Department of the Treasury Internal Revenue Service

## **Return of Organization Exempt From Income Tax**

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

▶ Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047

Open to Public Inspection

<u>A</u>	ror the	and endir	ig o	JN 30, 2019					
В	Check if applicable	C Name of organization		D Employer ide	entifi	cation number			
	Addres								
	Name change	Doing business as		1	3-40	)71318			
	Initial return Final	Number and street (or P.O. box if mail is not delivered to street address)  Room 180 MAIDEN LANE 603	n/suite	E Telephone number 212-747-0622					
	return/ termin- ated					16,550,615.			
	ated Amend	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		G Gross receipts \$					
	return Applic	NEW YORK, NY 10038		H(a) Is this a gro	-				
	tion pendin	F Name and address of principal officer: MARC 1AGG1		for subordir					
_		SAME AS C ABOVE		<b>H(b)</b> Are all subordin					
		empt status: $\boxed{X}$ 501(c)(3) 501(c) ( ) $\blacktriangleleft$ (insert no.) 4947(a)(1) or	527	If "No," atta	ich a	list. (see instructions)			
		e: WWW.WATERKEEPER.ORG		H(c) Group exen		n number 🕨			
	Form of <b>art I</b>	organization:   X Corporation Trust Association Other   Summary	_ Year (	of formation: 1999	N	1 State of legal domicile: NY			
	_	Briefly describe the organization's mission or most significant activities: STRENGTHEN	g & G	ROWS A GLOBAL					
e c	'	NETWORK OF GRASSROOTS LEADERS PROTECTING THE RIGHT TO CLEAN WATE		nome il chobine					
nan	2	Check this box if the organization discontinued its operations or disposed of	more	than 25% of its ne	at ass	eets			
/er	3	Number of voting members of the governing body (Part VI, line 1a)			3	13			
Ó	4	Number of independent voting members of the governing body (Part VI, line 1b)			4	12			
∞					5	0			
es	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)			6	15			
Activities & Governance	6	Total number of volunteers (estimate if necessary)			-	0.			
Ac	/ a	Total unrelated business revenue from Part VIII, column (C), line 12			7a	0.			
_	b	Net unrelated business taxable income from Form 990-T, line 38	·····		7b	-			
Revenue				Prior Year	1 2	Current Year			
	8	Contributions and grants (Part VIII, line 1h)		17,601,4		15,467,851.			
	9	Program service revenue (Part VIII, line 2g)			0.	0.			
že	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)			84.	6,641.			
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		92,9		114,874.			
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		17,695,0		15,589,366.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	.	9,969,3		12,237,460.			
		Benefits paid to or for members (Part IX, column (A), line 4)			0.	0.			
S	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		683,0		719,724.			
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		133,2	67.	119,800			
ž	b	Total fundraising expenses (Part IX, column (D), line 25)   802,206.							
Ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		4,387,0		4,290,776.			
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		15,172,7	95.	17,367,760.			
	19	Revenue less expenses. Subtract line 18 from line 12		2,522,2	22.	-1,778,394.			
Net Assets or	9		Be	ginning of Current Y	'ear	End of Year			
sets	20	Total assets (Part X, line 16)		6,902,6	_	3,117,011.			
L As	21	Total liabilities (Part X, line 26)		2,489,8	44.	476,658.			
<u>_</u>	22	Net assets or fund balances. Subtract line 21 from line 20		4,412,7	76.	2,640,353.			
P	art II	Signature Block							
Und	ler pena	lties of perjury, I declare that I have examined this return, including accompanying schedules and s	stateme	nts, and to the best	of my	knowledge and belief, it is			
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which pr	eparer	has any knowledge.					
Sig	n	Signature of officer		Date					
He	re								
		Type or print name and title							
		Print/Type preparer's name Preparer's signature		Date Che	ck	PTIN			
Pai	d	JAMES J. REILLY Cames C. Reilly		7/2/2020 self	-employ	ed P00183769			
Pre	parer	Firm's name CONDON O'MEARA MCGINTY & DOMNELLY LLP		Firm's Elf		13-3628255			
	Only	Firm's address NONE BATTERY PARK PLAZA							
	-	NEW YORK, NY 10004		Phone no	.212	-661-7777			
Ma	v the IF	RS discuss this return with the preparer shown above? (see instructions)		,		X Yes No			

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Ра	Check if Schedule O contains a response or note to any line in this Part III	Х
1	Briefly describe the organization's mission: SEE SCHEDULE O	
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total erevenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 12,821,427. including grants of \$ 11,800,594. ) (Revenue \$ WATERKEEPER ORGANIZING (SEE SCHEDULE O):	)
4b	(Code:) (Expenses \$ 226,119. including grants of \$ 11,633. ) (Revenue \$ \$ GLOBAL CONFERENCE AND REGIONAL SUMMITS (SEE SCHEDULE 0):	)
	CECETIE COM EMERCE IND MEDICAME DOINTED (DEE COMEDOE C).	
	202 995	
4c	(Code:) (Expenses \$292,886. including grants of \$) (Revenue \$)  CLEAN & SAFE ENERGY (SEE SCHEDULE O):	)
4d	Other program services (Describe in Schedule O.)  (Expenses \$ 2,819,017. including grants of \$ 425,233.) (Revenue \$	)
4e	Total program service expenses ► 16,159,449.	Form <b>990</b> (2018)
		rom 330 (2018)

## 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	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	┝╌		
3		5		x
6	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	<del>"</del>		<del></del>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			x
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
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," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a 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	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	
h	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
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
ч	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	٠٠		
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		x
_			Х	
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Λ	-
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			x
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		77	
	Schedule D, Parts XI and XII	12a	Х	_
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			l
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
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 assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
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
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
	5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 - 5 -			1

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Form 990 (2018) WATERKEEPER ALLIANCE, INC.

Part IV Checklist of Required Schedules (continued)

	(continued)		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		100	110
	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	Х	
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		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	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		Х
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			۱.,
	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,"			x
07	complete Schedule L, Part II	26		
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			
		27		x
28	of any of these persons? If "Yes," complete Schedule L, Part III  Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		х
	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		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		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		х
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		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			x
20	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Α
38		38	х	
Pa		30		
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			

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Form **990** (2018)

(gambling) winnings to prize winners?

	continued)			1	_				
•	Established the control of control of the control o	1		Yes	No				
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	<b>2a</b> 0							
	If at least one is reported on line 2a, did the organization file all required federal employment tax return	24	2b						
D	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions		<u> </u>						
За	Did the constitution have smallest the size of 04 000 constant the const		За		х				
	If "Yes," has it filed a Form 990-T for this year? <i>If</i> "No" to line 3b, provide an explanation in Schedule C		3b						
	At any time during the calendar year, did the organization have an interest in, or a signature or other a								
	financial account in a foreign country (such as a bank account, securities account, or other financial ac	*	4a		х				
b	If "Yes," enter the name of the foreign country: ▶								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	counts (FBAR).							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?	5b		Х				
	, , , , , , , , , , , , , , , , , , , ,								
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organization solicit							
	any contributions that were not tax deductible as charitable contributions?		6a		Х				
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or gifts							
_	were not tax deductible?		6b						
	Organizations that may receive deductible contributions under section 170(c).			Х					
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and serv		7a	X					
	If "Yes," did the organization notify the donor of the value of the goods or services provided?  Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa	e roquirod	7b						
C	to file Form 8282?		7с		x				
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	70						
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		7e		х				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		х				
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?								
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ion 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						
	Section 501(c)(7) organizations. Enter:	1							
	Initiation fees and capital contributions included on Part VIII, line 12	10a							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b							
	Section 501(c)(12) organizations. Enter:	440							
a h	Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources against	11a							
D	amounts due or received from them.)	11b							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	•	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b							
	Section 501(c)(29) qualified nonprofit health insurance issuers.	•							
	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	13b							
С	Enter the amount of reserves on hand	13c							
			14a		Х				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule		14b						
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner								
	excess parachute payment(s) during the year?		15		Х				
	If "Yes," see instructions and file Form 4720, Schedule N.	:	40		х				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		_				
	If "Yes," complete Form 4720, Schedule O.		F	990	(0040)				

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a13			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 12			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Х	
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
-	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b		х
_	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	100		
_	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶SEE SCHEDULE 0			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s	onlv) :	availah	ole
	for public inspection. Indicate how you made these available. Check all that apply.	Jy) (	- randk	
	X Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	al	
19	statements available to the public during the tax year.	manc	u	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
20	RACHEL COOK - 212-747-0622			
	180 MAIDEN LANE, NO. 603, NEW YORK, NY 10038			

