEREST POLICY AND GOVERNING DOCUMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC.

PART VII, SECTION B. - LINE 1

BEGINNING JANUARY 1, 2005, WATERKEEPER ALLIANCE, INC. ("WATERKEEPER") HIRED THE PERSONNEL MANAGEMENT SERVICES OF ADMINISTAFF COMPANIES II, L.P., NOW INSPERITY, A DELAWARE LIMITED PARTNERSHIP WITH ITS PRINCIPAL PLACE OF BUSINESS AT 19001 CRESCENT SPRINGS DRIVE, KINGWOOD, TX 77339-3802. INSPERITY (EIN: 76-0689539) IS AN OFF-SITE, FULL SERVICE HUMAN RESOURCE DEPARTMENT THAT, UNDER TERMS OF CONTRACT, IS RESPONSIBLE FOR PAYMENT OF SALARIES, WAGES, AND COMPLIANCE WITH APPLICABLE RULES AND REGULATIONS GOVERNING THE REPORTING AND PAYMENT OF ALL FEDERAL AND STATE TAXES ON PAYROLL WAGES PAID UNDER THE CONTRACT THROUGH A "CO-EMPLOYMENT" RELATIONSHIP WITH WATERKEEPER'S EMPLOYEES. THE FIGURES REPORTED ON FORM 990, PART VII AND SCHEDULE J-2, PART I INCLUDE ALL COMPENSATION AND CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS AND DEFERRED COMPENSATION RECEIVED BY THE LISTED INDIVIDUALS AND ARE PROVIDED IN THE INTEREST OF COMPLETE DISCLOSURE.

ATTACHMENT 1

FORM 990, PART VI, LINE 17 - STATES

AL, AK, AZ, AR, CA, CO, CT,

DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI,

MN, MS, MO, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,

RI, SC, TN, TX, UT, VA, WA, WV, WI,

Form 8868	8 (Rev 1-2014)				Page 2		
• If you	are filing for an Additional (Not Automatic) 3-M	lonth Exter	nsion, complete only Part	II and check this box			
	nly complete Part II if you have already been gra						
	are filing for an Automatic 3-Month Extension,			, , ,			
Part II				ginal (no copies needed).			
	Enter filer's identifying number, see ins						
Name of exempt organization or other filer, see instructions Employer identification number (EIN							
Type or							
print	WATERKEEPER ALLIANCE, INC.			13-4071318			
File by the	Number, street, and room or suite no. If a P.O. bo	ox, see instru	ctions.	Social security number (SSN)			
due date fo	date for 17 BATTERY PLACE						
filing your return See	See Sty, town or post office, state, and 211 code 1 of a foreign addition, see months.						
instructions	NEW YORK, NY 10004						
	e Return code for the return that this application			ach return)	01		
Applica	tion	Return	Application		Return		
Is For		Code	Is For	<u> </u>	Code		
	90 or Form 990-EZ	01		<u> </u>			
Form 99	- 1.00	02	Form 1041-A		08		
Form 4720 (individual) 03 Form 4720 (other than individual) 09							
Form 990-PF 04 Form 5227 10 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11							
	90-T (sec. 401(a) or 408(a) trust)	06		<u></u>	11		
	o not complete Part II if you were not already		Form 8870	scion on a proviously filed E	12		
Teleni	ooks are in the care of ►RACHEL COOK,, 1" hone No ► 212 747-0622		RY PLACE, SOTTE 13 Fax No ► 212 747-		0004		
	organization does not have an office or place of	_ ·		· · · · · · · · · · · · · · · · · · ·	▶□		
	is for a Group Return, enter the organization's for				f this is		
	/hole group, check this box				attach a		
	he names and EINs of all members the extension		are or are greep, encore and		attaon a		
	quest an additional 3-month extension of time ur		C	05/15 , 20 15 .			
5 For	For calendar year, or other tax year beginning07/01 , 20 13 , and ending 06/30 , 20 14 .						
	Change in accounting period						
	te in detail why you need the extension ALL T						
	TURN IS NOT AND WILL NOT BE AVAIL				<u> </u>		
RES	SPECTIVELY REQUEST ADDITIONAL TIME	ME TO CO	OMPLETE THE RETURN	•			
- 16 11					_		
	nis application is for Forms 990-BL, 990-PF, 99	90-f, 4720), or 6069, enter the ten	· • • • • • • • • • • • • • • • • • • •	_		
	refundable credits. See instructions	4700		8a \$	0		
	his application is for Forms 990-PF, 990-T,		•	I - 1			
	estimated tax payments made. Include any prior year overpayment allowed as a credit and any						
	ount paid previously with Form 8868.	VALUE BALL	ant with this faces if as a single	8b \$	0		
	ance Due. Subtract line 8b from line 8a. Include ectronic Federal Tax Payment System). See instruc		ent with this form, it requir	· · · · I I I	^		
(1.16			et he completed for D	art II only	0		
linder nor	Signature and Verifica nalties of perjury, I declare that I have examined th		-	-	ha haak -f -		
knowledge	e and belief, it is true, correct, and complete, and that I	am authorize	ed to prepare this form.	uies and statements, and to t	ne best of my		
				I I			

