Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

A F	or th	ne 2015 calendar year, or tax year beginning 07/01, 2015,	and ending		06/30		_		
_		C Name of organization		D Employer iden	tification n	umber			
В	check if a	pplicable: WATERKEEPER ALLIANCE, INC.		13-4071	L318				
	Addre								
			Room/suite	E Telephone nun	E Telephone number				
	Initial	return 180 MAIDEN LANE	(212) 747	7-0622					
-	Final	return/ City or town, state or province, country, and ZIP or foreign postal code					_		
	Amer	nated NEW YORK, NY 10038		G Gross receipts	\$	17,188,988	3.		
_		cation F Name and address of principal officer: GT.ENN RINK		H(a) Is this a grou	p return for	Yes X N	-		
	pend	SAME AS C ABOVE		subordinates? H(b) Are all subordin		Yes	No		
ī	Tay-ey	rempt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or	r 527		ו h a list. (see in				
		te: WWW.WATERKEEPER.ORG		H(c) Group exemp	tion number	>			
		of organization: X Corporation Trust Association Other	L Year of fo	ormation: 1999 M s			Y		
10000	art I	Summary	= 100, 0, 10		June of rege		_		
	1	Briefly describe the organization's mission or most significant activities: WATERK	EEPER AL	LIANCE STREN	GTHENS	AND	-		
an.		GROWS A GLOBAL NETWORK OF GRASSROOTS LEADERS PRO	TECTING	EVERYONE'S			_		
Activities & Governance		RIGHT TO CLEAN WATER.					-		
rus	_	Check this box if the organization discontinued its operations or disposed	d of more than	250/ of its not spects			-		
Š	2			1	3	13	-		
8	3	Number of voting members of the governing body (Part VI, line 1a)			4	12	_		
es	4	Number of independent voting members of the governing body (Part VI, line 1b).			5	0	_		
Ϋ́Εİ	5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)			6	15	_		
\cti	6	Total number of volunteers (estimate if necessary)				0	_		
1		Total unrelated business revenue from Part VIII, column (C), line 12			7a	0	_		
	b	Net unrelated business taxable income from Form 990-T, line 34	 	Prior Year	7b	Current Year	÷		
			-	10,128,75			_		
ne	8	Contributions and grants (Part VIII, line 1h)			0.	.6,545,879 0			
Revenue	9	Program service revenue (Part VIII, line 2g)			CONTRACTOR OF THE PARTY OF THE				
Rev	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		9,68		-3,924			
000000	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-217,27		-176,197			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		9,921,16		6,365,758			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		6,028,47		.2,186,134	_		
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0.	0	_		
es		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	469,25		635,220	_			
Expenses	16 a	Professional fundraising fees (Part IX, column (A), line 11e)		110,94	5.	125,721	•		
xbe	b	Total fundraising expenses (Part IX, column (D), line 25) ▶453,842.							
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		4,731,27		5,053,328			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		11,339,94	E 202	.8,000,403			
	19	Revenue less expenses. Subtract line 18 from line 12		-1,418,77	5	1,634,645	•		
Net Assets or Fund Balances		*	В	eginning of Current Ye		End of Year	_		
sets	20	Total assets (Part X, line 16)		3,290,23	Charles and the second	2,038,627	_		
t As	21	Total liabilities (Part X, line 26)		606,63		1,010,572	_		
Pur	22	Net assets or fund balances. Subtract line 21 from line 20		2,683,59	9.	1,028,055	<u>:</u>		
Pa	rt II	Signature Block							
Und	ler per	nalties of perjury, I declare that I have examined this return, including accompanying schedule ct, and complete. Declaration of preparer (other than officer) is based on all information of which	es and statemen	its, and to the best of	my knowled	dge and belief, it	is		
true	, corre	ct, and complete. Declaration of preparer (other than officer) is based on an information of which	ii preparei nas a	ny knowledge.			-		
٠.				MAYIC	1,2017	(1	_		
Sig		Signature of officer		Date	Č.				
Her	re	MANE S. YAGGI EXECUTIVE DIRECTUR	2/				_		
		Type or print name and title				CH. 40 P.D. C. HILD OF H. 428 BOOK D. T. C. A. P.D.			
		Print/Type preparer's name Preparer's signature	MAY 09	2017 Check	if PTIN				
Paid		JAMES J REILLI	MAI U J	self-employe		0183769			
	oarer	Firm's name CONDON O'MEARA MCGINTY & DONNETLY L		Firm's EIN ▶ 13					
use	Only	Firm's address DONE BATTERY PARK PLAZA, NEW YORK, NY 10004-1405			12-661				
Мау	the If	RS discuss this return with the preparer shown above? (see instructions)			X	Yes N	0		
For	Paper	work Reduction Act Notice, see the separate instructions.				Form 990 (2015			

3,930,885. including grants of \$

4e Total program service expenses ▶

17,194,043.

Form 990 (2015)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A.	17	Х	
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	Х	
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	<u> </u>		v
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3		X
•	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	х	
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		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	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,"			37
9	complete Schedule D, Part III	8		X
•	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	9	'	Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			drig
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	Х	
D	Did the organization report an amount for investments-other securities in Part X, line 12 that is 5% or more			
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
·	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	44.		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	11c		- 22
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	i	X
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
1	Schedule D, Parts XI and XII	12a.	X	
Ø	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.		İ	v
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13		X
	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,	170		
	fundraising, business, investment, and program service activities outside the United States, or aggregate		1	
	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			7.7
17	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		_X
11	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		Х	-
	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	17	21	
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		Х

Page 4

Part	Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	1	X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic dreanization or	Y		
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
•	to defease any tax-exempt bonds?	24¢		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
~	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		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			,
	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):	Transition Carried A.		riigh)
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
_	Schedule L. Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
_	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		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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31	·	Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	,		:
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
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		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O.	38	Х	
			990	(004E)

Par	tV Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
		- Katawa Manasa	Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a	T 7	46	
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	I		abord.
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	X	Zischroten
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		la lua.	100
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a 0.	- And a manual of		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		meni	v
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		_
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			1
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			X
	account)?	4a		
b	If "Yes," enter the name of the foreign country: ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts	50.0		
F	(FBAR).	5a	e dini	X
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	30		
oa	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or	- Oa		
D	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	1316		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
a	and services provided to the payor?	7a	X	
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
·	required to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year			ii) ag
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	skanda (r.g.)	Le Uma erre en
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	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		194	
	Enter the amount of reserves on hand	STEERED S		X
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		^
JSA	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	000	(221
5E104	01.000 . K4H00Y M261	r om	JJU	(2015

Par	M	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.	and	for a	"No"
		Check if Schedule O contains a response or note to any line in this Part VI			tions.
Sect	ion A	Governing Body and Management			$\neg \neg$
	10117	Obverning Dody and Management		Yes	No
12	Enter	the number of voting members of the governing body at the end of the tax year	W	115-23 (1995)	2016
ıa		e are material differences in voting rights among members of the governing body, or if the governing			
		delegated broad authority to an executive committee or similar committee, explain in Schedule O.	an const	ı	
b		the number of voting members included in line 1a, above, who are independent 1b 12			
2		ny officer, director, trustee, or key employee have a family relationship or a business relationship with			
		ther officer, director, trustee, or key employee?	2		Х
3		ne organization delegate control over management duties customarily performed by or under the direct			
		vision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did th	e organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5		e organization become aware during the year of a significant diversion of the organization's assets?	5		X
6		e organization have members or stockholders?	6	X	ļ
7a		ne organization have members, stockholders, or other persons who had the power to elect or appoint	_	37	
_		r more members of the governing body?	7a	<u>X</u>	<u> </u>
b		any governance decisions of the organization reserved to (or subject to approval by) members,	76		x
0		holders, or persons other than the governing body?	7b	-100 A 10	
8		ne organization contemporaneously document the meetings held or written actions undertaken during ear by the following:	1020		
a	_	overning body?	8a	Χ	
b		committee with authority to act on behalf of the governing body?	8b	Х	
9	is the	re any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the or	ganization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Secti	on B.	Policies (This Section B requests information about policies not required by the Internal Revenue	Code	e.)	
				Yes	No
		e organization have local chapters, branches, or affiliates?	10a	X	
b		s," did the organization have written policies and procedures governing the activities of such chapters,			
		es, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a	Has th	e organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? .	11a	X	estembra
b	Descr	ibe in Schedule O the process, if any, used by the organization to review this Form 990.		V.	
		e organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	-
a		officers, directors, or trustees, and key employees required to disclose annually interests that could give	12b	Х	
		conflicts?	120		
L	descr	ne organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," be in Schedule O how this was done	12c	Х	
13		e organization have a written whistleblower policy?	13	Х	
14		e organization have a written document retention and destruction policy?	14	X	
15		ne process for determining compensation of the following persons include a review and approval by	44	casine as	
		endent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	137533		
а		rganization's CEO, Executive Director, or top management official	15a	X	
b	Other	officers or key employees of the organization	15b		X
		s" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a		e organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
		taxable entity during the year?	16a	2016/06/04/04	X
b	If "Ye	s," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	partic	pation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the ization's exempt status with respect to such arrangements?			
Secti		Disclosure	16b		
17		e states with which a copy of this Form 990 is required to be filed ▶ ATTACHMENT 1			
1 <i>7</i> 18	Section	in 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	504/-	1/3/2	oply
10	availa	ble for public inspection. Indicate how you made these available. Check all that apply.	טוועכ	:)(3)8	orlly)
		Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Descr	ibe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of inte	erest	ممائص	and
-	financ	ial statements available to the public during the tax year.	, 001	- 0110 y	, 4114
20		the name, address, and telephone number of the person who possesses the organization's books and records RACHEL COOK, 180 MAIDEN LANE, SUITE 603 NEW YORK, NY 10038 212-747-0622	3: >		
		RACHEL COOK, 180 MAIDEN LANE, SUITE 603 NEW YORK, NY 10038 212-747-0622			

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

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 organization's tax year.



within the

- 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	orgai	nizat	tion	COI	npen	sate	ed any current offic	er, director, or trus	tee.
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted	box, office or dir	ot ch unles	s pe	ition more rson	than both st Highest compensated employee	an	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	40.00	х		x				201,538.	0.	11,615.
(2)GLENN RINK	3.00									
CHAIR		X	·	X	<u> </u>			0.	0.	0.
(3)PAUL GALLAY	3.00									
TREASURER	2 22	X		Х	ļ			0.	. 0.	0.
	3.00	Х						0.	0.	0.
(5)CASI CALLAWAY DIRECTOR	3.00	х		•				0.	0.	0.
(6)KARL COPLAN	3.00						l			
DIRECTOR		Х						Q.	0.	0.
	3.00	Х						0.	0.	0 .
(8)MARK MATTSON DIRECTOR	3.00	х						0.	0.	0.
(9)KRIS MOORE	3.00									
DIRECTOR		Х						0.	0.	0.
(10)LESSING STERN DIRECTOR	3.00	Х						0.	0.	0.
(11)CHRIS WILKE DIRECTOR	3.00	Х						0.	0.	0
(12)TERRY TAMMINEN	3.00									
DIRECTOR		Х						0.	0.	0.
(13)CHERYL NENN DIRECTOR	3.00	Х						0.	0.	0
(14)MARY BETH POSTMAN SECRETARY	40.00			х				175,566.	0.	11,530

Form 990 (2015)

D-	 _	9	

Part VII Section A. Officers, Directors, Tru	ustees, Ke	y En	ıplo	ye	es,	and l	lig	hest Compensat	ed Employe	es (d	continued)
(A) Name and title	(B) (C) Average Position							(D)	(E) - Reportabl		(F)
Name and the	Average hours per	ob)	not ch			than c	ne	Reportable compensation	compensation	_	amount of
	week (list any hours for	office	er and			is both or/trust		from the	related premizatio	P	other compensation
	related	익크	Insi	Officer	$\overline{}$		Former	organization	(W-2/1099-M		om the
	organizations below dotted	dividual t	Institutional	cer	Key employee	hest oloye	mer	(W-2/1099-MISC)			and related
	line)	al tru	onal i		oloye	e com					organizations
		stee	trustee		O O	Highest compensated employee					
			ď			ated					•
15) MARC YAGGI	50.00	***************************************									,
EXECUTIVE DIRECTOR	40.00			X				202,167.		0.	35,375.
16) KELLY FOSTER SENIOR ATTORNEY	40.00							317 271		ο.	22 026
17) PETER NICHOLS	40.00					Х		117,271.		0.	33,836.
NATIONAL DIRECTOR	1					x		117,827.		0.	25,378.
18) PETER CLEARY	40.00				<u> </u>		<u> </u>		rand Andria Control of		
COMMUNICATIONS DIRECTOR						Х		133,846.		0.	19,699.
19) RACHEL COOK	40.00					,,		101 107		_	16.046
OPERATIONS DIRECTOR		ļ			<u> </u>	X		101,187.		0.	16,046.
	 -										
	<u> </u>				ļ						
	ļ								,		
			_		<u> </u>						
	 -										
	 	ļ				ì					
	<u> </u>		Ì					277 104			02.145
1b Sub-total								377,104. 672,298.	•	0.	23,145. 130,334.
c Total from continuation sheets to Part VII, S d Total (add lines 1b and 1c)	-						▶	1,049,402.		0.	153,479.
2 Total number of individuals (including but not	limited to tl						o re		\$100,000 of		
reportable compensation from the organization	n 🤛 .	•	,								Yes No
3 Did the organization list any former offic	er directo	r or	tro	icto		kov s	mn	lovee or bighes	compane	ad '	res No
3 Did the organization list any former office employee on line 1a? If "Yes," complete Sched.											3 X
4 For any individual listed on line 1a, is the											
organization and related organizations gro	eater than	\$15	0,0	00?) If	"Yes	s, "	complete Schedu	le J for su	ch	
individual											4 X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y	accrue coi	mpen to Sch	satio	on i	fron Lfor	any	un	related organizatio	on or individu	ıal	5 X
Section B. Independent Contractors	ca, complet	16 001	iouu	76 0	101	30011	per	30/1		•	<u> </u>
1 Complete this table for your five highest com	pensated in	ndepe	ende	ent	con	tracto	rs t	hat received more	than \$100,0)00 c	of
compensation from the organization. Report of year.	compensation	on for	the	ca	lend	iar ye	ar e	ending with or with	nin the organ	izatio	n's tax
(A)								(B)	_:	_	(C)
Name and business address Description of services Compensation											
							+-				
							+				
2 Total number of independent contractors (in more than \$100,000 in compensation from th							se l	isted above) who	received		