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

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

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

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

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

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

Clist any   Nours for related organizations   Nours for related organiza	(A) Name and Title	(B) Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D)  Reportable compensation from	(E) Reportable compensation from related	<b>(F)</b> Estimated amount of other			
RESIDENT   X		(list any hours for related organizations below	Individual trustee or director	In stit utional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizations	compensation from the organization and related
CALIFIC   CALLARY   CALL	• • • • • • • • • • • • • • • • • • • •	40.00	.,		.,				200 000		26 120
CHAIR		3 00	^		Λ				200,000.	0.	26,139.
Case		3,00	×		x					0	0
TREASURER		3 00	<u> </u>						ů.		
(4) WENDY ABRAMS			x		х				0.	0.	0.
Color		3.00									
DIRECTOR	DIRECTOR		X						0.	0.	0.
Columb	(5) CASI CALLAWAY	3.00									
DIRECTOR	DIRECTOR		X				1		0.	0.	0.
Color	(6) GARY WOCKNER	3.00									
DIRECTOR	DIRECTOR		X						0.	0.	0.
S	(7) GREY HECHT	3.00									
DIRECTOR	DIRECTOR		Х						0.	0.	0.
O	(8) MARK MATTSON	3.00	]								
DIRECTOR			Х						0.	0.	0.
Color		3.00	1								
DIRECTOR			Х						0.	0.	0.
Column		3.00	1								
DIRECTOR		ļ	Х						0.	0.	0.
Column		3.00	4							_	_
DIRECTOR         X         0.         0.         0.           (13) CHERYL NENN         3.00         X         0.         0.         0.           DIRECTOR         X         0.         0.         0.         0.           (14) MARY BETH POSTMAN         40.00         X         198,170.         0.         12,422.           (15) MARC YAGGI         50.00         X         228,197.         0.         36,823.           (16) KELLY FOSTER         40.00         X         124,322.         0.         34,947.           (17) PETER NICHOLS         40.00         X         124,322.         0.         34,947.		2 00	Х						0.	0.	0.
Color		3.00	<b>∤</b>								
DIRECTOR         X         0.         0.         0.           (14) MARY BETH POSTMAN         40.00         X         198,170.         0.         12,422.           SECRETARY         X         198,170.         0.         12,422.           (15) MARC YAGGI         X         228,197.         0.         36,823.           (16) KELLY FOSTER         40.00         X         124,322.         0.         34,947.           (17) PETER NICHOLS         40.00         X         124,322.         0.         34,947.		3 00	X						0.	0.	0.
(14) MARY BETH POSTMAN     40.00       SECRETARY     X       (15) MARC YAGGI     50.00       EXECUTIVE DIRECTOR     X       (16) KELLY FOSTER     40.00       SENIOR ATTORNEY     X       (17) PETER NICHOLS     40.00         X     198,170.       0.     36,823.       124,322.     0.       34,947.		3.00	₩.								_
SECRETARY         X         198,170.         0.         12,422.           (15) MARC YAGGI         50.00         228,197.         0.         36,823.           EXECUTIVE DIRECTOR         X         228,197.         0.         36,823.           (16) KELLY FOSTER         40.00         X         124,322.         0.         34,947.           (17) PETER NICHOLS         40.00         X         124,322.         0.         34,947.		40.00	^						0.	0.	0.
(15) MARC YAGGI     50.00       EXECUTIVE DIRECTOR     X       (16) KELLY FOSTER     40.00       SENIOR ATTORNEY     X       (17) PETER NICHOLS     40.00         X     124,322.       0.     34,947.		40.00	1		x				198 170	0	12 422
X   228,197.   0. 36,823.   (16) KELLY FOSTER   40.00   X   124,322.   0. 34,947.   (17) PETER NICHOLS   40.00		50 00							130,170.		12,122.
(16) KELLY FOSTER 40.00 X 124,322. 0. 34,947. (17) PETER NICHOLS 40.00		33,50	1		x				228 197.	0.	36 823.
SENIOR ATTORNEY         X         124,322.         0.         34,947.           (17) PETER NICHOLS         40.00		40.00								1	
(17) PETER NICHOLS 40.00			1				x		124,322.	0.	34,947.
NATIONAL DIRECTOR X 121 399 0 25 990	(17) PETER NICHOLS	40.00	1						, , , , , , , , , , , , , , , , , , ,		,
	NATIONAL DIRECTOR		1				x		121,399.	0.	25,990.

832007 12-31-18

Form 990 (2018) WATERKEEPER A	ALLIANCE, I	NC.							13-407	7131	8	Р	age 8
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hiç	ghes	t C	ompensated Employee	s (continued)				
<b>(A)</b> Name and title	(B) Average hours per week (list any hours for related organizations below	rage rs per eek t any urs for ated izations reper ated izations reper epower is per ated izations reper epower is per epower in the per epower is per epower is per epower in the per epower in			an tee)	(D)  Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensatior from related organizations (W-2/1099-MISO		cor or ar	(F) Estimate mount other npensa from th ganizat nd relat	of ation ie tion ted		
	line)	Indi	Insti	Officer	Key	High	Former						
(18) SHARON KHAN RECRUITING DIRECTOR	40.00					x		107 625		0.		22	E 2 C
(19) DANIEL ESTRIN	40.00					^		107,625.		٠.		23,	526.
LEGAL DIRECTOR		-				x		180,336.		0.		34,	947.
(20) RACHEL COOK	40.00							,					
OPERATIONS DIRECTOR						х		129,296.		0.		18,	414.
		•											
		•											
1b Sub-total								1,289,345.		0.		213	208.
c Total from continuation sheets to Part VI								0.		0.			0.
d Total (add lines 1b and 1c)							<u> </u>	1,289,345.		0.		213,	208.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$100,	000 of reportable				
compensation from the organization					4							1	8
O Did the conservation list one form of the	.C						1			١		Yes	No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for si				-		-		*			3		х
4 For any individual listed on line 1a, is the su											3		
and related organizations greater than \$150											4	х	
5 Did any person listed on line 1a receive or a													
rendered to the organization? If "Yes," com	plete Schedule	e J f	or su	ıch r	oers	on .					5		Х
Section B. Independent Contractors							_						
1 Complete this table for your five highest countries the organization. Report compensation for the organization.										ensat	tion fi	rom	
(A)	ne calendar ye	eare	ridir	ig w	itri C	or wi	unin	(B)	ear.			C)	
Name and business	address	NO	NE					Description of s	ervices	С		ensatio	n
									+				
							T						
							_						
2 Total number of independent contractors (in	ncludina but n	ot lin	niter	to t	thos	e lis	ted	above) who received mo	ore than				
\$100,000 of compensation from the organiz	•				(								
											Form	990 (	(2018)

Form 990 (2018) WATERKEEPER
Part VIII Statement of Revenue

		Check if Schedule O contains a	response	or note to any line	e in this Part VIII			
			·		<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
SΩ	1 a	Federated campaigns	1a					OIL OIL
ant	b . u	Membership dues	1 1					
يَ ۾	c	Fundraising events	··	25,000.				
ifts	d	Related organizations	—	,				
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and						
outi her	•	similar amounts not included above	1 1	15,442,851.				
ġ ţ	a	Noncash contributions included in lines 1a-1f: \$		85,528.				
Son	h	Total. Add lines 1a-1f			15,467,851.			
				Business Code				
ø	2 a	r <u></u>						
, vic	b							
Ser	С							
am	d							
Program Service Revenue	е							
	f	All other program service revenue						
		Total. Add lines 2a-2f						
	3	Investment income (including divide	ends, intere	est, and				
		other similar amounts)			12,023.			12,023.
	4	Income from investment of tax-exer	npt bond p	oroceeds <b>&gt;</b>				
	5	Royalties		<b></b>				
			(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less: rental expenses						
		Rental income or (loss)						
	d	Net rental income or (loss)		<b>_</b>				
	7 a		Securities	(ii) Other				
		assets other than inventory	757,407.					
	b	Less: cost or other basis						
			762,789.					
		Gain or (loss)						
		Net gain or (loss)			-5,382.			-5,382.
nue	8 a	Gross income from fundraising ever including \$ 25,000						
Other Reven		contributions reported on line 1c).						
r.		Part IV, line 18	а	256,032.				
ţ	b	Less: direct expenses		198,460.				
0	С	Net income or (loss) from fundraising	g events	<u></u>	57,572.			57,572.
	9 a	Gross income from gaming activities	s. See					
		Part IV, line 19	a					
	b	Less: direct expenses	b					
	С	Net income or (loss) from gaming a	ctivities .	·····				
	10 a	Gross sales of inventory, less return	ns					
		and allowances	a					
	b	Less: cost of goods sold	b					
	С	Net income or (loss) from sales of in	ventory .	<b>&gt;</b>				
]		Miscellaneous Revenue		Business Code				
	11 a	LICENSING FEES & OTHER REV	ENUE	900099	57,302.	57,302.		
	b							-
	С							-
		All other revenue			F# 000			
		Total. Add lines 11a-11d			57,302.		-	61.010
	12	Total revenue. See instructions		<b>&gt;</b>	15,589,366.	57,302.	0.	64,213.