Form 8868 (Rev 1-2014)

Date 🕨

Signature >

Form 8868

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.
 ▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868.

OMB No 1545-1709

Form 8868 (Rev 1-2014)

• If you a	re filing for an Automatic 3-Month Extension, or re filing for an Additional (Not Automatic) 3-M Implete Part II unless you have already been gra	onth Exter	sion, complete only Pa	art II (on page 2 of this form)						
Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits										
Part I A	Automatic 3-Month Extension of Time. Or	nly submit	original (no copies ne	eeded).						
Part I only All other c	tion required to file Form 990-T and requesting corporations (including 1120-C filers), partnershipme tax returns				▶ ☐					
Name of exempt organization or other filer, see instructions. Employer identification number (E										
Type or	The state of the s			2pioyes identification riambel (2.11 4) 0.1					
print	WATERKEEPER ALLIANCE, INC.			13-4071318						
File by the	Number, street, and room or suite no. If a P.O. bo	x, see instru	ctions	Social security number (SSN)						
due date for filing your	17 BATTERY PLACE									
return See	City, town or post office, state, and ZIP code For	a foreign ad	dress, see instructions	<u> </u>						
instructions	NEW YORK, NY 10004	-								
Enter the Return code for the return that this application is for (file a separate application for each return)										
Application Return Application Return										
Is For Code Is For										
Form 990 or Form 990-EZ 01 Form 990-T (corporation)										
Form 990-		02	Form 1041-A		08					
Form 4720 (individual) 03 Form 4720 (other than individual) 09										
Form 990-PF 04 Form 5227 10										
Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11										
Form 990-T (trust other than above) 06 Form 8870 12										
Telepho If the or If this is	oks are in the care of NACHEL COOK, 17 one No. 212 747-0622 ganization does not have an office or place of I for a Group Return, enter the organization's for ole group, check this box	fousiness in ousiness in or digit Gro fit is for pa	FAX No ► 212 747 the United States, checup Exemption Number (int of the group, check t	7-0611 ck this box GEN)	10004 ► □ . If this is					
1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time										
▶ _	until02/15_, 20_15_, to file the exempt organization return for the organization named above. The extension is for the organization's return for:									
	tax year entered in line 1 is for less than 12 m Change in accounting period	onths, chec	k reason. Initial re	eturn Final return						
	s application is for Form 990-BL, 990-PF, 99	0-T, 4720	, or 6069, enter the t	tentative tax, less any						
	efundable credits. See instructions.	,	,	3a \$	0					
	s application is for Form 990-PF, 990-T,	4720. or	6069, enter any re							
	ated tax payments made Include any prior yea		· · · · · · · · · · · · · · · · · · ·	1 1	0					
	nce due. Subtract line 3b from line 3a Include									
(Elec	tronic Federal Tax Payment System). See instru	ctions		3c \$	0					
Caution If v	ou are going to make an electronic funds withdrawal	(Electronic Federal Tax Payment System). See instructions 3c \$ 0								

For Privacy Act and Paperwork Reduction Act Notice, see instructions.