A SECTION OF THE	LONG PLANTS	Check if Schedule O co	ontains a respo	nse or note to a	ny line in this Part	VIII		
					(A)	(B) Related or	(C) Unrelated	(D) Revenue
					Total revenue	exempt	business	excluded from tax
						function revenue	CENT D	under sections 12-514
10 10						.0.0,40		12-314
Contributions, Giffs, Grants and Other Similar Amounts	1a	Federated campaigns					the state of the s	
2 6	b	Membership dues	1	663 400				600 5 6 300
ifts ar A	C	Fundraising events	l i	661,499.				
% <u>.</u> E. G.	d	• • • • • • •	ì					
r Si	e	Government grants (contribu				garantes pro		Security and
ibut	Ţ	All other contributions, gifts, and similar amounts not include:	-	15,884,380.				
do		Noncash contributions included		14,736.				
ರ ह∣	g	Total. Add lines 1a-1f			16,545,879.			
e l				Business Code		1/2		
Program Service Revenue	2a			7	TOTAL DESCRIPTION AND AND AND AND AND AND AND AND AND AN			
8	b							
vice	c							***************************************
Ser	d	•						
ᇤ	e							
ogr	f	All other program service rev	venue					
9	g	Total. Add lines 2a-2f		<u></u>	0.			"我你说我说
İ	3	Investment income (inc	cluding djvider	nds, interest,				
		and other similar amounts).		>	6,230.			6,230
	4	Income from investment of			0.			
	5	Royalties		· · · · · · >	0.			
			(i) Real	(ii) Personal		1015191-215 (E15)	and the street street	
	6a	Gross rents						
	b	Less: rental expenses						
	c	Rental income or (loss)	<u> </u>					
	d	Net rental income or (loss).			0.	Error (Const. and a Marinette of Marinette Marinette (Marinette of Marinette of Mar		225
	7a	Gross amount from sales of	(i) Securities	(ìi) Other				VALUE DE
		assets other than inventory	351,051.			0.00000000000		den en en en en en en
	b	Less: cost or other basis						
		and sales expenses	361,205.				7.85.66.85.65.0	
	C	Gain or (loss)		L	20 20 20 30 100 60 100			
	d	Net gain or (loss)		· · · · · · · · · · · · · · · · · · ·	-10,154.		VOS PROGUESTO VICTORIO DE LA CASTA DEL CASTA DE LA CASTA DEL CASTA DE LA CASTA DEL CASTA DEL CASTA DEL CASTA DE LA CASTA DE LA CASTA DE LA CASTA DE LA CASTA DEL CASTA DE LA CASTA DE LA CASTA DE LA CASTA DE LA CASTA DE LA CASTA DE LA CASTA DE LA CASTA DE LA CASTA DE LA CASTA DE LA CASTA DEL CASTA DE LA CASTA DEL CASTA DEL CASTA DEL CASTA DEL CASTA DEL CASTA DEL CASTA DEL CASTA DEL CASTA DEL CASTA DEL CASTA DEL C	-10,154
활	8a	Gross income from fundra	_		10000000000		6545-0345-0465-0565-0	Section 2012
ven		Overtio (not morealing of manage	661,499.				2.2	
&		of contributions reported on						0.000 0.000
Other Revenue		See Part IV, line 18		230,848.	13444666			
ŏ	b	Less: direct expenses						
		Net income or (loss) from ful	-		-231,177.			-231,177
	9a	Gross income from gaming See Part IV, line 19						1000000
	ı.							
	b	Less: direct expenses			0.			
			-		U.			
"	0a	Gross sales of inventor returns and allowances			445 F. S. S. S. S. S. S. S. S. S. S. S. S. S.			
	L							
	b	Less: cost of goods sold Net income or (loss) from sale			0.	STACHER SECTION		
		Miscellaneous Revenue		Business Code				
4.	1a	LICENSING FEES & OTHER RE	EVENUE	900099	54,980.	54,980.		and the same of the same of the same
1	ıa b				33,500.	54,500.		
	C							
	ď	All other revenue						
	e	Total. Add lines 11a-11d		>	54,980.	di saggisti ve stratice e	Sec. 2005.28 St. 69 A	
1:		Total revenue. See instruction			16,365,758.	54,980.	Assembly the second of the sec	-235,101.
JSA	1.000	-				33,300,	<u> </u>	Form 990 (2015)

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a resp	oonse or note to any lin	ne in this Part IX	inde complete co	
	not include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b,	9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	654,558.	654,558.		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0.			
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	44 504 556			
	individuals. See Part IV, lines 15 and 16	11,531,576.	11,531,576.		
	Benefits paid to or for members	0.	·	kepalan erakan 14.54	
5	Compensation of current officers, directors, trustees, and key employees	635,220.	540,723.	42,803.	51,694.
6	Compensation not included above, to disqualified				***************************************
	persons (as defined under section 4958(f)(1)) and	0			
	persons described in section 4958(c)(3)(B)	0.			
7	Other salaries and wages	U.			
8	Pension plan accruals and contributions (include	0.			
	section 401(k) and 403(b) employer contributions)	0.			
9	Other employee benefits	0.			
10	Payroll taxes	· · · · · · · · · · · · · · · · · · ·			
	Fees for services (non-employees):	0.			
	Management Legal Legal	0.			
	Accounting	26,800.	23,542.	1,485.	1,773.
	Lobbying	6,711.	6,711.	_,	_,,
	Professional fundraising services. See Part IV, line 17.	125,721.		Engakasanakaya ja	125,721.
	Investment management fees	0.			
	Other. (If line 11g amount exceeds 10% of line 25, column	,	******		
_	(A) amount, list line 11g expenses on Schedule O.)	711,038.	636,190.	46,848.	28,000.
12	Advertising and promotion	. 0.			
13	Office expenses	170,757.	125,319.	26,189.	19,249.
14	Information technology	0.			
15	Royalties	0.			
16	Occupancy	318,958.	274,304.		·
17	Travel	200,409.	178,867.	5,167.	16,375.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	.0.			e e
	Conferences, conventions, and meetings	0. 0.			
20	Interest	0.			
21	Payments to affiliates	8,650.		8,650.	
22 23	Depreciation, depletion, and amortization	22,556.	20,695.	848.	1,013.
24	Insurance Other expenses, Itemize expenses not covered				e en in de de de la la la la la la la la la la la la la
44	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. O)	2,297,596.	1,954,803.	155,270.	187,523.
b	WKA SUPPORT	639,064.	639,064.		***************************************
_	EDUCATIONAL / OUTREACH	383,705.	383,118.	587 .	
d	LITIGATION / REGULATION	215,774.	215,774.		
е	All other expenses	51,310.	8,799.	42,344.	167.
	Total functional expenses. Add lines 1 through 24e	18,000,403.	17,194,043.	352,518.	453,842.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)	458,654.	229,327.		229,327.
JSA	52 1 000	, , ,			Form 990 (2015)

Pari X Balance Sheet

	Check if Schedule O contains a response or note to any line in this Part X									
			(A) Beginning of year		(B) End of year					
	1	Cash - non-interest-bearing	751,76		639,812.					
	2	Savings and temporary cash investments	1,397,647.		348,874.					
	3	Pledges and grants receivable, net	698,832.		692,746.					
	4	Accounts receivable, net	2 , 578.	4	6,649.					
	5	Loans and other receivables from current and former officers, directors,								
		trustees, key employees, and highest compensated employees.		Nyh						
		Complete Part II of Schedule L	0.	5	0.					
	6	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	0.	6	0.					
ets	7	Notes and loans receivable, net	0.	7	0.					
Assets	8	Inventories for sale or use	0.	8	0.					
•	9	Prepaid expenses and deferred charges	58,982.	9	71,004.					
	10 a	Land, buildings, and equipment: cost or		SEV.						
		other basis. Complete Part VI of Schedule D 10a 375, 198.		Primis.						
	b	Less: accumulated depreciation 10b 331,547.		10c	43,651.					
	11	Investments - publicly traded securities	346,469.		0.					
	12	Investments - other securities. See Part IV, line 11		12	0.					
	13	Investments - program-related. See Part IV, line 11	0.		0.					
	14	Intangible assets	0.		0.					
	15	Other assets. See Part IV, line 11	33,173.		235,891.					
	16	Total assets. Add lines 1 through 15 (must equal line 34)	3,290,237.		2,038,627.					
	17	Accounts payable and accrued expenses	606,638.		793,069.					
	18	Grants payable	-		0.					
	19	Deferred revenue	0.		217,503.					
	20	Tax-exempt bond liabilities	0.		0.					
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	0.		0.					
ø,	22	Loans and other payables to current and former officers, directors,	King If Conjudence Indian							
iŧie		trustees, key employees, highest compensated employees, and								
Liabilities		disqualified persons. Complete Part II of Schedule L	0.	22	0.					
Ë	23	Secured mortgages and notes payable to unrelated third parties	0.	23	0.					
	24	Unsecured notes and loans payable to unrelated third parties	·. 0.		0.					
	25	Other liabilities (including federal income tax, payables to related third								
		parties, and other liabilities not included on lines 17-24). Complete Part X			,					
		of Schedule D	0.	25	0.					
	26	Total liabilities. Add lines 17 through 25	606,638.		1,010,572.					
		Organizations that follow SFAS 117 (ASC 958), check here 🕨 🐰 and								
es		complete lines 27 through 29, and lines 33 and 34.								
ä	27	Unrestricted net assets	-128,811.	27	-390,149.					
Bal	28	Temporarily restricted net assets	2,812,410.	28	1,418,204.					
둳	29	Permanently restricted net assets	0.	29	0.					
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ and complete lines 30 through 34.								
Ş	30	Capital stock or trust principal, or current funds		30						
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31						
Ä	32	Retained earnings, endowment, accumulated income, or other funds		32						
Net	33	Total net assets or fund balances	2,683,599.	33	1,028,055.					
_	34	Total liabilities and net assets/fund balances	3,290,237.	34	2,038,627.					
			-		Form 990 (2015)					
					, ,					

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

Form **990** (2015)

3a

Х

Schedule O.

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.

▶ Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

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

2015

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

WATERKEEPER ALLIANCE, INC.

Reason for Public Charity Status (All organizations must complete this part.) See in Fruetone.

Pa	rt I	Reason for Public Ch	arity Status (All	organizations must	comple	te this p	art.) See instructions	
The	org	anization is not a private for						
1		A church, convention of ch						
2		A school described in sect						
3		A hospital or a cooperative						
4		A medical research organi						Viii) Enter the
-		hospital's name, city, and s		. conjunction with a no	opital ac	Journoca i	Trouble the	Man), Elliel the
5		An organization operated		a college or universi	ty owne	d or one	arated by a governme	ontal unit described in
	L	section 170(b)(1)(A)(iv).		a conege of anivers	ity Ownic	a or ope	stated by a governing	marumi described in
6		A federal, state, or local g		ernmantal unit describe	nd in ana	tion 470	(h)/d)/d)/a)/)	
7	Х							
•		An organization that norm described in section 170(b	MAMANUIL (Com	ibsiaiiliai pait Ui 165 Si Stoto Bort II)	upport is	om a ge	ivemmental unit of m	om the general public
8 9		A community trust describe					1.76 (1)	
J		An organization that norm	lated to its every	more than 331/3 % or	its supp	ort from	contributions, memb	ership fees, and gross
		receipts from activities re	lated to its exemp	pt functions - subject	to certa	aın excep	otions, and (2) no mo	re than 331/3% of its
		support from gross inves	stment income ar	nd unrelated business	s taxabl	e incom	e (less section 511	tax) from businesses
4.0		acquired by the organization						
10		An organization organized						
11		An organization organized	and operated exc	lusively for the benefit	of, to pe	rform the	functions of, or to car	rry out the purposes of
		one or more publicly suppo	orted organizations	s described in section	509(a)(1	l) or sect	ion 509(a)(2). See see	ction 509(a)(3)., Check
	_	the box in lines 11a throug						
а		_ Type I . A supporting org	anization operated	d, supervised, or contr	olled by	its supp	orted organization(s),	typically by giving
		the supported organization	on(s) the power to	regularly appoint or e	elect a n	najority o	f the directors or trus	tees of the supporting
	_	_, organization. You must c						
b	L	_ Type II. A supporting org	ganization supervis	sed or controlled in co	nnection	า with its	supported organization	on(s), by having
		control or management of	of the supporting (organization vested in	the sam	ne persor	ns that control or man	age the supported
	_	_ organization(s). You mus :	t complete Part I\	/, Sections A and C.				
, C		_ Type III functionally inte	grated. A support	ing organization opera	ated in c	onnectio	n with, and functional	ly integrated with,
	_	$_$ its supported organization	n(s) (see instructio	ns). You must comple	te Part I	V, Sectio	ons A, D, and E.	-
d	L	Type III non-functionally	integrated. A sup	porting organization o	perated	in conne	ection with its support	ted organization(s)
		that is not functionally into	egrated. The orga	nization generally mus	st satisfy	a distrib	oution requirement and	an attentiveness
	_	_ requirement (see instruct	tions). You must c	omplete Part IV, Sect	ions A a	nd D, an	d Part V.	
е	L	Check this box if the orga	anization received	a written determination	n from t	he IRS ti	nat it is a Type I, Type I	I, Type III
		functionally integrated, or	r Type III non-func	tionally integrated sup	porting o	organizat	ion.	, , , ,
f	Ent	er the number of supported	d organizations	· · · · · · · · · · · · · · · · · · ·				
g	Pro	vide the following information	on about the supp	orted organization(s).				
		ame of supported organization	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of
				(described on lines 1-9 above (see instructions))		ur governing ment?	support (see instructions)	other support (see
				above (see mandedons))	doca	Heir	msu ucaons)	instructions)
					Yes	No		
4.								
A)								
D)	•	•						
B)								
C)							•	
		.,						
D)								
					 			