832009 12-31-18

### 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 responsible Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1 Grants and other assistance to domestic organizations	692,351.	692,351.		
and domestic governments. See Part IV, line 21  2 Grants and other assistance to domestic individuals. See Part IV, line 22	372,331.	0,2,331.		
3 Grants and other assistance to foreign				
organizations, foreign governments, and foreign				
individuals. See Part IV, lines 15 and 16	11,545,109.	11,545,109.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors,		500.046	TO 505	<b>73.00</b>
trustees, and key employees	719,724.	572,216.	73,587.	73,921
6 Compensation not included above, to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)				
7 Other salaries and wages				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	12,165.	3,711.	6,573.	1,881
d Lobbying	4,491.	4,491.		
e Professional fundraising services. See Part IV, line 17	119,800.			119,800
f Investment management fees	1,953.		1,953.	
g Other. (If line 11g amount exceeds 10% of line 25,				
column (A) amount, list line 11g expenses on Sch 0.)	461,145.	283,411.	11,249.	166,485
2 Advertising and promotion				
3 Office expenses	103,117.	82,195.	12,711.	8,211
4 Information technology				
15 Royalties				
16 Occupancy	429,201.	362,651.	19,120.	47,430
7 Travel	132,059.	98,794.	18,139.	15,126
Payments of travel or entertainment expenses				
for any federal, state, or local public officials $\dots$				
9 Conferences, conventions, and meetings				
20 Interest				
Payments to affiliates	2,769.		2,769.	
Depreciation, depletion, and amortization	36,286.	29,913.	3,269.	3,104
Insurance Other expenses. Itemize expenses not covered	30,200.	25,513.	3,203.	3,10
above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a PAYROLL COST (SCH. O)	2,458,119.	1,954,325.	251,326.	252,468
b EDUCATIONAL / OUTREACH	493,921.	384,795.	1,857.	107,269
c WKA SUPPORT	91,835.	85,885.	950.	5,000
d LITIGATION / REGULATION	44,791.	44,791.		
e All other expenses	18,924.	14,811.	2,602.	1,511
5 Total functional expenses. Add lines 1 through 24e	17,367,760.	16,159,449.	406,105.	802,206
Joint costs. Complete this line only if the organization				
reported in column (B) joint costs from a combined				
educational campaign and fundraising solicitation.				
Check here X if following SOP 98-2 (ASC 958-720)				Form <b>990</b> (201

## Form 990 (2018) Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing	5,577,870.	1	2,097,086.
	2	Savings and temporary cash investments		2	324,635.
	3	Pledges and grants receivable, net		3	239,507.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined un	der		
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contribu	ting		
		employers and sponsoring organizations of section 501(c)(9) voluntary			
Ω		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
Ÿ	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	50 750	9	28,608.
	10a	Land, buildings, and equipment: cost or other			
			692.		
	b	Less: accumulated depreciation 10b 355,	103. 32,358.	10c	92,589.
	11	Investments - publicly traded securities		11	99,246.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	235,340.	15	235,340.
	16	Total assets. Add lines 1 through 15 (must equal line 34)		16	3,117,011.
	17	Accounts payable and accrued expenses	2,331,841.	17	338,405.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21			21	
es	22	Loans and other payables to current and former officers, directors, trustees			
Ě		key employees, highest compensated employees, and disqualified persons			
Liabilities		Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X o	150 002		138,253.
		Schedule D	158,003. 2,489,844.	25	476,658.
	26	Total liabilities. Add lines 17 through 25  Organizations that follow SFAS 117 (ASC 958), check here ▶ X a		26	470,030.
			and		
Ses	07	complete lines 27 through 29, and lines 33 and 34.	-252,809.	27	1,524.
<u>a</u> u	27 28	Unrestricted net assets Temporarily restricted net assets		28	2,538,829.
Ba	29		100 000	29	100,000.
<u>n</u>	29	Organizations that do not follow SFAS 117 (ASC 958), check here		29	100,000.
Ę		and complete lines 30 through 34.			
S O	30	Capital stock or trust principal, or current funds		30	
Net Assets or Fund Balances	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Detained comings and our party account lated in some another founds		32	
Red	33	Total net assets or fund balances	4,412,776.	33	2,640,353.
	34	Total liabilities and net assets/fund balances		34	3,117,011.
	, <del>, , ,</del>	Total habilities and not assets/fund balances		, J-T	990 (0010)

Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	Total revenue (must equal Part VIII, column (A), line 12)	1		15,58	366	δ.	
2	Total expenses (must equal Part IX, column (A), line 25)	2		17,36	7,760	٥.	
3	Revenue less expenses. Subtract line 2 from line 1	3		-1,778,39			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		4,41	2,776	б.	
5	5 Net unrealized gains (losses) on investments 5						
6							
7	Investment expenses 7						
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O)	9			(	0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,						
	column (B))	10		2,64	353	3.	
Pa	rt XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII						
	· · · · · · · · · · · · · · · · · · ·			Ye	s N	0	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2	ea	Х		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a					
	separate basis, consolidated basis, or both:						
	Separate basis Consolidated basis Both consolidated and separate basis						
b	Were the organization's financial statements audited by an independent accountant?		2	zb X			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,					
	consolidated basis, or both:						
	X Separate basis Consolidated basis Both consolidated and separate basis						
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,					
	review, or compilation of its financial statements and selection of an independent accountant?		2	c X			
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Aud	lit				
	Act and OMB Circular A-133?						
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red aud	it 🗍				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3	b			

#### **SCHEDULE A**

Department of the Treasury Internal Revenue Service

(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.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization

WATERKEEPER ALLIANCE INC

Employer identification number

13-4071318

		WIII BIKI	CDDI DIC IIDDIIINCD					10 1071010
Pa	ırt I	Reason for Public	Charity Status	All organizations must co	omplete th	is part.) Se	e instructions.	
The	organi	zation is not a private found	dation because it is: (	For lines 1 through 12, c	heck only	one box.)		
1		A church, convention of ch	urches, or association	on of churches described	l in <b>sectio</b>	n 170(b)(1	I)(A)(i).	
2		A school described in sect	tion 170(b)(1)(A)(ii).	(Attach Schedule E (Forn	n 990 or 99	90-EZ).)		
3		A hospital or a cooperative	hospital service org	anization described in se	ection 170	(b)(1)(A)(ii	i).	
4		A medical research organiz	ation operated in co	njunction with a hospital	described	in <b>sectio</b>	n 170(b)(1)(A)(iii). Enter	the hospital's name,
		city, and state:						
5		An organization operated f	or the benefit of a co	llege or university owned	or operate	ed by a go	vernmental unit describe	ed in
		section 170(b)(1)(A)(iv). (	Complete Part II.)					
6		A federal, state, or local go		mental unit described in	section 17	70(b)(1)(A)	(v).	
	Х	An organization that norma	J				` '	oublic described in
		section 170(b)(1)(A)(vi). (C	•	a. part or no capport n	o a go		anni or morn and goriorar j	
8		A community trust describe	•	(1)(A)(vi) (Complete Par	+ II )			
9		An agricultural research org				ed in coni	inction with a land-grant	college
•		or university or a non-land-	-				-	•
		university:	grant college or agric	diture (see instructions).	Litter the i	riairie, city	, and state of the college	; OI
10		An organization that norma	ally roccives: (1) more	than 33 1/30/ of its supp	port from c	contributio	ne momborship foos an	d gross receipts from
10		activities related to its exer	•					-
		income and unrelated busi						· ·
		See section 509(a)(2). (Co		(less section 511 tax) it	ill busines	sses acqui	red by the organization a	inter June 30, 1973.
44		An organization organized		ively to toot for public so	foty Soo	coation E(	)((a)(4)	
11		-	•					numacos of one or
12		An organization organized	•				,	
		more publicly supported or						neck the box in
		lines 12a through 12d that						
а		Type I. A supporting org				_		
		the supported organization			majority o	of the direc	tors or trustees of the su	ipporting
		organization. You must						
b	)	Type II. A supporting org	·				• • • • • • • • • • • • • • • • • • • •	•
		control or management of			ame perso	ns that co	ntrol or manage the supp	ported
		organization(s). You mus						
C	;	Type III functionally inte	-				• •	ed with,
		its supported organization	n(s) (see instructions	s). You must complete I	Part IV, Se	ections A,	D, and E.	
d	I	Type III non-functionally	y integrated. A supp	porting organization oper	ated in cor	nnection w	rith its supported organiz	zation(s)
		that is not functionally in	tegrated. The organi	zation generally must sat	isfy a distr	ibution rec	quirement and an attentiv	/eness
		requirement (see instruct	ions). <b>You must co</b>	mplete Part IV, Sections	A and D,	and Part	V.	
е	)	Check this box if the org	anization received a	written determination fro	m the IRS	that it is a	Type I, Type II, Type III	
		functionally integrated, o	r Type III non-functio	nally integrated supporti	ng organiz	ation.		
f	Ente	r the number of supported	organizations					
g		ide the following informatio			I (iv) le the ergs	nization listed		
	(i	) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	anization listed ing document?	(v) Amount of monetary	(vi) Amount of other
		organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)
			•	1			i	

## Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support		p art ii	/			
	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Gifts, grants, contributions, and	(4) 2014	(2) 2010	(5) 2010	(4) 2011	(5) 2010	(1) 10141
•	membership fees received. (Do not						
	include any "unusual grants.")	10,128,759.	16,545,879.	20,337,032.	17,601,413.	15,467,851.	80,080,934.
2	Tax revenues levied for the organ-		, ,	, ,	, ,	, ,	
_	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	<b>Total.</b> Add lines 1 through 3	10,128,759.	16,545,879.	20,337,032.	17,601,413.	15,467,851.	80,080,934.
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)						42,852,608.
6	Public support. Subtract line 5 from line 4.						37,228,326.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	10,128,759.	16,545,879.	20,337,032.	17,601,413.	15,467,851.	80,080,934.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	9,680.	6,230.	111.	684.	12,023.	28,728.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	55,449.	54,980.	44,515.	51,306.	57,302.	263,552.
11	<b>Total support.</b> Add lines 7 through 10						80,373,214.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First five years. If the Form 990 is fo	r the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	501(c)(3)	
	organization, check this box and sto						
Sec	ction C. Computation of Publi	ic Support Per	centage				
14	Public support percentage for 2018 (					14	46.32 %
15	Public support percentage from 2017	' Schedule A, Part	II, line 14			15	46.40 %
16a	33 1/3% support test - 2018. If the	organization did no	t check the box or	line 13, and line 1	4 is 33 1/3% or m	ore, check this box	
	stop here. The organization qualifies		~				
b	33 1/3% support test - 2017. If the						
	and stop here. The organization qual	lifies as a publicly s	supported organiza	ition			
17a	10% -facts-and-circumstances test	t - 2018. If the org	anization did not c	heck a box on line	13, 16a, or 16b, a	nd line 14 is 10% o	or more,
	and if the organization meets the "fac				· ·	~	
	meets the "facts-and-circumstances"	test. The organizat	ion qualifies as a p	oublicly supported	organization		
b	10% -facts-and-circumstances test	t - 2017. If the org	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is 1	0% or
	more, and if the organization meets the	he "facts-and-circur	mstances" test, ch	eck this box and	<b>stop here.</b> Explain	in Part VI how the	
	organization meets the "facts-and-circ	cumstances" test.	The organization q	ualifies as a public	ly supported orgar	nization	<b>&gt;</b>
12	Private foundation If the organization	on did not check a	hay on line 13 16s	16h 17a or 17h	check this how ar	nd eas instructions	_

Schedule A (Form 990 or 990-EZ) 2018

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(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 per- formed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
_	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
_	the organization without charge						
	<b>Total.</b> Add lines 1 through 5						-
7 <i>a</i>	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
C	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support	Т			1	1	_
	ndar year (or fiscal year beginning in)	(a) 2014	<b>(b)</b> 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6						-
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
c	Add lines 10a and 10b						
	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.)						
	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	x year as a sectio	n 501(c)(3) organiz	ation,
	check this box and stop here						
Sec	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2018 (I	ine 8, column (f), d	livided by line 13, o	column (f))		15	%
	Public support percentage from 2017					16	%
	ction D. Computation of Inves						
	Investment income percentage for 20					17	%
	Investment income percentage from					18	%
19a	33 1/3% support tests - 2018. If the	organization did n	ot check the box	on line 14, and line	15 is more than 3	33 1/3%, and line 1	7 is not
	more than 33 1/3%, check this box ar						
b	33 1/3% support tests - 2017. If the						
	line 18 is not more than 33 1/3%, che						▶∐
20	Drivate foundation If the organization	on did not chack a	hay on line 14 10	or 10h chock th	ic hav and can inc	etructions	<b>▶</b>

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## Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes." answer (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")? |f "Yes," and if you checked 12a or 12b 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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
_		
За		
3b		
- CE		
3с		
4a		
4b		
12		
4c		
70		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9с		
10a		
10b		

Has the organization accepted a gift or contribution from any of the following persons?  a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?  b A family member of a person described in (gia bove? # Yes.* (a. b. or c. provide detail in Part VI.  1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly apport or eiter at least a majority of the organization as directors or trustees at all times during the tax yea? If * No.* describe in Part VI how the supported organizations have the power to connolled the organizations are organizations and what contributes. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or instead when a contributed the supported organization of the than the supported organization and what contributes. If the organization had more than one supported organization in the province of the benefit carried out the purposes of the supported organization of the than the supported organization power to appoint and/or remove directors or instead when contributed the supporting organization of the than the supported organization of the supported organization or trustees during the last view of the organization provide to each of its supported organizations, by the last day of the first morth of the organization pr	Pa	T IV   Supporting Organizations <sub>(continued)</sub>			
a A person who directly or indirectly controls, either alone or together with persons described in (p) and (c) below, the governing body of a supported organization?  b A shift member of a person described in (a) above?  c A 35% centrolled within of a genes on described in (a) to (b) above?  1 Did the directors, frustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organizations directors or trustees at all times during the tax year?  1 Did the directors, frustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization directors or trustees at all times during the tax year.  1 Did the directors, frustees, or membership of one or more supported organizations have the powers to appoint and or remove directors or trustees, as upervised, or controlled the organization's activities. If the organization directs are the 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 Did the organization operated, supervised, or controlled the supported organization? If "Yes," explain in Part VI how the powers to appoint acride remove the purposes of the supported organization? If "Yes," explain in Part VI how control or amaginement of the supporting Organizations  Section C. Type II Supporting Organizations  1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization was vested in the same persons that controlled or manager than the supported organization or supported organization was proported organization or supported organization was vested in the same persons that controlled or manager than the organization or supported organization was responsible to the continuous				Yes	No
below, the governing body of a supported organization?  b. A family member of a person described in (a) acrol paleval.  c. 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.  Section B. Type I Supporting Organizations  1 Did the directors, flustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization or flustees at all times during the tax year? If YNo, 'describe in Part VI how the supported organizations or flustees were allocated among the supported organization, describe how the powers to appoint and or remove directors or flustees were allocated among the supported organization, describe how the powers to appoint and or remove directors or flustees were allocated among the supported organization, describe how the powers to appoint and or remove directors or flustees were allocated among the supported organization operated for the benefit carried out the purposes of the supported organizations of the tax year also a majority of the directors or restricts and the supported organizations of the organization of the supported organizations of the organization or the supported organization or supported organizations or the supported organization or supported organizations or supported organizations or supported organizations	11	Has the organization accepted a gift or contribution from any of the following persons?			
b A family member of a presen described in (a) above? If "Yes" to a, b, or.c., provide detail in Part VI.  Section B. Type I Supporting Organizations  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 direction or trustees at all times during the tax year" If "No," describe in Part VI how the supported organization's direction or trustees at all times during the tax year" If "No," describe in Part VI how the supported organization's direction or trustees at all times during the tax year" If "No," describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organization of part VI pow provinging such benefit carried out the purposes of the supported organization of the trust the supported organization of the trust the supported organization of the trust the supported organization of the supported organization organization or the supported organization	а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
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1 Did the cirectors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If *No,* describe in *Part VI now the supported organization's directors or trustees at all times during the tax year? If *No,* describe in *Part VI now the supported organization of the organization of the organization of the them that the supported organization of the supported among the supported organization of the them the supported organization of the organization of the organization of supported organization of the	Sec	tion B. Type I Supporting Organizations			
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tax year? (if 'No.' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization describe how the powers to appoint and/or emore directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.  2 Did the organization operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI, how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.  Section C. Type II Supporting Organizations  1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting Organizations was vested in the same persons that controlled or managed the supporting Organization was vested in the same persons that controlled or managed the supporting Organization was vested in the same persons that controlled or managed the supporting Organization was vested in the same persons that controlled or managed the supporting Organization was vested in the same persons that controlled or managed the supporting Organization was vested in the same persons that controlled or managed the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (ii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?  2 Were any of the organization or effects, directors, or trustees either (ii) appointed or ejected by the supported organization's expert of caph or the editor of the date of notification, to	1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
tax year? (if 'No.' describe in Part VI how the supported organization's effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization describe how the powers to appoint and/or enrow directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.  2 Did the organization operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI, now providing such herefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organizations.  Section C. Type II Supporting Organizations  1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting Organizations was vested in the same persons that controlled or managed the supporting Organization was vested in the same persons that controlled or managed the supporting Organization was vested in the same persons that controlled or managed the supporting Organization was vested in the same persons that controlled or managed the supporting Organization was vested in the same persons that controlled or managed the supporting Organization's tax year. (i) a written notice describing the type and amount of support provided during the pror tax year. (ii) a copy of the Form 990 that was most recently filed a soft the date of notification, and (ii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?  2 Were any of the organization or effects, directors, or trustees letter (ii) appointed or ejected by the supported organization's and a significant voice in the relationship of one the organization iness that the organization is investment policies and in directing		regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
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trustees of each of the supported organizations? <i>Provide details in</i> <b>Part VI. b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each					
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			3a		
	b				
	_	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