E)					-			
			i lejiaso elipiene ilike		player to be one			· · · · · · · · · · · · · · · · · · ·
ota								
~ ~ ~			 Compared to the state of the st	横线 医多性性 医多种性 医二氏性 医二氏性 医二氏性 医二氏性 医二氏性 医二氏性 医二氏性 医二氏	 1 - 1 - 1 - 1 - 1 	 a. a. b. a. f 	l l	

Pa	Support Schedule for Orga (Complete only if you checked Part III. If the organization fa	ed the box on	line 5, 7, or 8	of Part I or if t	he organizatio	n failed to qua	
Sec	tion A. Public Support		····		· · · · · · · · · · · · · · · · · · ·		K 7
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e 20 5	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,873,202.	4,004,785.	10,980,966.	10,128,759.	16,545,879.	44,533,591.
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	2,873,202.	4,004,785.	10,980,966.	10,128,759.	16,545,879.	44,533,591.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						18,238,358.
6	Public support. Subtract line 5 from line 4.	pateraria.	akimus prop			ROTE STIPLETON	26,295,233.
	tion B. Total Support		1	T	Γ	1	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7	Amounts from line 4	2,873,202.	4,004,785.	10,980,966.	10,128,759.	16,545,879.	44,533,591.
- 8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources				9,680.	6,230.	15,910.
9	Net income from unrelated business activities, whether or not the business is regularly carried on		ware and				0.
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . ATCH. 1	72,516.	40,254.	33,340.	55,449.	54,980.	256,539.
11	Total support. Add lines 7 through 10						44,806,040.
12	Gross receipts from related activities, etc. (s	see instructions) .				12	
13	First five years. If the Form 990 is f organization, check this box and stop here			nd, third, fourth,	or fifth tax ye	ar as a section	501(c)(3)
Sec	tion C. Computation of Public Sup					T	
14	Public support percentage for 2015 (li						58.69%
15	Public support percentage from 2014						72.60%
16a	331/3% support test - 2015. If the of this box and stop here. The organization						e, check
b	331/3% support test - 2014. If the c						or more,
	check this box and stop here. The orga	anization qualifi	es as a publicly	supported orga	nization		▶
17a	10%-facts-and-circumstances test - 2 10% or more, and if the organization Part VI how the organization meets to organization	meets the "facts-and-c	cts-and-circums ircumstances" to	tances" test, ch est. The organi	eck this box a zation qualifies	nd stop here. E as a publicly si	xplain in
b	10%-facts-and-circumstances test - 2 15 is 10% or more, and if the orga Explain in Part VI how the organizati	2014. If the organization meets on meets the "	ganization did n s the "facts-and facts-and-circun	ot check a box d-circumstances' nstances" test.	on line 13, 16 " test, check t The organizatio	a, 16b, or 17a, his box and st o on qualifies as a	op here.
18	supported organization	did not check a	a box on line 13			this box and see	*

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 quali	iv under Part	II.
If the erganization foils to qualify under the tests listed halous at a second 1.1. D. 1.11.	•	

Sec	tion A. Public Support						W 7
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e, 20, 5	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities			Ì			
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid					- Anna Anna Anna Anna Anna Anna Anna Ann	
	to or expended on its behalf						
5	The value of services or facilities			· · · · · · · · · · · · · · · · · · ·			
·	furnished by a governmental unit to the	İ					
	organization without charge			-			
6	Total. Add lines 1 through 5						
ı a	Amounts included on lines 1, 2, and 3 received from disqualified persons		1				
b	Amounts included on lines 2 and 3			_			
-	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year			·			
_	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)			Section (Septembrie)		I. Tapa bankan kanana a	
	tion B. Total Support	(a) 2011	(L) 2040	(-) 0040	. D. O. O. J.		
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9	Amounts from line 6						
IVA	payments received on securities loans,						
	rents, royalties and income from similar						
	sources				111-74		
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses				٠.		
	acquired after June 30, 1975	:					· · · · · · · · · · · · · · · · · · ·
	Add lines 10a and 10b						
11	Net income from unrelated business		,				
	activities not included in line 10b, whether or not the business is regularly					"	
	carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is fe	or the organiza	tion's first, seco	nd, third, fourth,	or fifth tax ye	ear as a section	501(c)(3)
	organization, check this box and stop here.	<u> </u>					▶ 🔲
	tion C. Computation of Public Sup						
15	Public support percentage for 2015 (line 8,	, column (f) divide	d by line 13, colun	nn (f))		15	%
16	Public support percentage from 2014 Sche	dule A, Part III, lin	ie 15	<i></i> .		16	%
Sec	tion D. Computation of Investmen						
17	Investment income percentage for 2015 (lin	ne 10c, column (f	f) divided by line 1	3, column (f))		17	%
18	Investment income percentage from 2014 §	Schedule A, Part	III, line 17			18	%
		anization did no	ot check the box	on line 14, and	line 15 is more	than 331/3 %, a	
	331/3% support tests - 2015. If the org	,					
				inization qualifies	as a publicly	supported organi	zation 🕨 l l
19 a	17 is not more than 331/3%, check thi	is box and sto p	here. The orga	inization qualifies ine 14 or line 19	as a publicly: a, and line 16 is	supported organi: more than 331/3	zation ► - %, and
19 a	17 is not more than 331/3 %, check thi 331/3 % support tests - 2014. If the orga	is box and stop inization did not	here. The orga check a box on I	ine 14 or line 19	a, and line 16 is	more than 331/3	%, and
19 a	17 is not more than 331/3%, check thi 331/3% support tests - 2014. If the orga line 18 is not more than 331/3%, check	is box and stop inization did not this box and st	here. The organ check a box on I cop here. The org	ine 14 or line 19 ganization qualifie	a, and line 16 is s as a publicly	more than 331/3 supported organia	×%, and zation ➤
19 a b 20 JSA	17 is not more than 331/3%, check thi 331/3% support tests - 2014. If the orgaline 18 is not more than 331/3%, check Private foundation. If the organization of	is box and stop inization did not this box and st	here. The organ check a box on I cop here. The org	ine 14 or line 19 ganization qualifie	a, and line 16 is is as a publicly check this bo	more than 331/3 supported organia	%, and zation >
19 a b	17 is not more than 331/3%, check thi 331/3% support tests - 2014. If the orgaline 18 is not more than 331/3%, check Private foundation. If the organization of	is box and stop inization did not this box and st	here. The organ check a box on I cop here. The org	ine 14 or line 19 ganization qualifie	a, and line 16 is is as a publicly check this bo	more than 331/3 supported organi x and see instri	%, and zation >
19 a b 20 JSA	17 is not more than 331/3 %, check thi 331/3 % support tests - 2014. If the orgaline 18 is not more than 331/3 %, check Private foundation. If the organization of 1,000	is box and stop inization did not this box and st	here. The organ check a box on I cop here. The org	ine 14 or line 19 ganization qualifie	a, and line 16 is is as a publicly check this bo	more than 331/3 supported organi x and see instri	%, and zation >

Nο

Yes

Part IV Supporting Organizations

(Complete only if you checked a box in line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11a of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. A	All Supporting C	Organizations

- Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI.**
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10 a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Part	V Supporting Organizations (continued)	<u> Mirana yana a</u>	·····	1 age (
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		1	
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)	BET		
	below, the governing body of a supported organization?	1 (a	I	
b	A family member of a person described in (a) above?	11b	<u> </u>	
Secti	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
••••	19 19 por outporting organizations			T
	Did the disease tweeters as well to the	T) 432 43	Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		arigona: Pali ja	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or	7 (12.10) (
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part	446		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.			5452
Secti	on C. Type II Supporting Organizations	2	<u> </u>	
	on o, type is oupporting organizations			
1	Were a majority of the arganization's directors of trustees during the Land	118748	Yes	No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that confrolled or managed			
	the supported organization(s).	1	mujudi. F.	10.0351
Secti-	on D. All Type III Supporting Organizations			
1	Did the organization provide to each of its average of its average.		Yes	No
•	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior		ini Nana	
	tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of			
	the organization's governing documents in effect on the date of notification, to the extent not previously provided?			M
2	·	1	. 1	1.477 -
4	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	4		
	significant voice in the organization's investment policies and in directing the use of the organization's	1.155.355.2.1 1.4271.52.1 1.537.161		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		111111111111
	on E. Type III Functionally-Integrated Supporting Organizations		`	
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see in:	structio	ons):	
a	The organization satisfied the Activities Test. Complete line 2 below.			
b c	The organization is the parent of each of its supported organizations. Complete line 3 below.			
Ç	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see			
2	Activities Test. Answer (a) and (b) below.		Yes	NO
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			intelet Potesta
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a	Market (109401
b				Janj
.,	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	94	USY.	
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
SA	Schedule A (Form	990 or 9	190-EZ	2015

Type III Non-Functionally integrated 509(a)(3) Supporting Organ	izatio	ons	
1 Check here if the organization satisfied the Integral Part Test as a qualifying			tructions. All
other Type III non-functionally integrated supporting organizations must com	nplete	Sections A th rough E.	
Section A - Adjusted Net Income		(A) Prior (ear	B) Curtent Year optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		•
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		•
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see	1		
instructions for short tax year or assets held for part of year):		Historian in a production of the object.	
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			ophografia de par Gadol
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		,
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	,	
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		***
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2	- Cort. Burger (d. 1140-1915) affair Estaph (1	
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		•
5 Income tax imposed in prior year	5		,
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally	y-inte	grated Type III supporting o	organization (see
instructions).			

Schedule A (Form 990 or 990-EZ) 2015

Saat		Supporting Organiza	itions (continued)	
	ion D - Distributions	***		Current Year
1_	Amounts paid to supported organizations to accomplish e	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppor	ted	
	organizations, in excess of income from activity			JPI
3_	Administrative expenses paid to accomplish exempt purp	oses of supported organ	izations	
<u>4</u> 5	Amounts paid to acquire exempt-use assets			<u> </u>
5 6	Qualified set-aside amounts (prior IRS approval required)			***
7	Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6.			
 8	Distributions to attentive supported organizations to which			
U	(provide details in Part VI). See instructions.	the organization is res	ponsive	
9	Distributable amount for 2015 from Section C, line 6			,
10	Line 8 amount divided by Line 9 amount	VA		
	Ene o amount divided by time 5 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			· · · · · · · · · · · · · · · · · · ·
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required-see instructions)			
3	Excess distributions carryover, if any, to 2015:			
a				
b				
<u>C</u>	<u> </u>			
d	From 2013			
e	From 2014			
	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2015 distributable amount			
<u>i</u>	Carryover from 2010 not applied (see instructions)	Control of the Contro		
<u></u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2015 from Section			
а	D, line 7: \$ Applied to underdistributions of prior years			
b	Applied to 2015 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2015, if	vajinsi raja, Birui Araa zwana wi mniyeye ne.		n far yezhek kijyer-Hajatkijak ja jar niego. En er farran metamona en kesteka er hallet en
•	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h	e 17 dengari dan bisangan katalah 1997 kan bisangan Tahun dan bisangan bisangan bisangan bisangan bisangan bisangan bisangan bisangan bisangan bisangan bisangan b	i Pesti pasaki a Para Gerati iki malasi	
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			
7	Excess distributions carryover to 2016. Add lines 3	RESIDENCE TO THE PLANTAGE AND A THE STORY OF THE STORY		nikumeki povenjeju kao nazvije procena s
	and 4c.		ijdķidram torp (1992)	
8	Breakdown of line 7:			
а	And developed the property of the control of the co			naturan de il vio production au Millebriania La Maira de la Martina de la Millebriania
b				una anti di suo est propunsi destrutere 2006. Arrento dell'Orio dell'Orio della di Salaria dell'Arrento Arrento di Salaria di Salaria di Salaria dell'Arrento della serie della serie della serie della serie della s
С	Excess from 2013			organise egite angla a salang a Najbart (1996) a tabu a tabu at tabu Tabu dan panggan angla angla angla angla angla angla angla angla angla angla angla angla angla angla angla ang
d	Excess from 2014			one of the property of the second of the sec
ę	Excess from 2015			

Schedule A (Form 990 or 990-EZ) 2015

TOTALS

G	(-1 t-f	1 (1				rage 0
Part VI Supplement and Part III,	tal Information. Providine 12. Also complet	e the explana e this part for a	itions required land in a strong in the stro	oy Part II, Iine formation. (Se	10; Part II, line 17a e instructions).	or 17b;
SCHEDULE A, PART	II - OTHER INCOM	МЕ			ATTACHMENT 1	PY
DESCRIPTION	2011	2012	2013	2014	2015	TOTAL
OTHER REVENUE	72,516.	40,254.	33,340.	55,449.	54,980.	256,539.

JSA 5E1225 1.000

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.ge

mp ve i entin ation number

OMB No. 1545-0047

Name of the organization

WATERKEEPER ALLIANCE, INC.