# Schedule A (Form 990 or 990-EZ) 2018 WATERKEEPER ALLIANCE, INC. Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

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

other Type III non-functionally integrated supporting organizations must cor	<u>nplete Se</u>	ctions A through E.	1
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
<b>3</b> Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in <b>Part VI</b> ):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functionally	/ integrate	ed Type III supporting orga	anization (see

Schedule A (Form 990 or 990-EZ) 2018

instructions).

Par	t V   Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued)	
Section	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
2	Amounts paid to perform activity that directly furthers exem	pt purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	es of supported organizations	}	
4	Amounts paid to acquire exempt-use assets			
	Qualified set-aside amounts (prior IRS approval required)			
	Other distributions (describe in <b>Part VI</b> ). See instructions.			
	<b>Total annual distributions.</b> Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which t	the organization is responsive		
-	(provide details in <b>Part VI</b> ). See instructions.	c. ga <b>_</b> a		
9	Distributable amount for 2018 from Section C, line 6			
	Line 8 amount divided by line 9 amount			
10	Line o amount divided by line 3 amount	(i)	(ii)	(iii)
Section	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2018	Distributable Amount for 2018
_1_	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
С	From 2015			
	From 2016			
	From 2017			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Carryover from 2013 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
	Distributions for 2018 from Section D,			
7	line 7:			
	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount  Remainder. Subtract lines 4a and 4b from 4.			
	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in <b>Part VI.</b> See instructions.			
	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
	Breakdown of line 7:			
	Excess from 2014			
	Excess from 2015			
c	Excess from 2016			
<u>d</u>	Excess from 2017			
е	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:
OTHER REVENUE
2014 AMOUNT: \$ 55,449.
2015 AMOUNT: \$ 54,980.
2016 AMOUNT: \$ 44,515.
2017 AMOUNT: \$ 51,306.
2018 AMOUNT: \$ 57,302.

#### **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

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

2018
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

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

If the organization answered "Yes," 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.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

Tax	) (see separate instructions), then				
•	Section 501(c)(4), (5), or (6) organizat	tions: Complete Part III.			
Nan	ne of organization			Emp	loyer identification number
		R ALLIANCE, INC.			13-4071318
Pa	art I-A Complete if the org	anization is exempt und	er section 501(c)	or is a section 527 or	ganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures		<b>&gt;</b> \$	S
Pa	art I-B Complete if the org	janization is exempt und	er section 501(c)(	3).	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	▶ 9	S
	Enter the amount of any excise tax				
3	If the organization incurred a sectio	n 4955 tax, did it file Form 4720	for this year?		Yes No
4a	Was a correction made?				Yes No
	If "Yes," describe in Part IV.				
Pa	art I-C Complete if the org	anization is exempt und	er section 501(c),	except section 501(c	e)(3).
	Enter the amount directly expended Enter the amount of the filing organ exempt function activities	ization's funds contributed to ot	her organizations for se	ection 527	
3	Total exempt function expenditures				
	line 17b			,	<b>S</b>
4	Did the filing organization file Form				Yes No
	Enter the names, addresses and en				
	made payments. For each organizar contributions received that were propolitical action committee (PAC). If	omptly and directly delivered to	a separate political orga	anization, such as a separat	
	<b>(a)</b> 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

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

832041 11-08-18

reporting section 4911 tax for this year?

No

## Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ▶ if the filing organization checked box A and "limited control" provisions apply.

	Limits on Lobb (The term "expenditures" m	(a) Filing organization's totals	<b>(b)</b> Affiliated group totals	
1a	Total lobbying expenditures to influence publ	4,491.		
b	Total lobbying expenditures to influence a leg	islative body (direct lobbying)	0.	
С	Total lobbying expenditures (add lines 1a and	1b)	4,491.	
d	Other exempt purpose expenditures		16,154,958.	
е		s 1c and 1d)	16,159,449.	
f	Lobbying nontaxable amount. Enter the amount	unt from the following table in both columns.	957,972.	
	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	g Grassroots nontaxable amount (enter 25% of line 1f)			
h	Subtract line 1g from line 1a. If zero or less, e	0.		
i	Subtract line 1f from line 1c. If zero or less, er	nter -0-	0.	
j	If there is an amount other than zero on eithe	r line 1h or line 1i, did the organization file Form 4720		

### 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) 2015	<b>(b)</b> 2016	(c) 2017	( <b>d)</b> 2018	(e) Total		
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	840,793.	957,972.	3,798,765.		
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					5,698,148.		
<b>c</b> Total lobbying expenditures	6,711.	27,966.	6,409.	4,491.	45,577.		
d Grassroots nontaxable amount	250,000.	250,000.	210,198.	239,493.	949,691.		
e Grassroots ceiling amount (150% of line 2d, column (e))					1,424,537.		
f Grassroots lobbying expenditures	6,529.	19,346.	6,332.	4,491.	36,698.		

Schedule C (Form 990 or 990-EZ) 2018

# Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

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:  a Volunteers?  b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?  d Mailings to members, legislators, or the public?  Publications, or published or 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 1i  2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  bif "Yes," enter the amount of any tax incurred under section 4912  c if "Yes," enter the amount of any tax incurred under section 4912  c if "Yes," enter the amount of any tax incurred under section 4912  d if the filing organization incurred a section 4912 tax, did if file Form 4720 for this year?  Were substantially all (80% or more) dues received nondeductible by members?  1 Were substantially all (80% or more) dues received nondeductible by members?  2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  3 Did the organization agree to carry over lobbying and political expenditures from the prior year?  1 Dues, assessments and similar amounts from members  501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, in answered "Yes."  1 Dues, assessments and similar amounts from members  2 Section 152(e) nondeductible lobbying and political expenditures (do not include amounts of political expense or which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due	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: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or 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 1 c through 1 i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  2art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, i answered "Yes."  1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year  2 Did the organization agree to carry over lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year  2 Describ 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 5 Total 3 Aggregate amount reported in section 6033(e)(f)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2 exceeds the amount on line 3, what portion of the	ach "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description			(k	b)
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b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements?  d Mailings to members, legislators, or the public?  e Publications, or published or 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 1 c through 1i  2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?  bit "Yes," enter the amount of any tax incurred under section 4912  cil f "Yes," enter the amount of any tax incurred under section 4912  cil ft "Yes," enter the amount of any tax incurred by organization managers under section 4912  cil ft the filing organization incurred a section 4912 tax, did it file Form 4720 for this yea?  Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).  Yes N  Were substantially all (90% or more) dues received nondeductible by members?  1 Were substantially all (90% or more) dues received nondeductible by members?  2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?  2 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?  3 art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."  1 Dues, assessments and similar amounts from members  2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total  3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  4 If not	b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?  c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or 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 1 c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?  1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 2 Did the organization make only in-house lobbying appointance of \$2,000 or less? 3 Did the organization angere to carry over lobbying and political campaign activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political expensions of political expenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?  5 Total 5 Expenditure next year? 5 Expenditur	a Volunteers?				
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	structions); and Part II-B, line 1. Also, complete this part for any additional information.	Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from the last III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).  Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeded the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pexpenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)	e prior year? n 501(c)(5) "No," OR (	2 3 3 4 4		≥ 3, is
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### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

**Employer identification number** 

_	WATERKEEPER ALLIANCE, INC.		13-4071318
Pai	t I Organizations Maintaining Donor Advised	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v		ed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor or		
	impermissible private benefit?	, , , , ,	
Pai			
1	Purpose(s) of conservation easements held by the organization		
•	Preservation of land for public use (e.g., recreation or e	`	orically important land area
	Protection of natural habitat	· —	tified historic structure
	Preservation of open space	Treservation of a serv	amod historio structuro
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribution in the form	of a conservation easement on the last
_	day of the tax year.	ica conscivation contribution in the form	Held at the End of the Tax Year
_			
b			
C	Number of conservation easements on a certified historic stru		
a	Number of conservation easements included in (c) acquired a		
•	listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	organization during the tax
_	year -		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, I	handling of violations, and enforcing cons	servation easements during the year
	<u> </u>		
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enforcing conserva-	tion easements during the year
	<b>&gt;</b> \$		
8	Does each conservation easement reported on line 2(d) above	•	
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat	ion's financial statements that describes t	the organization's accounting for
	conservation easements.		
Pai	t III Organizations Maintaining Collections of	· ·	ner Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue statem	nent and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	ibition, education, or research in furthera	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	oes these items.	
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ec	lucation, or research in furtherance of pub	olic service, provide the following amounts
	relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
			<b>.</b> .
2	If the organization received or held works of art, historical trea		
	the following amounts required to be reported under SFAS 11		
а	Revenue included on Form 990, Part VIII, line 1	· · · · · · · · · · · · · · · · · · ·	<b>&gt;</b> \$
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2018

Par	rt III   Organizations Maintaining C	Collections of Art	, Historical Tre	asures, or O	ther S	Similar Asset	s (conti	nued)		
3	Using the organization's acquisition, access	ion, and other records	s, check any of the f	ollowing that are	a sign	nificant use of its	collection	ı items	;	
	(check all that apply):									
а	Public exhibition	d	Loan or excl	hange programs	;					
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's c	ollections and explain	how they further th	e organization's	exemp	ot purpose in Par	XIII.			
5	During the year, did the organization solicit	or receive donations o	of art, historical treas	sures, or other si	milar a	ssets _			_	
	to be sold to raise funds rather than to be m						Yes		No	
Par	rt IV Escrow and Custodial Arran		ete if the organization	n answered "Yes	s" on F	orm 990, Part IV	line 9, or	r		
	reported an amount on Form 990, Pa	art X, line 21.								
1a	Is the organization an agent, trustee, custod		•			_	_	_	_	
	on Form 990, Part X?					L	Yes		No	
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	owing table:							
							Amour	nt		
	0 0					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance						_			
	Did the organization include an amount on F				•	/?     L	Yes		No	
	If "Yes," explain the arrangement in Part XIII									
Pai	rt V Endowment Funds. Complete						T <u>-</u>			
		(a) Current year	(b) Prior year			d) Three years back				
	0 0 ,	4,665,585.	1,679,583.	1,418,2		3,007,410	+	,056,		
b										
С	Net investment earnings, gains, and losses									
d										
е	Other expenditures for facilities	14 724 266	12 002 020	16 611 2	, E	14 040 054		620	020	
_	and programs	14,724,366.	12,082,039.	16,611,2	05.	14,848,054	, ,	,630,	030.	
	Administrative expenses	2,638,829.	4,665,585.	1,679,5	03	1,418,214	3	,007,	410	
g	End of year balance				03.	1,410,214	<u> </u>	,007,	410.	
2	Provide the estimated percentage of the cur Board designated or quasi-endowment	rent year end balance		) neid as:						
a		%	_%							
b		96.20 %								
С	The percentages on lines 2a, 2b, and 2c sho									
32	Are there endowment funds not in the posse	•	tion that are held an	nd administered t	for the	organization				
oa	by:	2331011 Of the organiza	tion that are ned an	ia administerea	ioi tiic	organization		Yes	No	
	(i) unrelated organizations						3a(i)	103	X	
	feet								X	
b	If "Yes" on line 3a(ii), are the related organization								_	
4	Describe in Part XIII the intended uses of the									
	rt VI Land, Buildings, and Equipn		William Tarias.							
	Complete if the organization answere	ed "Yes" on Form 990	, Part IV, line 11a. S	ee Form 990, Pa	art X, lir	ne 10.				
	Description of property	(a) Cost or o				cumulated	(d) Boo	ok valu	<u>—</u>	
		basis (investm				reciation	, 200			
	Land									
b										
d				447,692.		355,103.		92,	589.	
	Other									
	II. Add lines 1a through 1e. (Column (d) must o		X. column (B). line 10	Oc.)				92,	589.	
-		<u> </u>				Schodul	ь D /Гаж	000)	2010	