	13-40/1318
Organization type (check of	ine).
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(³) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
Check if your organization i Note. Only a section 501(c) instructions.	s covered by the General Rule or a Special Rule. (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See
General Rule	
For an organization or more (in mone contributor's total	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 y or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributions.
Special Rules	
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line and that received from any one contributor, during the year, total contributions of the greater of (1) of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
contributor, during	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one gethe year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, ional purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
contributor, during contributions total during the year for General Rule appl	in described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, contributions exclusively for religious, charitable, etc., purposes, but no such ed more than \$1,000. If this box is checked, enter here the total contributions that were received an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the ies to this organization because it received nonexclusively religious, charitable, etc., contributions more during the year
	it is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ ▶ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. 'າs pection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaig

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
- · Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on 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.

lf th	Section 501(c)(3) organizations e organization answered "Yes," (see separate instructions), the	that have NOT filed Form 5768 (ele on Form 990, Part IV, line 5 (Pro	ction under section 501(l xy Tax) (see separate	h)): Complete Part II-B. Do no instructions) or Form 990-	ot complete Part II-A. EZ, Part V, line 35c (Proxy
	Section 501(c)(4), (5), or (6) org				
Nam	e of organization		·····	Employer ide	ntification number
WA:	TERKEEPER ALLIANCE,	INC.		13-40	71318
Pa	rt LA Complete if the o	organization is exempt unde	r section 501(c) or	is a section 527 orga	nization.
1	Provide a description of the	organization's direct and indirec	t political campaign a	ctivities in Part IV.	
2					
3	Volunteer hours				
Pa		organization is exempt under			
1	Enter the amount of any exc	cise tax incurred by the organizat	ion under section 49	55,, ▶\$	
2	Enter the amount of any exc	cise tax incurred by organization	managers under sect	tion 4955 ▶ \$	
3	If the organization incurred	a section 4955 tax, did it file Forr	n 4720 for this year?		. Yes No
					Yes No
01500000000	If "Yes," describe in Part IV.				
ł		organization is exempt unde		···).
1		expended by the filing organizati			
2		ng organization's funds contribute			
_	527 exempt function activiti	es [°]		▶\$	
3	line 17b	enditures. Add lines 1 and 2. E		> \$	
4 5	organization made payment	e Form 1120-POL for this year? and employer identification numbers. For each organization listed, excluding the properties of the control of	enter the amount pai	d from the filing organiz	ation's funds. Also enter
	as a separate segregated fur	nd or a political action committee	(PAC). If additional s	pace is needed, provide i	nformation in Part IV.
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly
					delivered to a separate political organization. If none, enter -0
1)					
2)					
3)					
4)					
5)					
6)					
or F	aperwork Reduction Act Notice	e, see the Instructions for Form 990	 or 990-EZ.	Schedul	 e C (Form 990 or 990-EZ) 2015

13-4071318

Part II-A Complete if the organizat section 501(h)).	ion is exempt under section 501(c)(3) and	d filed Form 5768 (elec	tion under
A Check ▶ if the filing organization name, address, EIN, exp	n belongs to an affiliated group (and list in P penses, and share of excess lobbying expen	art IV each affiliated gro ditures).	oup member's
B Check ▶ if the filing organizatio	n checked box A and "limited control" provis	ions apply.	I
Limits on Lob	oying Expenditures eans amounts paid or incurred.)	(a) Fi ir organization's totals	(L) Af illiated group totals
	public opinion (grass roots lobbying)	6,529.	
b Total lobbying expenditures to influence	182.		
c Total lobbying expenditures (add lines *	6,711.	****	
d Other exempt purpose expenditures	17,187,332.	M	
e Total exempt purpose expenditures (ad	e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the	e amount from the following table in both		
columns.		1,000,000.	
If the amount on line 1e, column (a) or (b) is	: The lobbying nontaxable amount is:		
Not over \$500,000	20% of the amount on line 1e.		
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
Over \$17,000,000	\$1,000,000.		
g Grassroots nontaxable amount (enter 2	5% of line 1f)	250,000.	····
h Subtract line 1g from line 1a. If zero or l	ess, enter -0-	0.	0.
i Subtract line 1f from line 1c. If zero or le	ess, enter -0-	0.	0.
j If there is an amount other than zero	on either line 1h or line 1i, did the organiza	tion file Form 4720	
reporting section 4911 tax for this year?	·		Yes X No
	4-Year Averaging Period Under section 501(h)		

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

***************************************	Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Total			
2a Lobbying nontaxable amount	295,101.	529,130.	662,708.	1,000,000.	2,486,939.			
b Lobbying ceiling amount (150% of line 2a, column (e))					3,730,409.			
c Total lobbying expenditures	2,066.	1,820.	7,344.	6,711.	17,941.			
d Grassroots nontaxable amount	73,775.	132,283.	165,677.	250,000.	621,735.			
e Grassroots ceiling amount (150% of line 2d, column (e))					932,603.			
f Grassroots lobbying expenditures	1,658.	725.	3,504.	6,529.	12,416.			

Schedule C (Form 990 or 990-EZ) 2015

	(election under section 501(h)).	T filed Fo	rm 576	8		
For	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(a)		(b)	1	
	cription of the lobbying activity.	Yes No	ΛP	Mplou	nt	
1	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:					ridia. Nasi
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?		1			
d	Mailings to members, legislators, or the public?		-			
е	rubications, or published of broadcast statements?					
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?					
i	Other activities?					
j	Total, Add lines 1c through 1					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			atili.	igi:	Heij
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			·		
d D	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			<u> Krakii</u>		
	Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6).	(c)(5), or s	section			
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Par	Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5), or s	ection			
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"	OR (b) Pa	irt III-A,	line 3	3, is	
	answered "Yes."					
1	Dues, assessments and similar amounts from members		1		**	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amou	nts of				
•	political expenses for which the section 527(f) tax was paid). Current year					
b			_2a			
C			2b			
3			2c			·
4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	s	3			
7	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible to	of the				
	and nalitical asmanditure mast second					
5	and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	•.•••	5			
Par	Supplemental Information		5			
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated	Laroup liet	\: Bort I	Λ lin.	00.1	and
2 (se	e instructions); and Part II-B, line 1. Also, complete this part for any additional information.	i Group iisi	<i>)</i> , rait ii	-A, III K	Ç⊅ 1	anu
	, , , , , , , , , , , , , , , , , , , ,					
				·		
		···				

Supplemental Information (continued) Part IV

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Attach to Form 990.

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

Open to Public Inspection

Name of the organization WATERKEEPER ALLIANCE, INC. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Aggregate value of contributions to (during year) 2 3 Aggregate value of grants from (during year) . . 4 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 Yes 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. Part II Complete if the organization answered "Yes" on 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 a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 easement on the last day of the tax year. Held at the End of the Tax Year 2a b 2b Number of conservation easements on a certified historic structure included in (a) C Number of conservation easements included in (c) acquired after 8/17/06, and not on a 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 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ጸ and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on 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:

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

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

Schedule D (Form 990) 2015

m	2
Pana	_

-E	rt III Organizations Maintaini	ng Collections	of Art. His	torical T	reasure	s or Ot	her Similar	Assets (c)	ntinu	Page Z
3	Using the organization's acquisition									
	collection items (check all that app			, 000	it dily of		msg mat are t	a organiscam	. usc	OI IES
а	Public exhibition	-77-	d [Loan	or exchan	de prodra	ms			
b	Scholarly research		e	Other		go progra		$\mathbf{N}\mathbf{D}\mathbf{V}$		
C	Preservation for future gene	rations	ب ا		***************************************				+	
4	Provide a description of the orga		ns and evn	lain how t	thay furth	er the or	ganization's A	Zemnt nurn		Dort
•	XIII.	medion o concello	no ana exp	ILINI NOW	arey rurti	CI THE US	gariizations,e	venihr haib	056 111	raii.
5	During the year, did the organization	on solicit or receive	donations :	of art hiet	orical fres	euroe or	other elmilar			
•	assets to be sold to raise funds rati	ner than to he mai	ntained as n	art of the	ornenizati	on's colle	otion?	. Ye		¬ No
Pа	LV Escrow and Custodial Ar		italifed as p	art or the t	Ji gai lizati	OITS COILE	CHOSTS	те	5	No
	Complete if the organizat 990, Part X, line 21.		es" on Forr	n 990, Pa	art IV, line	e 9, or re	ported an am	ount on F	orm	
1a	Is the organization an agent, truste	ee. custodian or of	her interme	diary for c	ontributio	ns or othe	r assets not			
	included on Form 990, Part X?			a.a., 151 0	or in ibano		a doodto not	Ye	. [No
b	If "Yes," explain the arrangement i	n Part XIII and cor	nplete the fo	lowing tak	nie:				3	
			piolo tho re	noming tal	J.C.	1	Amol	ınt		
С	Beginning balance				1		Airiot		·	
ď					1					
e	Distributions during the year		*, * * * * * *		 					
f	Ending balance				'					
2a	Did the organization include an am	ount on Form 990	Part X line	21 for e	scrow or	custodial	account liability	/? Ye		No
b	If "Yes," explain the arrangement i	n Part XIII. Check	here if the e	xnlanation	has been	nrovided	on Part XIII			110
	tV Endowment Funds.		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	- Apramation	1100 00011	provided	on carezan		: -!	
100 TO 10	Complete if the organizat	ion answered "Y	es" on Forr	n 990. Pa	art IV. line	e 10.				
	-	(a) Current year	(b) Pri		(c) Two y		(d) Three years I	back (e) Fo	uг years	hack
1a	Beginning of year balance	3,007,410		6,343.		7,282.	1,137,9			,031
b	Contributions	13,258,858		6,097.		8,025.	1,132,0			,000
-	Net investment earnings, gains,		 	-,	-,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2,222,0		101	,
·	and losses									
d	Grants or scholarships		+						·	
u	Other expenditures for facilities									
е	and programs	14,848,054	9.63	0,030.	5.58	8,964.	1,082,7	16-	821	,033,
£			1 -7	-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-,,,,,,,,	1,002,7		021	, 000
·f	Administrative expenses	1,418,214	2.81	2,410.	4.05	6,343.	1,187,2	82 1	137	998
g	End of year balance				 		<u> </u>	<u> </u>	1.5	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2 a	Provide the estimated percentage Board designated or quasi-endowm	ent ▶	r end baland %	e (line 1g,	column (a)) held as	:			•
	Permanent endowment >	%	•							
C	Temporarily restricted endowment									
	The percentages on lines 2a, 2b, a	nd 2c should equa	l 100%.					••		
3 a	Are there endowment funds not in	the possession of	the organiza	ation that	are held a	ınd admir	istered for the			
	organization by:								Yes	No
	(i) unrelated organizations							3a(i)		X
	(ii) related organizations							3a(ii		<u>X</u>
b	If "Yes" on line 3a(ii), are the relate	d organizations list	ed as require	ed on Sche	edule R?.			3b		
4	Describe in Part XIII the intended u	ses of the organiz	ation's endo	wment fun	ıds.		-			
Par	Land, Buildings, and Equi Complete if the organizat	pment.	oo" on Eor	~ 000 D	out IV / lim	- 11- C	aa Farra 000	D=+ V 15-	- 40	
	Description of property	(a) Cost	or other basis	(b) Cost of	r other basis	(c) Acc	cumulated	(d) Book v	elue	
		(inve	estment)		her)	depre	eciation	(u) Book (arue	
	Land									
b	Buildings									
	Leasehold improvements									
	Equipment			3	75,198	. 3	31,547.		43,6	551.
е	Other									
Tota	I. Add lines 1a through 1e. <i>(Column</i>	(d) must equal For	m 990, Part	X, column	(B), line :	10c.)	>		43,6	551.

Schedule D (Form 990) 2015

	o ottoprote is and organization and report		, Part IV, line 11b. See Form 990, Part X, line 12.
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or end-df-year market value
	al derivatives		COPY
	held equity interests		
			Factorial Control of C
(T)	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		
<u>(B)</u>	. – – – – – – – – – – – – – – – – – – –	-	
(D)			

(=\			
(G)			
(H)			
CONTRACTOR OF THE PROPERTY.	(b) must equal Form 990, Part X, col. (B) line 12.) 🕨		The Control of the State of the
Part VIII		"Vaa" Fama 000	D-48/ E-44- O-5
			, Part IV, line 11c. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)			
_(2)			
(3)	***************************************		= 10 10 10 10 10 10 10 10 10 10 10 10 10
(4)			
(5) (6)			
(7)			
			
	'		•
(8)			
(8) (9)	(b) must equal Form 990, Part X, col. (B) line 13.) ▶		
(8) (9)	Other Assets.		
(8) (9) Total. (Column	Other Assets. Complete if the organization answered		Part IV, line 11d. See Form 990, Part X, line 15.
(8) (9) Total. (Column Part IX	Other Assets. Complete if the organization answered (a) Des	"Yes" on Form 990,	(b) Book value
(8) (9) Total. (Column Part IX (1) SECUE	Other Assets. Complete if the organization answered		
(8) (9) Total. (Column Part IX (1) SECUE (2)	Other Assets. Complete if the organization answered (a) Des		(b) Book value 235, 8
(8) (9) Total. (Column Part IX (1) SECUE (2) (3)	Other Assets. Complete if the organization answered (a) Des	cription	(b) Book value
(8) (9) Total. (Column Part IX (1) SECUE (2) (3) (4)	Other Assets. Complete if the organization answered (a) Des		(b) Book value 235, 8
(8) (9) Total. (Column Part IX (1) SECUE (2) (3) (4) (5)	Other Assets. Complete if the organization answered (a) Des	cription	(b) Book value 235, 8
(8) (9) Total. (Column Part IX (1) SECUE (2) (3) (4)	Other Assets. Complete if the organization answered (a) Des	cription	(b) Book value 235, 8
(8) (9) Total. (Column Part IX (1) SECUE (2) (3) (4) (5) (6)	Other Assets. Complete if the organization answered (a) Des	cription	(b) Book value 235, 8
(8) (9) Total. (Column Part IX (1) SECUE (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered (a) Deserting DEPOSIT	cription	(b) Book value 235, 8
(8) (9) Total. (Column Part IX (1) SECUE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column	Other Assets. Complete if the organization answered (a) Des RITY DEPOSIT mn (b) must equal Form 990, Part X, col. (B) lin	cription	(b) Book value 235, 8
(8) (9) Total. (Column Part IX (1) SECUE (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered (a) Des RITY DEPOSIT mn (b) must equal Form 990, Part X, col. (B) lin Other Liabilities.	cription	(b) Book value 235, 8 235, 8 ▶ 235, 8
(8) (9) Total. (Column Part IX (1) SECUE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column	Other Assets. Complete if the organization answered (a) Deservice (a)	cription	(b) Book value 235, 8
(8) (9) Total. (Column Part IX (1) SECUE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column	Other Assets. Complete if the organization answered (a) Des RITY DEPOSIT mn (b) must equal Form 990, Part X, col. (B) lin Other Liabilities. Complete if the organization answered line 25.	ne 15.)	(b) Book value 235, 8 235, 8
(8) (9) Total. (Column Part IX (1) SECUF (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X	Other Assets. Complete if the organization answered (a) Deservice (a)	cription	(b) Book value 235, 8 235, 8
(8) (9) Total. (Column Part IX (1) SECUF (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X	Other Assets. Complete if the organization answered (a) Deserved (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered line 25. (a) Description of liability	ne 15.)	(b) Book value 235, 8 235, 8
(8) (9) Total. (Column Part IX (1) SECUE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X	Other Assets. Complete if the organization answered (a) Deserved (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered line 25. (a) Description of liability	ne 15.)	(b) Book value 235, 8 235, 8
(8) (9) Total. (Column Part IX (1) SECUE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federa (2) (3) (4)	Other Assets. Complete if the organization answered (a) Deserved (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered line 25. (a) Description of liability	ne 15.)	(b) Book value 235, 8 235, 8
(8) (9) Total. (Column Part IX (1) SECUE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federa (2) (3) (4) (5)	Other Assets. Complete if the organization answered (a) Deserved (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered line 25. (a) Description of liability	ne 15.)	(b) Book value 235, 8 235, 8
(8) (9) Total. (Column Part IX (1) SECUE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federa (2) (3) (4) (5) (6)	Other Assets. Complete if the organization answered (a) Deserved (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered line 25. (a) Description of liability	ne 15.)	(b) Book value 235, 8 235, 8
(8) (9) Total. (Column Part IX (1) SECUE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federa (2) (3) (4) (5) (6) (7)	Other Assets. Complete if the organization answered (a) Deserved (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered line 25. (a) Description of liability	ne 15.)	(b) Book value 235, 8 235, 8
(8) (9) Total. (Column Part IX (1) SECUE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federa (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered (a) Deserved (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered line 25. (a) Description of liability	ne 15.)	(b) Book value 235, 8 235, 8
(8) (9) Total. (Column Part IX (1) SECUE (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column Part X 1. (1) Federa (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. Complete if the organization answered (a) Deserved (b) must equal Form 990, Part X, col. (B) line Other Liabilities. Complete if the organization answered line 25. (a) Description of liability	re 15.)	(b) Book value 235, 8 235, 8

Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	n.	, 290 +
1	Total revenue, gains, and other support per audited financial statements	1	16,8 06,884.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		DAW 7
a	Net unrealized gains (losses) on investments		PYI
b	Donated services and use of facilities	$egin{array}{cccccccccccccccccccccccccccccccccccc$	<u> </u>
	Recoveries of prior year grants		
C C	141 100		
d	other (Booking at Carry)	20	441,126.
	Add lines 2a through 2d	2e	16,365,758.
3	Subtract line 2e from line 1	3	10,303,730.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	16,365,758.
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses per Retu Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	rn.	
1	Total expenses and losses per audited financial statements	1	18,462,428.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
ď	Other (Describe in Part XIII.)		
	Add lines 2a through 2d	2e	462,025.
3	Subtract line 2e from line 1	3	18,000,403.
	1 1	11.21	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7h		
	Other (Describe in Part XIII.)		
	Add lines 4a and 4b	4c	18,000,403.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	10,000,403.
2; Part	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pa XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inforn PAGE 5	rt V, lii nation.	ne 4; Part X, line

			•
	· · · · · · · · · · · · · · · · · · ·		
-			
-			
			<u>.</u>

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 XI - LINE 2D

DIRECT FUNDRAISING EXPENSES: 462,025.

FOREIGN CURRENCY EXCHANGE LOSS: -20,899.

PART XII - LINE 2D

DIRECT FUNDRAISING EXPENSES: 462,025.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Name of the organization

WATERKEEPER ALLTANCE

MAT	EKKEEPEK ADDIANCE, IN				43-40/13.	
Par	General Information Form 990, Part IV, line 1	on Activities 4b.	Outside the I	United States. Complete	e if the organization answ	/ered "Yes" on
1	For grantmakers. Does the orga	anization mainta	in records to	substantiate the amount of	of its grants and other	****
	assistance, the grantees' eligibil	ity for the grant	ts or assistanc	e, and the selection criter	ia used to award the	
	grants or assistance?					X Yes No
2	For grantmakers. Describe in assistance outside the United St		ganization's p	rocedures for monitoring	g the use of its grants	and other
3	Activities per Region. (The follow	wing Part I, line	3 table can be	e duplicated if additional s	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	25.		GRANTMAKING	GRANTS & SCHOLARSHIP	245,721.
(2)	CENTRAL AMERICA/CARIBBEAN	23.	- <u> </u>	GRANTMAKING	GRANTS & SCHOLARSHIP	11,229,127.
(3)	EUROPE	2.		GRANTMAKING	GRANTS & SCHOLARSHIP	23,947.
	- 1001			-		
(4)	MIDDLE EAST AND NORTH AFRICA	2.		GRANTMAKING	GRANTS & SCHOLARSHIP	28,081.
(5)	NORTH AMERICA	1.		GRANTMAKING	SCHOLARSHIP	500.
(6)	SOUTH ASIA	3.		GRANTMAKING	SCHOLARSHIP	4,200.
(7)						
(8)						
(9)				-		
(10)						,
(11)				`		
(12)			····			
(13)						
(14)						
15)						
16)						
17)						
3a	Sub-total,	56.				11,531,576.
b	Total from continuation sheets to Part I					
С		56.				11,531,576.

Schedule F (Form 990) 2015

(i) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, (h) Description of non-cash assistance (g) Amount of non-cash assistance Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt (f) Manner of cash disbursement by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 245,721. 11,229,127 23,947 28,081 (e) Amount of cash grant (d) Purpose of grant SUPPORT SUPPORT SUPPORT SUPPORT MIDDLE EAST/NORTH AFRICA EUROPE/ICELAND/GREENLAND EAST ASIA & THE PACIFIC CENT. AMERICA/CARIBBEAN (c) Region (b) IRS code section and EIN (if applicable) (a) Name of organization PartIII (16) Ξ (12)₹ 12 9 5 3 3 N 4 9 6 G 8

JSA 5E1275 1.000 K4H00Y·M261

Enter total number of other organizations or entities.

က

Schedule F (Form 990) 2015

13-4071318

Schedule F (Form 990) 2015 Terr III

Page 3 Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, others
. (1)							
(2)		·					
(3)							
(4)							
(5)							
(9)							
(7)							
(8)							and the state of t
(6)							4444
(10)		The state of the s					- an appropriate
(11)							M
(12)	•	Per				**********	
(13)	output,						47.54.000.55
(14)			·			mm manus gaption (
(15)					2000		
(16)			a de la companya de l	41,040,000			CC
(17)			***************************************)P
(18)	response to the second			1			Y

Schedule F (Form 990) 2015

Part V Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	COF	A	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Yes	X	No

Schedule F (Form 990) 2015

Part V Suppleme

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 - LINE 2

CRITERIA FOR ALLOCATING FUNDS FOR INTERNATIONAL PROGRAM SUPPORT PROJECT:

- PRIORITY OF FUNDING GIVEN TO FIRST TIME APPLICANTS.
- APPLICANTS ARE REQUIRED TO SUBMIT A PROPOSAL OR OTHER FORMAL REQUEST.
- FUNDS REQUESTED MUST BE UTILIZED TO FULFILL OR CONTINUE COMPLIANCE OF A SPECIFIC WATERKEEPER ALLIANCE'S QUALITY STANDARD.
- 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)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

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.

OMB No. 1545-0047

Open to Public

Name of the organization Emp WATERKEEPER ALLIANCE, INC. Fundraising Activities. Complete if the organization answered "Yes" on Form 990 Part IV , line 17 Part I Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. e X Solicitation of non-government grants Mail solicitations а Solicitation of government grants Internet and email solicitations f b X Special fundraising events Phone solicitations g C Х In-person solicitations d 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees X | Yes or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) (or retained by) (ii) Activity custody or control of fundraiser listed in or entity (fundraiser) from activity contributions? organization col. (i) Yes No 1 ATTACHMENT 1 3 6 8 9 10 914,610 125,721 788,889. Total List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, SD, TN, TX, UT, VA, WA, WV, WI,

Page	2

			(a) Event #1 SKI FEST	(b) Event #2 KEEP IT CLEAN	(c) Other events	(a) Cotal events
,			(event type)	(event type)	(total number)	to l. (c))
200	1 Gross receip	ots	505,376.	288,631.	98,340.	892,347
- 1		ributions	350,263.	227,116.	84,120.	661,499
			155,113.	61,515.	14,220.	230,848
	4 Cash prizes					
	5 Noncash priz	zes				
	6 Rent/facility	costs				
	7 Food and be	verages	43,752.	61,515.	14,220.	119,487
	8 Entertainme	nt				
	9 Other direct	expenses	229,546.	92,105.	20,887.	342,538
1	Direct expen	ise summary. Add lines 4	through 9 in column (d)			462,025
1	Net income	summary. Subtract line 1	0 from line 3, column (d)			-231,177
ari	III Gaming	j. Complete if the orga 15,000 on Form 990-E	anization answered "Y	es" on Form 990, Par	t IV, line 19, or repo	orted more
			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
	÷	ле			(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
+	1 Gross revenu					(d) Total gaming (add col. (a) through col. (c))
	1 Gross revenu 2 Cash prizes	ле , , , , , , , , , , , , , , , , , , ,			(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
-	1 Gross revenu 2 Cash prizes 3 Noncash priz	es		bingo/progressive bingo		(d) Total gaming (add col. (a) through col. (c))
	1 Gross revenu 2 Cash prizes 3 Noncash priz 4 Rent/facility	es	(a) Bingo	bingo/progressive bingo		(d) Total gaming (add col. (a) through col. (c))
	1 Gross revenu 2 Cash prizes 3 Noncash priz 4 Rent/facility 5 Other direct	es	(a) Bingo	bingo/progressive bingo		(d) Total gaming (add col. (a) through col. (c))
	1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility 5 Other direct 6 Volunteer lab	es	(a) Bingo	Yes%	Yes%	(d) Total gaming (add col. (a) through col. (c))
	1 Gross revenue 2 Cash prizes 3 Noncash prize 4 Rent/facility 5 Other direct 6 Volunteer lab 7 Direct expens	es	(a) Bingo Yes% No through 5 in column (d)	Yes% No	Yes% No	(d) Total gaming (add col. (a) through col. (c))
a	1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility 5 Other direct 6 Volunteer lab 7 Direct expens 8 Net gaming inter the state(9 the organization	es	(a) Bingo Yes% No through 5 in column (d) ct line 7 from line 1, column (d) on conducts gaming act aming activities in each	Yes% No	Yes % No	col. (a) through col. (c)
a	1 Gross revenue 2 Cash prizes 3 Noncash prizes 4 Rent/facility 5 Other direct 6 Volunteer lab 7 Direct expens 8 Net gaming inter the state(9 the organization	es	(a) Bingo Yes% No through 5 in column (d) ct line 7 from line 1, column (d) on conducts gaming act aming activities in each	Yes% No	Yes % No	col. (a) through col. (c)

	WATERKEEPER ALLIANCE, INC. 13-40	71318	
	ule G (Form 990 or 990-EZ) 2015		Page 3
11	Does the organization conduct 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?		No
13	Indicate the percentage of gaming activity conducted in:	I ds [140
а	The organization's facility)	%
b	An outside facility		%
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	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the		
	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	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$	3	
Part		(v) and	
	Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional infor (see instructions).	mation	

FUNDRAISER
PAID
HIGHEST
1
Н
PART
Ġ
SCHEDULE
90,

NAME AND ADDRESS OF FUNDRAISER	ACTIVITY	DID FUNDRAISER HAVE CUSTODY OR CONTROL OF CONTRIBUTIONS? YES NO	GROSS RECEIPTS FROM ACTIVITY	AMOUNT PAID TO (OR RETAINED BY FUNDRAISER	AMOUNT PAID TO (OR RETAINED BY ORGANIZATION
CW & CO.	PR/ EVENT PRODUCTION	×	505,376.	93,321.	412,055.

152 MADISON AVENUE, SUITE 906 NEW YORK

NY 10016

ROBBINS KERSTEN DIRECT

201 SUMMER STREET PO BOX 5838 HOLLISTON MA 01746

376,834.

32,400.

409,234.

×

DIRECT MAIL



SCHEDULE (Form 990)

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

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

▶ Attach to Form 990.