Schedule D (Form 990) 2018

	in i cinii coc, i ait iv, iii c	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	
1) Financial derivatives			
2) Closely-held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" o	on Form 900 Part IV line	11c Soc Form 900 Part V line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost	
(1)	(, 200aido	(-,	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" o		11d. See Form 990, Part X, line 15	
(a) [	on Form 990, Part IV, line Description	11d. See Form 990, Part X, line 15	(b) Book value
(a) [		11d. See Form 990, Part X, line 15	(b) Book value
(a) [		11d. See Form 990, Part X, line 15	(b) Book value
(a) [		11d. See Form 990, Part X, line 15	(b) Book value
(a) [ (1) SECURITY DEPOSIT (2)		11d. See Form 990, Part X, line 15	(b) Book value
(a) [ (1) SECURITY DEPOSIT (2) (3)		11d. See Form 990, Part X, line 15	(b) Book value
(a) [ (1) SECURITY DEPOSIT (2) (3) (4)		11d. See Form 990, Part X, line 15	(b) Book value
(a) [ (1) SECURITY DEPOSIT (2) (3) (4) (5)		11d. See Form 990, Part X, line 15	(b) Book value
(a) [ (1) SECURITY DEPOSIT (2) (3) (4) (5)		11d. See Form 990, Part X, line 15	(b) Book value
(a) [ (1) SECURITY DEPOSIT (2) (3) (4) (5) (6) (7)		11d. See Form 990, Part X, line 15	(b) Book value
(a) [ (1) SECURITY DEPOSIT (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990. Part X. col. (B) line	Description	11d. See Form 990, Part X, line 15	(b) Book value 235,340
(a) [ (1) SECURITY DEPOSIT (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Colymn (b) must equal Form 990, Part X, col. (B) line	Description	11d. See Form 990, Part X, line 15	(b) Book value 235,340
(a) [ (1) SECURITY DEPOSIT (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990. Part X. col. (B) line	Description  15.)		(b) Book value 235,340
(a) [ (1) SECURITY DEPOSIT (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line  Part X Other Liabilities.  Complete if the organization answered "Yes" of the part of the billion.	Description  15.)		(b) Book value 235,340
(a) [ (1) SECURITY DEPOSIT (2) (3) (4) (5) (6) (7) (8) (9) (otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" of the complete if the organization of liability	Description  15.)	11e or 11f. See Form 990, Part X,	(b) Book value 235,340
(a) [ (1) SECURITY DEPOSIT  (2) (3) (4) (5) (6) (7) (8) (9) (otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" of the complete if the organization of liability  (1) Federal income taxes	Description  15.)	11e or 11f. See Form 990, Part X,	(b) Book value 235,340
(a) [ (1) SECURITY DEPOSIT  (2) (3) (4) (5) (6) (7) (8) (9)  otal. (Column (b) must equal Form 990, Part X, col. (B) line  Part X Other Liabilities.  Complete if the organization answered "Yes" of the complete if the organization of liability  (1) Federal income taxes (2) DEFERRED RENT	Description  15.)	11e or 11f. See Form 990, Part X, (b) Book value	(b) Book value 235,340
(a) E  (1) SECURITY DEPOSIT  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Otal. (Column (b) must equal Form 990, Part X. col. (B) line  Part X Other Liabilities.  Complete if the organization answered "Yes" of the complete if the organization of liability  (1) Federal income taxes  (2) DEFERRED RENT  (3)	Description  15.)	11e or 11f. See Form 990, Part X, (b) Book value	(b) Book value 235,340
(a) [ (1) SECURITY DEPOSIT  (2) (3) (4) (5) (6) (7) (8) (9) (otal. (Column (b) must equal Form 990, Part X, col. (B) line  Part X Other Liabilities.  Complete if the organization answered "Yes" of the complete if the organization of liability  (1) Federal income taxes (2) DEFERRED RENT (3) (4)	Description  15.)	11e or 11f. See Form 990, Part X, (b) Book value	(b) Book value 235,340
(a) E  (1) SECURITY DEPOSIT  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (otal. (Column (b) must equal Form 990, Part X, col. (B) line  Part X Other Liabilities.  Complete if the organization answered "Yes" of the complete if the organization of liability  (1) Federal income taxes  (2) DEFERRED RENT  (3)  (4)  (5)	Description  15.)	11e or 11f. See Form 990, Part X, (b) Book value	(b) Book value 235,340
(a) [ (1) SECURITY DEPOSIT (2) (3) (4) (5) (6) (7) (8) (9) (otal. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" of the complete if the organization of liability (1) Federal income taxes (2) DEFERRED RENT (3) (4) (5) (6)	Description  15.)	11e or 11f. See Form 990, Part X, (b) Book value	(b) Book value 235,340
(a) [ (1) SECURITY DEPOSIT (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" of the complete if the organization of liability (1) Federal income taxes (2) DEFERRED RENT (3) (4) (5) (6) (7)	Description  15.)	11e or 11f. See Form 990, Part X, (b) Book value	(b) Book value 235,340  ▶ 235,340
(a) [ (1) SECURITY DEPOSIT (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" of the complete if the organization of liability (1) Federal income taxes (2) DEFERRED RENT (3) (4) (5) (6) (7) (8)	Description  15.)	11e or 11f. See Form 990, Part X, (b) Book value	(b) Book value 235,340
(a) [ (1) SECURITY DEPOSIT (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.  Complete if the organization answered "Yes" of the complete if the organization of liability (1) Federal income taxes (2) DEFERRED RENT (3) (4) (5) (6) (7)	Description  15.)	11e or 11f. See Form 990, Part X, (b) Book value	(b) Book value 235,340

832053 10-29-18

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2018

13-4071318

Complete if the organization answered "Yes" on Form 990, Part IV, line		evenue per Re	cuill.	
1 Total revenue, gains, and other support per audited financial statements			1	15,791,844.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a Net unrealized gains (losses) on investments	2a	5,971.		
<b>b</b> Donated services and use of facilities				
c Recoveries of prior year grants				
d Other (Describe in Part XIII.)	1	198,460.		
e Add lines 2a through 2d			2e	204,431.
3 Subtract line 2e from line 1			3	15,587,413.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,953.		
<b>b</b> Other (Describe in Part XIII.)				
c Add lines 4a and 4b			4c	1,953.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	15,589,366.
Part XII Reconciliation of Expenses per Audited Financial Stat	ements With E	xpenses per F	Return.	
Complete if the organization answered "Yes" on Form 990, Part IV, line				15 564 965
			1	17,564,267.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 1 4			
a Donated services and use of facilities				
<b>b</b> Prior year adjustments				
c Other losses	2c			
d Other (Describe in Part XIII.)	2d	198,460.		
e Add lines 2a through 2d			2e	198,460.
3 Subtract line 2e from line 1			3	17,365,807.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	1,953.		
<b>b</b> Other (Describe in Part XIII.)	4b			
c Add lines 4a and 4b			4c	1,953.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18, Part XIII Supplemental Information.	<u> </u>		5	17,367,760.
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any			; Part X, l	ne 2; Part XI,
PART XI, LINE 2D - OTHER ADJUSTMENTS:				
DIRECT FUNDRAISING EXPENSE	198 460.			
	,			
PART XII, LINE 2D - OTHER ADJUSTMENTS:				
DIRECT FUNDRAISING EXPENSE	198,460.			
PART V - LINE 4				
TEMPORARILY RESTRICTED				
THE TEMPORARILY RESTRICTED NET ASSETS REPRESENT CONTRIBUTIONS	AND GRANTS			
THAT ARE RESTRICTED BY THE DONOR FOR A SPECIFIC PURPOSE OR PER	TAIN TO			
FUTURE PERIODS (TIMING). ONCE THAT SPECIFIC PURPOSE HAS BEEN	MET OR THE			
MIND DECEMBRATION DUDING MUD DUNING AND DELEGED AND DESCRIPTION				
TIME RESTRICTION EXPIRES, THE FUNDS ARE RELEASED AND REFLECTED	AS NET			

22250630 152490 K4H00Y

# SCHEDULE F (Form 990)

Department of the Treasury

Internal Revenue Service

### Statement of Activities Outside the United States

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

► Attach to Form 990.

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

Inspection

Name of the organization

**Employer identification number** 

WATERKEEPER ALLIANCE, INC. 13-4071318 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, \_\_\_\_X Yes the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the

2 For grantmakers. Desc United States.	cribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and other assistance out	side the
3 Activities per Region. (T	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service,	(f) Total expenditures for and investments in the region
EAST ASIA AND THE PACIFIC	7		GRANTMAKING	GRANTS & SCHOLARSHIP	192,640.
NORTH AMERICA	1	0	GRANTMAKING	GRANTS & SCHOLARSHIP	2,000.
CENTRAL AMERICA/CARIBBEAN	19	0	GRANTMAKING	GRANTS & SCHOLARSHIP	11,316,826.
MIDDLE EAST AND	1	0	GRANTMAKING	GRANTS & SCHOLARSHIP	5,000.
EUROPE	2	0	GRANTMAKING	GRANTS & SCHOLARSHIP	28,643.
3 a Subtotal	30	0			11,545,109.
<b>b</b> Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	30				11,545,109.

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

Schedule F (Form 990) 2018

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

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)		(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENT.	GIID DODU	11 216 026	WIDE			
		AMERICA/CARIBBEAN	SUPPORT	11,316,826.	WIRE	0.		
		EAST ASIA/PACIFIC	SUPPORT	192,640.	WIRE	0.		
		MIDDLE EAST/NORTH						
		AFRICA	SUPPORT	5,000.	WIRE	0.		
		EUROPE	SUPPORT	28,643.	WIRE	0.		
					) 			
		CANADA	SUPPORT	2,000.	WIRE	0.		
2 Enter total number of	recipient organizatio	ns listed above that are r	recognized as charities by the f	oreign country,	recognized as tax-ex	empt		1

2 Enter total number of recipient organizations listed above that are recognized as charities by	, , , ,
by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency	/ letter

	29

3 Enter total number of other organizations or entities

WATERKEEPER ALLIANCE, INC.