201	Open to Public	

OMB No. 1545-0047

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

Employer identification number 13-4071318

	General Information on Grants and Assistance
HNC.	n on Gr
R ALLIANCE,	Seneral Information o
WATERKEEPER	Gener
WATERF	15010

Department of the Treasury Internal Revenue Service Name of the organization

ž X Yes 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

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

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)	59,038.				SCHOLARSHIP & GRANT
(2) WACCAMAW RIVERKEEPER				ri de de de consesses de la consesse de la consess	- Thirthe and the state of the		١
P.O. BOX 261954 CONWAY, SC 29528	57-1118288	501(C)(3)	55,168.				GRANT
(3) CATAWBA RIVERKEEPER FOUNDATION					- Company of the Comp		
421 MINUTE IN. CHARLOTTE, NC 28217	56-2034780 · 501(C)(3)	501(C)(3)	22,592.			-	SCHOLARSHIP & GRANT
(4) LOS ANGELES WATERKEEPER							
120 BROADWAY STE 105 SANTA MONICA, CA 90401	95-4444787	501(C)(3)	8,000.				GRANT
(5) POTOMAC RIVERKEEPER INC			NAME OF TAXABLE PARTY.		The Thomas of th	Thirtichtum.	Mithediscourse
1615 M STREET NW WASHINGTON DC, DC 20036	54-1982624	501(C)(3)	7,121.				GRANT
(6) SAVANNAH RIVERKEEPER					7	***	
PO BOX 14908 AUGUSTA, GA 30919	58-2630660	501(C)(3)	45,400.				SCHOLARSHIP & GRANT
(7) CAPE FEAR RIVER WATCH							,
617 SURREY STREET WILMINGTON, NC 28401	58-2121884	501 (C) (3)	31,529.				SCHOLARSHIP & GRANT
(8) SNAKE RIVER MATERKEEPER		-		The state of the s	T-T-MAN-BELL-Assessed		
2123 N. 16TH STREET BOISE, ID 83702	47-1608920	501(C)(3)	9,039.				SCHOLARHSIP & GRANT
(9) SOUND RIVERS							
PO BOX 1854 WASHINGTON, NC 27889	58-1475258	501(C)(3)	89,480.				SCHOLARSHIP & GRANT
(10) PUGET SOUNDKEEPER ALLIANCE							1.
130 NICKERSON STREET SEATTLE, WA 98109	91-1285783	501(C)(3)	5,600.				GRANG
(11) COASTAL CAROLINA RIVERMATCH							(
1406 NEUSE BLVD NEW BERN, NC 28560	58-2198018	501(C)(3)	104,284.				GRANT
(12) MOUNTAINTRUE							P
29 N MARKET STREET STE 610	56~1422691	501 (C) (3)	48,542,				GRAN
2 Enter total number of section 501(c)(3) and government or	d government	i organizations li	ganizations listed in the line 1 table	ple			
3 Enter total number of other organizations listed in the line 1	sted in the lir	e 1 table				. <i>A</i>	

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

Schedule I (Form 990) (2015)

JSA 5E1288 1.000

K4H00Y M261

SCHEDULE (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

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

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

545-0047	
_	i
ģ	

Open to Public

Employer Identification number

WATERKEEPER ALLIANCE, INC.						13-4071318	α
Ceneral Information on Grants and Assistance	nd Assistanc	9				104.04	
1 Does the organization maintain records to substantiate th	substantiate the	he amount of the	e grants or assista	nce, the grantees'	le amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	s or assistance, and	
the selection criteria used to award the grants or assistance?	nts or assistance	ce?					X Yes
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	edures for mo	nitoring the use	of grant funds in the		•		
Estite Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form	Domestic Or	ganizations ar	nd Domestic Gov	vernments. Com	olete if the organiza	ation answered "Y	es" on 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	oient that rec	seived more th	an \$5,000. Part II	can be duplicate	ed if additional spa	ce 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) LIVE TO LOVE INTERNATIONAL							
PO BOX 492358 LOS ANGELES, CA 90049	26-3069538	501(C)(3)	32,605.				GRANT
(2) PATUXENT RIVERKEEPER			- Andrews		The state of the s		7
17412 NOTTINGHAM ROAD	22-3878950	501(C)(3)	15,210.				SCHOLARSHIP & GRANT
(3) MIAMI RIVERKEEPER							
1840 CHUCHUNANTAH ROAD MIAMI, FL 33133	27-3627697	501(C)(3)	10,000.				
(4) JAMES RIVER ASSOCIATION							
4833 OLD MAIN STREET RICHMOND, VA 23231	51-0211913	501(C)(3)	8,800.				SCHOLARSHIP & GRANT
(5) ASSATEAUGUE COASTAL TRUST INC			- Printer Control			***************************************	
PO BOX 731 BERLIN, MD 21811	52-1250849	501(C)(3)	7,000.				SCHOLARSHIP & GRANT
(6) MIDDLE SUSQUEHANNA RIVERKEEPER ASSOCIATION						70000	1
PO BOX 252 LEWISBURG, PA 17837	47-5000692	501(C)(3)	5,500.				SCHOLARSHIP & GRANT
(7) LAKE PEND ORIELLE WATERKEEPER				- Annihitana		***************************************	١.
PO BOX 732 SANDFOINT, ID 83864	26-4219188	501(C)(3)	5,400.				SCHOLARSHIP & GRANT
(8)		-	-	******		***************************************	
- Andrews							.·'
(6)						- Parketina - Park	, Addition of the state of the
- A the forman every eve							
(10)	· :						
							7
(11)							0
(12)	,						P
A CONTRACTOR OF THE CONTRACTOR		^					Y
	nd governmen		organizations listed in the line 1 table	able	* * * * * * * * * * * * * * * * * * * *	A	100
3 Enter total number of other organizations listed in the lin	listed in the lir	ле 1 table				A	
For Paperwork Reduction Act Notice, see the Instructions for Form 990.	tions for Form 9	.06				Sch	Schedule I (Form 990) (2015)

JSA 5E1288 1.000

K4H00Y M261

Schedule I (Form 990) (2015)

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. Part III

PART I - LINE 2

WE MONITOR THE USE OF FUNDS IN THE UNITED STATES BY REQUIRING REPORTS

FROM EACH GRANTEE DETAILING THE ACTIVITIES AND ACCOMPLISHMENTS GENERATED

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

REQUIRE DOCUMENTATION OF PURCHASE.

COPY

Schedule I (Form 990) (2015)

SCHEDULE J (Form 990)

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

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

OMB No. 1545-0047

Open ic Public

Department of the Treasury Internal Revenue Service Name of the organization

WATERKEEPER ALLIANCE, INC.

	13-40/131	. 0	1	
भा	Questions Regarding Compensation			•
		***	Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form		149	And a
	990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.	17.60	1970	
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)		(4)	elenenia.
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	of relindursement or provision of all of the expenses described above? If "No" complete Part III to		and an experience	Contributed Section (C.)
2	explain	1b	RAF SADE OCCU	rolles of the
4	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			
	1a?	2		
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.			
	Compensation committee Written employment contract		100.00	
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee	194 Visioner		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing	Zy Si		
	organization or a related organization:	50.00		
а	Receive a severance payment or change-of-control payment?	4a	www.commonstatical	X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		X
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	11-11-1		Tables Service
	, and and approache amounts for each term in a dit in.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any	Se Sec		
_	compensation contingent on the revenues of:	Sales Karr		
а.	The organization?			X
h	Any related organization?	5a	-	$\frac{\Lambda}{X}$
IJ	If "Yes" to line 5a or 5b, describe in Part III.	5b		X Marketa
2				
,	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			S.
_	compensation contingent on the net earnings of:			
a	The organization?	6a		X
b	Any related organization?	6b		Χ
	If "Yes" on line 6a or 6b, describe in Part III.	ESS.		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed			
	payments not described on lines 5 and 6? If "Yes," describe in Part III.	7		X
3	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		X
)	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	ا و ا	a avarena sessi. S	Commence Street

Page 2

Schedule J (Form 990) 2015

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

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

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

individual,

		(B) Breakdown of W-2 and		or 1099-MISC compensation				
(A) Name and Title		(i) Base		(iii) Other	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported
		compensation	compensation	reportable compensation	Longaron			as deferred on prior Form 990
ROBERT F. KENNEDY, JR.	ε	201,538.	0	0.		11,615,	213,153.	
1	Ξ		.0	0				
MARY BETH POSTMAN	Ξ	175,566.	• 0	0.		11,530.	187,096.	***************************************
2SECRETARY	(E)	0.	.0	0		·		
MARC YAGGI	ε	202,167.	0.	0		35,375.	237,542.	
	€	0.	0	0.				
KELLY FOSTER	€	117,271.	0	0.		33,836.	151,107.	
4SENIOR ATTORNEY	(1)	0	0	0				
	Θ	133,846.	0	0		19,699.	153,545.	, and the second
SCOMMUNICATIONS DIRECTOR (11)	(E)	0.	0	0				- Pibrary
	(E)			The contract of the contract o	7,000			
9	€						-	- Hilliam and an an an an an an an an an an an an an
	Ξ				TO THE PARTY OF TH	- Anna Caraca		This is a second of the second
,	€							
	€			***************************************		Affic		
8	(ii)				Table of the same			4444
	Ξ			The state of the s		TWO WAY		
6	(E)				-			- Triffiche and a second and a
	Ξ							
10	(E)			- April 2 for two				- Children
	€	-		-				
	(ii)				Militare			***************************************
	Θ	and the state of t	77.77			* The state of the		
12	(ii)					The department of the second o		
	€	The state of the s						
13	(ii)					Thirty reconstruction of the state of the st		C
	€							
14	⊞	-	· · · · · · · · · · · · · · · · · · ·				-)
	8	`						P
15	€							
	€							7
16	▣			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				

Schedule J (Form 990) 2015

Page 3

Schedule J (Form 990) 2015

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) 2015

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.

Department of the Treasury Internal Revenue Service Name of the organization

WATERKEEPER ALLIANCE, INC.

OMB No. 1545-0047

2015

Spen ic Public Procession

Prid nti : ion in Index

Em

PART III - LINE 1

WATERKEEPER ALLIANCE, INC. IS A GLOBAL ENVIRONMENTAL ORGANIZATION UNITING MORE THAN 250 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 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.

PART III - LINE 4A

WATERKEEPER SUPPORT:



WATERKEEPER ALLIANCE CONNECTS OVER 300 (AND GROWING) INDIVIDUAL WATERKEEPER ORGANIZATIONS AND AFFILIATES 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 (EMAIL DISTRIBUTION AND INFORMATION SHARING FUNCTION) 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

LOCAL THREATS TO THEIR WATERWAYS. THE ACCUMULATED SUCCESS OF OUR MOVEMENT OF 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 A RECOMMITMENT 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 TO A HEALTHY, CLEAN AND RENEWABLE ENERGY FUTURE FOR THE COUNTY; COAT. AND PROTECT OUR FOOD SYSTEMS AND CHILDREN FROM MERCURY A POTENT NEUROTOXIN THAT NEEDLESSLY RELEASED BY COAL.

Employer identification number 13-4071318

COPY

PART III - LINE 4C

ANNUAL CONFERENCE:

SINCE ITS INCEPTION, THE ANNUAL WATERKEEPER ALLIANCE CONFERENCE HAS BEEN 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 AND ECONOMICS, MEDIA AND COMMUNICATIONS, ORGANIZATIONAL DEVELOPMENT, FUNDRAISING AND WATER QUALITY MONITORING.

PART III - LINE 4D

ALL OTHER PROGRAMS:

THE REMAINDER OF OUR MISSION PROGRAMS INCLUDES PROMOTING THE WATERKEEPER

COPY

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



PART VII, SECTION A. - LINE 1A
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.

PART X - LINES 27 & 28 / SCHEDULE D - PART V

DURING 2016, THE ALLIANCE BECAME AWARE THAT CERTAIN REVENUE HAD BEEN

ERRONEOUSLY RELEASED FROM TEMPORARILY RESTRICTED NET ASSETS DURING THE

2015 FISCAL YEAR. ACCORDINGLY, AS OF JUNE 30, 2015, THE ALLIANCE

ADJUSTED AND RESTATED ITS UNRESTRICTED AND TEMPORARILY RESTRICTED NET

ASSET BALANCES BY \$195,000 TO GIVE RETROACTIVE EFFECT TO THIS CHANGE.

Name of the organization

WATERKEEPER ALLIANCE, INC.

Employer identification number 13-4071318

COPY

ATTACHMENT 1

PART XI - LINE 9

FOREIGN EXCHANGE LOSS -20,899.

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 (Re	ev. 1-2014)				Page 2
• If you are	e filing for an Additional (Not Automatic) 3-M	onth Exter	sion, complete only Part I	I and check this box	
Note, Only	complete Part II if you have already been gra	nted an au	tomatic 3-month extension	on a previously filed Form 886	8
• If you are	e filing for an Automatic 3-Month Extension,	complete d	only Part I (on page 1).	CODY	<u> </u>
Part II	Additional (Not Automatic) 3-Month E	xtension o	of Time. Only file the original	inal (no copiet pet dec	<u> </u>
				nter filer's ide <u>ntifying number, se</u>	e instructions
	Name of exempt organization or other filer, see in	structions.		Employer identification number (
Type or	-				
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	180 MAIDEN LANE, SUITE 603 132				
filing your return, See	City, town or post office, state, and ZIP code. For	a foreign ad	dress, see instructions.		
instructions.	NEW YORK, NY 10038				
Enter the R	eturn code for the return that this application	is for (file a	a separate application for ea	ach return)	01
Application		Return	Application		Return
is For		Code	is For		Code
Form 990 (or Form 990-EZ	01			
Form 990-I	BL	02	Form 1041-A	Total Control	08
Form 4720) (individual)	03	Form 4720 (other than in	dividual)	09
Form 990-F	PF	04	Form 5227	-	10
Form 990-	T (sec. 401(a) or 408(a) trust)	05	Form 6069		. 11
***************************************	T (trust other than above)	06	Form 8870		12
STOP! Do n	ot complete Part II if you were not already	granted ar	automatic 3-month exter	sion on a previously filed For	m 8868.
 The book 	s are in the care of ▶ RACHEL COOK LANE.	SUITE	603 NEW YORK, NY 10	0038	
Telephon	e No. ► 212 747-0622		Fax No. ▶ 212 747-0	0611	
If the org	anization does not have an office or place of I	business in	the United States, check the	nis box	▶ □
If this is fell	or a Group Return, enter the organization's for	ur digit Gro	up Exemption Number (GEI	N) If ti	his is
for the whol	e group, check this box	fit is for pa	irt of the group, check this t	oox▶ and at	tach a
	names and EINs of all members the extension				
	est an additional 3-month extension of time ur		0	<u>5/15</u> , 20 <u>17</u> .	
	lendar year, or other tax year beginni		· ·		20 16
- 1	ax year entered in line 5 is for less than 12 m	onths, chec	ck reason: Initial re	turn Final return	
	Change in accounting period				
7 State i	n detail why you need the extension ALL T				-
-	RETURN IS NOT AND WILL NOT BE				
-	RESPECTIVELY REQUEST ADDITIONA	L TIME	TO COMPLETE THE RE'	rurn.	
0 - 16 45:-	and the first in first France 200 Bl. 200 Bl. 200			. ' .	
	application is for Forms 990-BL, 990-PF, 99	∂0-1, 4720), or 6069, enter the tent	" I I	٠
	undable credits. See instructions.	4700		8a \$	0.
D II UIIS	application is for Forms 990-PF, 990-T,	4720, or	6069, enter any refund	dable credits and	
	ted tax payments made. Include any pric	or year o	verpayment allowed as		
	t paid previously with Form 8868.			8b \$	0.
C Dalanc	te Due. Subtract line 8b from line 8a. Include	your paym	ent with this form, if require		
(Elective	onic Federal Tax Payment System). See instruc			8c \$	0.
F. 1	Signature and Verifica				
under penalti knowledne an	ies of perjury, I declare that I have examined the delief, it is true, correct, and complete, and that I a	us form, inc	cluding accompanying schedu	ules and statements, and to the	best of my
ago an	, wee, some somprote, and that I	am cutiiviikt	o prepare uns total.		
Signature 🕨			Title 🌬	mata M	
g.,			Title ▶	Date ▶	(Rev. 1-2014)
				FORE 0000	(1164. 1-2014)

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. 1545-1	709
	OPV	
		X

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box

If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).
 Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

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 Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Type or print WATERKEEPER ALLIANCE, INC. 13-4071318 File by the Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) due date for 180 MAIDEN LANE, SUITE 603 1329 filing your return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions. NEW YORK, NY 10038 Enter the Return code for the return that this application is for (file a separate application for each return) 0 1 Application Application Return Return ls For Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 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 RACHEL COOK, The books are in the care of ➤ 180 MAIDEN LANE, SUITE 603 NEW YORK, NY 10038 Telephone No. ▶ _ 212 747-0622 FAX No. ▶ 212 747-0611 • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 02/15, 2017, to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year 20 or tax year beginning _____07/01_, 20 15_, and ending ____06/30_, 20 16_.

Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.

3a \$ 0

b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

3b \$ 0

If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return

estimated tax payments made. Include any prior year overpayment allowed as a credit.

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.

3b \$ 0.

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

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

Form 8868 (Rev. 1-2014)

NYS Annual Filing for Charitable Organizations www.CharitiesNYS.com

Send with fee and attachments to: NYS Office of the Attorney General Charities Bureau Registration Section 120 Broadway New York, NY 10271

2015 Open to Public

1. General Information

For Fiscal Year Beginning	(mm/dd/yyyy) = 07	01/ 2015 and Er	nding (mm/dd/vvvv)	06 / 30 / 2016
Check if Applicable:	Name of Organization: WA	TERKEEPER ALLIAN	CE, INC.	Employer Identification Number (EIN):
Address Change				13-4071318
Name Change	Mailing Address:			NY Registration Number:
Initial Filing	180 MAIDEN LANE			06-53-57
Final Filing	City / State / Zip:	000		Telephone:
Amended Filing	NEW YORK, NY 10 Website:	U38		(212) 747-0622
Reg ID Pending	WWW.WATERKEEPER	ODC		Email:
44	WWW.WAIERREEPER	•OKG		RCOOK@WATERKEEPER.ORG
Check your organization's registration category:	7A only EPT	L only X DUAL (7A & E		onfirm your Registration Category in the harities Registry at www.charitiesNYS.com .
2. Certification				
See instructions for certificati	ion requirements. Imprope	r certification is a violation	of law that may be subject	to penalties.
		viewed this report, including in accordance with the laws		e best of our knowledge and belief, applicable to this report.
President or Authorize	d Officer: Signature		Print Name a	and Title Date
Chief Financial Officer	or Treasurer			
Othor Thansaa Othoa	Signature		Print Name a	and Title Date
3. Annual Reporting	g Exemption			
categories (DUAL filers) that	apply to your registration, you cannot claim an exem	complete only parts 1, 2, ar	nd 3, and submit the certifi	gory (7A or EPTL only filers) or both ed Char500. No fee, schedules, or additional on, you must file applicable schedules and
3a. 7A filing exempt and the organization	ion: Total contributions from	onal fund raiser (PFR) or fun		ent agencies, etc. did not exceed \$25,000 solicit contributions during the fiscal year.
3b. EPTL filling exem the fiscal year.	uption: Gross receipts did n	ot exceed \$25,000 and the	market value of assets d	id not exceed \$25,000 at any time during
4. Schedules and A	ttachments			
See the following page for a checklist of schedules and attachments to complete your filing.	Yes No 4a. Di	d your organization use a pad raising activity in NY Stated the organization receive of	e? If yes, complete Scheo	
				a para para para para para para para pa
5. Fee			•	
See the checklist on the next page to calculate your fee(s). Indicate fee(s) you	7A filing fee:	EPTL filing fee:	Total fee:	Make a single check or money order payable to:
are submitting here:	4	Ψ	Ψ	"Department of Law"

CHAR500 Annual Filing for Charitable Organizations (Updated December 2015)

Annual Filing Checklist

Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:

- Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
- Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3.
- Your organization is registered as DUAL and you marked both the 7A and EPTL filing exemption in Part 3.

Checklist of Schedules and Attachments

Calculate Your Fee

FOE //	A and DUAL filers, calculate the 7A fee:
	\$0, if you checked the 7A exemption in Part 3a
X	\$25, if you did not check the 7A exemption in Part 3a
For EP	TL and DUAL filers, calculate the EPTL fee:
	\$0, if you checked the EPTL exemption in Part 3b
	\$25, if the NET WORTH is less than \$50,000
	\$50, if the NET WORTH is \$50,000 or more but less than \$250,000
	\$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000
X	\$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000
	\$750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000
	\$1500, if the NET WORTH is \$50,000,000 or more

We are a DUAL filer and checked box 3a, no Review Report or Audit Report is required

Send Your Filing

Send your CHAR500, all schedules and attachments, and total fee to:

NYS Office of the Attorney General Charities Bureau Registration Section 120 Broadway New York, NY 10271

Is my Registration Category 7A, EPTL, DUAL or EXEMPT?

Organizations are assigned a Registration Category upon registration with the NY Charities Bureau:

7A filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A")

EPTL filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY.

DUAL filers are registered under both 7A and EPTL,

EXEMPT filers have registered with the NY Charities Bureau and meet conditions in <u>Schedule E - Registration</u>

<u>Exemption for Charitable Organizations</u>. These organizations are not required to file annual financial reports but may do so voluntarily.

Confirm your Registration Category and learn more about NY law at www.CharitiesNYS.com.

Where do I find my organization's NET WORTH?

NET WORTH for fee purposes is calculated on:

- IRS From 990 Part I, line 22
- IRS Form 990 EZ Part I line 21
- IRS Form 990 PF, calculate the difference between
 Total Assets at Fair Market Value (Part II, line 16(c)) and
 Total Liabilities (Part II, line 23(b)).

2015

Schedule 4a: Professional Fund Raisers, Fund Raising Counsels, Commercial Co-Venturers www.CharitiesNYS.com

Open to Public inspection

If you checked the box in question 4a in Part 4 on the CHAR500 Annual Filing for Charitable Organizations, complete Fund Raiser (PFR), Fund Raising Counsel (FRC) or Commercial Co-Venturer (CCV) that the organization engaged for fu PFR or FRC should provide its NY Registration Number to you. Include this schedule with your certified CHAR500 NY\$ Annual Filing for Charitable

CA Professional ty in Y State. The

Organizations and use additional		
1. Organization Inform	nation	
Name of Organization: WATERKEEPER ALLIANO	CE, INC.	NY Registration Number: 06-53-57
2. Professional Fund R	aiser, Fund Raising Counsel, Commerci	al Co-Venturer Information
Fund Raising Professional type: X Professional Fund Raiser	Name of FRP: CW & CO.	NY Registration Number: 42 – 30 – 38
Fund Raising Counsel	Mailing Address: 152 MADISON AVENUE, SUITE 906	Telephone:
Commercial Co-Venturer	City/State/Zip: NEW YORK, NY 10016	212-379-4024
3. Contract Informatio	Contract End Date:	
07/01/2 4. Description of Servi Services provided by FRP: EVEN	ces	
5. Description of Component with Figure 2.		Amount Paid to FRP:
-		93,321.
6. Commercial Co-Ven	turer (CCV) Report	
Yes No If services v Section 173	vere provided by a CCV, did the CCV provide the charitable of (a) part 3 of the Executive Law Article 7A?	organization with the interim or closing report(s) required by

Definitions

A Professional Fund Raiser (PFR), in addition to other activities, conducts solicitation of contributions and/or handles the donations (Article 7A, 171-a.4). A Fund Raising Counsel (FRC) does not solicit or handle contributions but limits activities to advising or assisting a charitable organization to perform such functions for itself (Article 7A, 171-a.9).

A Commercial Co-Venturer (CCV) is an individual or for-profit company that is regularly and primarily engaged in trade or commerce other than raising funds for a charitable organization and who advertises that the purchase or use of goods, services, entertainment or any other thing of value will benefit a charitable organization (Article 7A, 171-a.6).

CHAR500 2015 Open to Public Schedule 4a: Professional Fund Raisers, Fund Raising Counsels, Commercial Co-Venturers inspection www.CharitiesNYS.com If you checked the box in question 4a in Part 4 on the CHAR500 Annual Filing for Charitable Organizations, complete H Frofessional Fund Raiser (PFR), Fund Raising Counsel (FRC) or Commercial Co-Venturer (CCV) that the organization engaged for fund Y State. The PFR or FRC should provide its NY Registration Number to you. Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations and use additional pages if necessary. 1. Organization Information Name of Organization: NY Registration Number: WATERKEEPER ALLIANCE, INC. 06-53-57 2. Professional Fund Raiser, Fund Raising Counsel, Commercial Co-Venturer Information Name of FRP: NY Registration Number: Fund Raising Professional type: ROBBINS KIRSTEN DIRECT 32 - 64 - 40X Professional Fund Raiser Mailing Address: Telephone: Fund Raising Counsel 201 SUMMER STREET PO BOX 5838 508-893-0210 Commercial Co-Venturer City / State / Zip: HOLLISTON, MA 01746 3. Contract Information Contract Start Date: Contract End Date: 04/01/2013 06/30/2016 4. Description of Services Services provided by FRP: WRITING DIRECT MAIL AND COORDINATING DIRECT MAIL VENDORS.

5. Description of Compensation

Compensation arrangement with FRP:	,	Amount Paid to FRP:	
	•		
	•		. 20 400
	 		32,400.

6. Commercial Co-Venturer (CCV) Report

Yes No	If services were provided by a CCV, did the CCV provide the charitable organization with the interim or closing reported Section 173(a) part 3 of the Executive Law Article 7A?	(s) required by
	Section 173(a) part 3 of the Executive Law Article 7A?	

Definitions

A **Professional Fund Raiser (PFR)**, in addition to other activities, conducts solicitation of contributions and/or handles the donations (Article 7A, 171-a.4). A **Fund Raising Counsel (FRC)** does not solicit or handle contributions but limits activities to advising or assisting a charitable organization to perform such functions for itself (Article 7A, 171-a.9).

A Commercial Co-Venturer (CCV) is an individual or for-profit company that is regularly and primarily engaged in trade or commerce other than raising funds for a charitable organization and who advertises that the purchase or use of goods, services, entertainment or any other thing of value will benefit a charitable organization (Article 7A, 171-a.6).

Schedule 4b: Government Grants www.CharitiesNYS.com

2015 Open to Public

h schidu Relix EACH

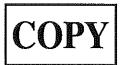
If you checked the box in question 4b in Part 4 on the CHAR500 Annual Filing for Charitable Organizations, complete the government grant. Use additional pages if necessary. Include this schedule with your certified CHAR500 NYS Annual

i	ч			×	4								н			ø	٠	п				н			÷							8	ŧ	'n			
ŀ	ı			ľ	B	Т	3	7	Ţ	-	Г	ì	П	7	E	ī	T	r		í	٦	н	À	ī	7	Э	Г	T	ĭ	٦	٠	7	1	r	3	г	П
		ı.	м	١.	٠,	e.	ж	÷	L	٦.	ы	L	ш	_			1		-4			ш	ш			-	ч	ш	u	ш		4	3	ь	-		ч

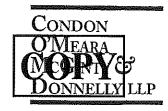
Street, 1921, Street,		
Name of Organization:	NY	Registration Number:

2. Government Grants

Name of Government Agency	Amount of Grant
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.
6.	6.
7. · · ·	7.
8.	8.
9	9.
10.	10.
11.	11.
12.	12.
13.	13.
14.	14.
15.	15.
Total Government Grants:	Total:



Financial Statements for the Year Ended June 30, 2016



Certified Public Accountants

One Battery Park Plaza New York, NY 10004-1405 Tel: (212) 661 - 7777 Fax: (212) 661 - 4010

Independent Auditor's Report

To the Board of Directors of Waterkeeper Alliance, Inc.

We have audited the accompanying financial statements of Waterkeeper Alliance, Inc. (the "Alliance") which comprise the statement of financial position as of June 30, 2016 and the related statements of activities, functional expenses and cash flows for the year then ended and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement. An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

COPY

In our opinion, the financial statements referred to in the first paragraph on the previous page present fairly, in all material respects, the financial position of Waterkeeper Alliance, Inc. as of June 30, 2016 and the results of its activities and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

We have previously audited the Alliance's fiscal 2015 financial statements, and our report dated October 5, 2015, expressed an unmodified opinion on those audited financial statements. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2015 is consistent, in all material respects, with the audited financial statements from which it has been derived.

Condu O'Mean McGity + Dowelly ILP



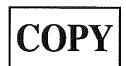
Statement of Financial Position

Assets

	Jun	e 30
	2016	2015*
Current assets		
Cash	\$ 988,686	\$2,149,407
Investments, at fair value	-	346,469
Contributions and grants receivable	692,746	698,832
Accounts receivable	6,649	2,578
Prepaid expenses	<u>71,004</u>	58,982
Total current assets	1,759,085	3,256,268
Security deposit	235,891	33,173
Equipment, at cost, net of accumulated depreciation		
of \$331,547 in 2016 and \$322,897 in 2015	<u>43,651</u>	<u>796</u>
Total assets	\$2,038,627	\$ 3,290,237
Liabilities and Net Assets		
Current liabilities		
Accounts payable	\$ 587,960	\$ 459,793
Accrued expenses	123,258	59,962
Accrued vacation	81,851	86,883
Deferred revenue	20,000	· -
Total current liabilities	813,069	606,638
Deferred rent	197,503	-
Total liabilities	1,010,572	606,638
Net assets	-	•
Unrestricted (deficit)	(390,149)	(323,811)
Temporarily restricted	1,418,204	3,007,410
Total net assets	1,028,055	2,683,599
Total liabilities and net assets	\$2,038,627	\$3,290,237

See notes to financial statements.

^{*} Restated



Statement of Activities For Year Ended June 30, 2016 (with Summarized Comparative Information for the Year Ended June 30, 2015)

		2016		2015*
Comment and navious	<u>Unrestricted</u>	Temporarily Restricted	<u>Total</u>	<u>Total</u>
Support and revenue Contributions	e o (os soo	# 12 DE0 040	Φ1 <i>E</i> 004 300	e 0.466.074
=···	\$ 2,625,532	\$ 13,258,848	\$15,884,380	\$ 9,466,974
Fundraising	892,347	-	892,347	805,014
Licensing fees and other	61,210	(1.4.0.40.054)	61,210	65,129
Net assets released from restrictions	14,848,054	(14,848,054)		
Total support and revenue	18,427,143	(1,589,206)	<u>16,837,937</u>	_10,337,117
Expenses				
Program services	17,194,043		17,194,043	10,512,587
Supporting services				
Administrative and general	311,018	-	311,018	292,696
Fundraising	915,867		915,867	866,143
Total supporting services	1,226,885	_	1,226,885	1,158,839
Uncollectible accounts	41,500	_	41,500	84,466
Total expenses	18,462,428		18,462,428	11,755,892
(Decrease) in net assets				
before other deductions	(35,285)	(1,589,206)	(1,624,491)	(1,418,775)
Other deductions			٠	
Net (loss) on investments	(10,154)	-	(10,154)	(3,531)
Foreign exchange (loss)	(20,899)		(20,899)	
(Decrease) in net assets	(66,338)	(1,589,206)	(1,655,544)	(1,422,306)
Net assets (deficit), beginning of year	(323,811)	3,007,410	2,683,599	4,105,905
Net assets (deficit), end of year	<u>\$ (390,149)</u>	<u>\$ 1,418,204</u>	<u>\$ 1,028,055</u>	<u>\$ 2,683,599</u>

See notes to financial statements.

^{*} Restated

Statement of Functional Expenses
For Year Ended June 30, 2016
(with Summarized Comparative Information
for the Year Ended June 30, 2015)

			2016		2015
		Supportin Administrative	Supporting Services nistrative		
	Program Services	and General	Fund- Raising	Total	Total
Payroll cost	\$ 2502237	\$ 198.073	73 \$ 739.717	4 7 030 537	\$ 2 400 408
Professional fees	379,319		→	579,888	
Sponsor initiative	11,547,070	,		11,547,070	5.418,111
Auditing and accounting	23,542	1,485	5 1,773	26,800	25,383
Insurance	20,695	848		22,556	29,156
Fundraising expense	256,871		311,479	568,350	314,732
Educational/Outreach	383,118	587		534,251	628,197
WKA Support	1,278,128			1,278,128	1,227,673
Litigation/regulation	215,774	·		215,774	332,818
Travel	178,867	5,167	77 16,375	200,409	252,632
Telephone	. 25,795	3,300		33,017	40,694
Postage	5,583	623	1,789	7,995	9,102
Office expense	71,716	10,603	•	90,539	86,255
Staff development	1,954	194		2,315	5,151
Other	6,845	650	. 0	7,495	15,505
Credit card and banking fees	22,225	11,663		39,206	34,479
Occupancy	274,304	22,327	.7 22,327	318,958	121,355
Depreciation	- Inches of the state of the st	8,650		8,650	10 942

See notes to financial statements.

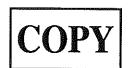
Total

\$ 18,420,928

\$ 915,867

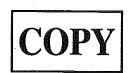
311,018

\$17,194,043



Statement of Cash Flows

	Year Ended June 30	
-	2016	2015
Cash flows from operating activities		
(Decrease) in net assets	\$ (1,655,544)	\$ (1,422,306)
Adjustments to reconcile (decrease) in net assets		
to net cash (used in) operating activities		
Depreciation	8,650	10,942
Donated stock	(14,736)	-
Proceeds from donated stock	15,012	-
Realized loss on sales of investments	10,154	-
Unrealized loss on investment	-	3,531
(Increase) decrease in assets	·	
Contributions and grants receivable	6,086	90,268
Accounts receivable	(4,071)	39,312
Prepaid expenses	(12,022)	(32,683)
Security deposit	(202,718)	-
Increase (decrease) in liabilities		
Accounts payable	128,167	121,410
Accrued expenses	63,296	207,980
Accrued vacation	(5,032)	22,624
Deferred revenue	20,000	-
Deferred rent	<u>197,503</u>	
Net cash (used in) operating activities	(1,445,255)	(958,922)
Cash flows from investing activities		• .
Purchases of investments	·-	(350,000)
Proceeds from sales of investments	336,039	-
Purchase of equipment	(51,505)	(3,689)
Net cash provided by (used in)		
investing activities	<u>284,534</u>	(353,689)
Net (decrease) in cash	(1,160,721)	(1,312,611)
Cash, beginning of year	<u>2,149,407</u>	3,462,018
Cash, end of year	\$ 988,686	<u>\$ 2,149,407</u>



Notes to Financial Statements June 30, 2016

Note 1 - Nature of organization

The Waterkeeper Alliance, Inc. (the "Alliance") was organized to serve as the umbrella group for the Riverkeeper, Soundkeeper, Baykeeper, and other Waterkeeper programs located throughout North America and in other countries, all of which have their own 501(c)(3) status or the equivalent. The Alliance approves new Waterkeeper programs, licenses the use of the Waterkeeper marks, represents the individual Waterkeeper programs nationally and internationally on issues of common interest, and serves as a meeting place for all Waterkeeper programs.

Note 2 - Summary of significant accounting policies

Adjustment and restatement

During 2016, the Alliance became aware that certain revenue had been erroneously released from temporarily restricted net assets during the 2015 fiscal year. Accordingly, as of June 30, 2015, the Alliance adjusted and restated its unrestricted and temporarily restricted net asset balances by \$195,000 to give retroactive effect to this change.

Financial reporting

The Alliance maintains two classes of net assets as follows:

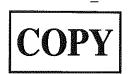
Unrestricted

Unrestricted net assets are used to account for the general activities of the Alliance.

• <u>Temporarily restricted</u>

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.

Net assets that are released from donor restrictions, by incurring expenses that satisfied the restricted purposes or by occurrence of other events specified by donors, during the 2016 fiscal year, totaled \$14,848,054 and were used for the general programs of the Alliance as described in note 1 to the financial statements.



Notes to Financial Statements (continued) June 30, 2016

Note 2 - Summary of significant accounting policies (continued)

• <u>Temporarily restricted</u> (continued)

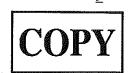
At June 30, 2016, temporarily restricted net assets were restricted for the following:

			Net Assets	
	Balance		Released	Balance
·	June 30,		from	June 30,
	2015	Additions	Restrictions	2016
Purpose				
Annual conference	\$ -	\$ 65,000	\$ (65,000)	\$ -
Baja Regional Coordination	21,000		(21,000)	-
Cape Fear campaign	50,000	-	(50,000)	-
China Regional Coordination	-	150,000	(150,000)	
Clean and safe energy - coal	591,000	205,200	(560,309)	235,891
Clean and safe energy – oil	89,000	-	(89,000)	-
Himalayas – Pollution and			, , ,	
Climate Change	257,000	529,626	(353,846)	432,780
International start-up	5,550	80,152	(52,830)	32,872
Pure Farms Pure Water			, , ,	•
Campaign	1,400,000	257,015	(1,465,054)	191,961
Savannah River	180,000	· -	(45,000)	135,000
Splash event series	50,000	180,000	(197,894)	32,106
Sponsor initiative*	120,982	11,590,429	(11,668,052)	43,359
Rapid response	20,000	35	(35)	20,000
Remote sensing	27,000	_	(12,000)	15,000
Revolving litigation fund	80,999			80,999
Waterkeeper support	52,440	101,391	(100,595)	53,236
Other	2,439		(2,439)	. ´-
Timing	60,000	100,000	(15,000)	145,000
Total	\$ 3,007,410	\$13,258,848	\$14,848,054	\$ 1,418,204

^{*} Sponsor initiative consists of money given by donors to be used for newly formed or being formed Waterkeepers. However, the Alliance retained the unilateral power to redirect use of the funds to another beneficiary capable of fulfilling the project, if deemed necessary.

Cash equivalents

The Alliance considers highly liquid assets with original maturities of 90 days or less to be cash equivalents. At June 30, 2016 the Alliance did not have any cash equivalents.



Notes to Financial Statements (continued) June 30, 2016

Note 2 – Summary of significant accounting policies (continued)

<u>Investments</u>

Investments are carried in the financial statements at fair value, which is based on publicly quoted prices. Realized gains and losses on investments and the change in the unrealized value of the investments are reflected in the statement of activities.

Fair value measurements

Fair value measurements establish a hierarchy that prioritizes the inputs used to measure fair value into three broad levels. The Alliance's investments are measured using Level 1 inputs, which are defined as quoted prices in active markets for identical assets that the reporting entity has the ability to access at the measurement date.

Functional expenses

The costs of providing the various programs and other activities have been summarized on a functional basis. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

Equipment

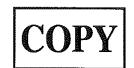
Equipment, above a nominal value, is recorded at cost. Depreciation of equipment is provided on a straight-line basis over its estimated useful life of five years.

Allowance for doubtful accounts

The Alliance has not provided for an allowance for doubtful accounts. This estimate is based on management's experience, the aging of the receivables, subsequent receipts and current economic conditions.

Use of estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the amounts reported in the financial statements. Actual results could differ from these estimates.



Notes to Financial Statements (continued) June 30, 2016

Note 2 - Summary of significant accounting policies (continued)

Concentrations of credit risk

The Alliance's financial instruments that are potentially exposed to concentrations of credit risk consist primarily of cash and receivables. The Alliance places its cash with what it believes to be quality financial institutions and the Alliance has not incurred any losses on such accounts to date. Receivables are deemed collectible by the Alliance. The Alliance believes no significant concentrations of credit risk exist with respect to its cash and receivables.

Comparative financial information

The financial statements include certain prior-year summarized financial information in total but not by net asset or functional classification. Such information does not include sufficient detail to constitute a presentation in conformity with accounting principles generally accepted in the United States of America. Accordingly, such information should be read in conjunction with the Alliance's financial statements for the year ended June 30, 2015, from which the summarized information was derived.

Subsequent events

The Alliance has evaluated events and transactions for potential recognition or disclosure through December 13, 2016, which is the date the financial statements were available to be issued.

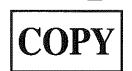
Note 3 - Investments, at fair value

The Alliance's investments at June 30, 2016 and June 30, 2015 consisted of the following:

•	2016			2015				
			F	air				Fair
	<u>C</u>	ost	V	alue		Cost		Value
Fixed income mutual fund	\$	<u></u>	\$		\$	350,000	\$	346,469

Note 4 - Donated volunteer time

A number of volunteers donate their time and services to the Alliance's program services and fund-raising campaign; however, no amounts are reflected in the financial statements for this donated volunteer time.



Notes to Financial Statements (continued) June 30, 2016

Note 5 – Allocation of joint costs

During the 2016 fiscal year, the Alliance incurred joint costs of \$597,996 for informational materials and activities that included fund-raising appeals; such costs were allocated as follows:

Programs		\$	229,327
Fundraising		_	229,327
	Total	\$	458,654

Note 6 - Lease agreement

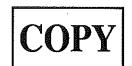
During July 2015, the Alliance entered into a ten-year lease agreement for office space, at a new location, which commenced February 2016 and requires an annual base rental fee of \$470,781 for the first five years of the agreement increasing to \$516,936 for the reminder of the agreement. In connection with this agreement, the Alliance received a five month rent abatement. As required under current accounting principles, the rent expense for the period ending June 30, 2016 has been recognized on a straight-line basis over the life of the lease. This amount, totaling \$197,503, has been reflected on the statement of activities and corresponding deferred rent on the statement of financial position. As security for the lease, the Alliance obtained an irrevocable standby letter of credit from a bank in the amount of \$235,891. The Alliance granted the bank a security interest in a \$235,891 certificate of deposit as collateral.

The following is the required annual payments under the lease agreement (exclusive of certain increases in operating costs of the landlord):

Fiscal year	Amount
2017	\$ 470,781
2018	470,781
2019	470,781
2020	470,781
2021	470,781
2022 and thereafter	2,113,899
Total	<u>\$ 4,467,804</u>

In December 2015, the Alliance's five year rent agreement, requiring a \$116,727 rental in the final year, expired and its \$33,173 security deposit returned.

Rent expense, which is included in occupancy on the statement of functional expenses, under these agreements totaled \$280,139 and \$105,959 for the years ended June 30, 2016 and 2015, respectively.



Notes to Financial Statements (continued) June 30, 2016

Note 7 - Tax status

The Alliance is exempt from federal income taxes under Section 501(c)(3) of the internal Revenue Code (the "Code"). In addition, the Alliance has been determined by the Internal Revenue Service to be a publicly supported organization, and not a private foundation, within the meaning of Section 509(a)(1) of the Code.