Part III Grants and Other Assistance Part III can be duplicated if ad			tes. Complete i	if the organization answered "Yes" or	n Form 990, Part	IV, line 16.	
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
			, (				

Page 4

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

Schedule F (Form 990) 2018

#### **SCHEDULE G**

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

### **Supplemental Information Regarding Fundraising or Gaming Activities**

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

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization						er identification number
	R ALLIANCE, INC.				13-40	
Part I Fundraising Activities required to complete this part	<ul> <li>Complete if the organization answers</li> </ul>	ered "Y	es" or	n Form 990, Part IV, I	ine 17. Form 99	90-EZ filers are not
1 Indicate whether the organization rai		ng activ	ities.	Check all that apply.		
a X Mail solicitations	e X Solicita	tion of	non-g	overnment grants		
<b>b</b> X Internet and email solicitation	s <b>f</b> Solicita	tion of	gover	nment grants		
c Phone solicitations	g X Special	fundra	aising	events		
<b>d</b> X In-person solicitations						
2 a Did the organization have a written	or oral agreement with any individual	(includ	ding of	ficers, directors, trus	tees, or	
key employees listed in Form 990, F	Part VII) or entity in connection with p	rofessi	onal f	undraising services?	X	Yes No
<b>b</b> If "Yes," list the 10 highest paid indi	viduals or entities (fundraisers) pursu	ant to	agree	ments under which th	ne fundraiser is	to be
compensated at least \$5,000 by the	e organization.					
		(iii)	Did raiser		(v) Amount p	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	have c	ustody	(iv) Gross receipts from activity	to (or retained fundraiser	to (or retained by)
or entity (turidraiser)		or cor contrib	ntrol of utions?	ITOTT activity	listed in col.	
ROBBINS KERSTEN DIRECT - 35		Yes	No			
PARKWOOD DRIVE, SUITE 160,	DIRECT MAIL		X	710,329.	64,8	800. 645,529.
CW & CO 49 E 34 TH STREET,						
15A, NEW YORK, NY 10016	PR/ EVENT PRODUCTION		X	262,100.	55,0	000. 207,100.
	+					
				0.50 400	110 (	050 600
				972,429.	119,8	· · · · · · · · · · · · · · · · · · ·
3 List all states in which the organization or licensing.	on is registered or licensed to solicit (	contrib	utions	or has been notified	it is exempt fro	om registration
AL,AK,AR,CA,CO,CT,DC,FL,GA,HI,I	L.KS.KY.LA.ME.MD.MA.MI.MN.N	MS MO	NV N	H,NJ,NM		
NY,NC,ND,OH,OK,OR,PA,RI,SC,TN,T		,		, ,		
	, , , ,					

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

Schedule G (Form 990 or 990-EZ) 2018

P	art i	of fundraising events. Complete if the of fundraising event contributions and groups.	-					
_		or randraising event continuations and gri	(a) Event #1	(b) Event #2	(c) Other events			
			KEEP IT CLEAN -	(b) Event #2	NONE	(d) Total events		
			COMEDY		NONE	(add col. (a) through		
			(event type)	(event type)	(total number)	col. <b>(c)</b> )		
e			(overte type)	(GVGHE LYPO)	(total nambor)			
Revenue	١,	Gross receipts	281,032.			281,032.		
Be	1	Gross receipts	201,002.			201,002.		
	,	Less: Contributions	25,000.			25,000.		
		Less. Contributions	20,000.			20,000.		
	3	Gross income (line 1 minus line 2)	256,032.			256,032.		
	Ŭ	check modifie (mile 1 miliae mile 2)	,			, .		
	4	Cash prizes						
	١.							
	5	Noncash prizes						
S								
Direct Expenses	6	Rent/facility costs						
ă	-							
ct E	7	Food and beverages	30,522.			30,522.		
)ire		<b></b>			\			
_	8	Entertainment						
	9	Other direct expenses	167,938.			167,938.		
	10				<u> </u>	198,460.		
	11	Net income summary. Subtract line 10 from li				57,572.		
Pa	art I	Gaming. Complete if the organization		n 990, Part IV, line 19, or	reported more than			
		\$15,000 on Form 990-EZ, line 6a.						
a)			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add		
nue			(a) birigo	bingo/progressive bingo	(c) Other gaining	col. (a) through col. (c)		
Revenue								
<u> </u>	1	Gross revenue						
S	2	Cash prizes						
Direct Expenses								
xpe	3	Noncash prizes						
世								
je	4	Rent/facility costs						
Ц								
	5	Other direct expenses						
			Yes %	Yes %				
	6	Volunteer labor	No	No	No			
	l _							
	7 Direct expense summary. Add lines 2 through 5 in column (d)							
	8	Net gaming income summary. Subtract line 7	from line 1, column (a)					
0	En	tor the state(s) in which the organization condu	icte gaming activities:					
	Enter the state(s) in which the organization conducts gaming activities:  a Is the organization licensed to conduct gaming activities in each of these states?							
	b If "No," explain:							
10:		ere any of the organization's gaming licenses re	evoked suspended orte	erminated during the tax	vear?	Yes No		
		Yes," explain:			you:	165 NO		
	- "							
0000	00 10	1_03_18			Schodulo C (Ec	rm 990 or 990-F7) 2018		

Sch	nedule G (Form 990 or 990-EZ) 2018 WATERKEEPER ALLIANCE, INC.	13-4071318	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
-	to administer charitable gaming?	Yes	No
40		1es	140
	Indicate the percentage of gaming activity conducted in:	11	
	a The organization's facility		<u>%</u>
	b An outside facility	13b	<u>%</u>
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
ı	b If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amoun	t	
	of gaming revenue retained by the third party  \$\bigs\\$		
	c If "Yes," enter name and address of the third party:		
	the res, entername and address of the time party.		
	Name		
	Address		
46	Coming manager information		
16	Gaming manager information:		
	Name N		
	Name		
	Gaming manager compensation ▶ \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
	a 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	ne	
	organization's own exempt activities during the tax year > \$	10	
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	d Part III lines 0	9h 10h
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	di artin, intes 5,	30, 100,
	130, 13c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
פרז	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:		
301	TEDULE G, FART I, DINE 2B, DIST OF TEN HIGHEST FAID FONDARISERS:		
( T	NAME OF FUNDRAISER: ROBBINS KERSTEN DIRECT		
<u>\</u>	MALL OF TONDATION, RODDING RENGER STREET		
(I	ADDRESS OF FUNDRAISER:		
<u> </u>			
35	PARKWOOD DRIVE, SUITE 160, HOPKINTON, MA 01748		
	·		
_			

Schedule C	G (Form 990 or 990-EZ)	WATERKEEPER ALLIANCE, INC.	13-4071318	Page 4
Part IV	G (Form 990 or 990-EZ)  Supplemental Info	rmation (continued)		

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

► Attach to Form 990.

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

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Schedule I (Form 990) (2018)

Name of the organization  WATERKEEPER AI	LLIANCE INC.						Employer identification number
Part I General Information on Grants a	•						
<ol> <li>Does the organization maintain records t criteria used to award the grants or assis</li> <li>Describe in Part IV the organization's pro</li> </ol>	tance?						
Part II Grants and Other Assistance to I	Domestic Organi	zations and Domesti	Governments. C	Complete if the org	anization answered "\	es" on Form 990, Par	t IV, line 21, for any
recipient that received more than \$	5,000. Part II can	be duplicated if addit	onal space is need	ed.	(0.14.11.1.5	_	
(a) Name and address of organization or government	<b>(b)</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 noncash assistance	(h) Purpose of grant or assistance
SOUND RIVERS							
PO BOX 1854							
WASHINGTON, NC 27889	58-1475258	501(C)(3)	136,045.	0.			GRANT
RIVERKEEPER 20 SECOR ROAD OSSINING, NY 10562	13-3204621	501(C)(3)	96,388.	0.			GRANT
CAPE FEAR RIVER WATCH			30,000				
617 SURREY ST							
WILMINGTON, NC 28401	58-2121884	501(C)(3)	73,991.	0.			GRANT
CATAWBA RIVERKEEPER FOUNDATION INC 421 MINUTE LN. STE. 205	56-2034780	501(0)(3)	24,973.	0.			GRANT
CHARLOTTE, NC 28217	30-2034780	501(0)(3)	24,973.	0.			GRANI
COASTAL CAROLINA RIVERWATCH 1406 NEUSE BLVD.							
NEW BERN, NC 28560	58-2198018	501(C)(3)	12,178.	0.			GRANT
MOUNTAINTRUE 29 N MARKET ST. STE 610							
ASHEVILLE, NC 28801	56-1422691	501(C)(3)	27,877.	0.			GRANT
<ul> <li>Enter total number of section 501(c)(3) ar</li> <li>Enter total number of other organizations</li> </ul>		9	e line 1 table				<b>6</b> .

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

Part II Continuation of Grants and Other	Assistance to Gov	vernments and Organ	izations in the Un	ited States (Scho	edule I (Form 990), Pa	rt II.)	r ago
(a) Name and address of organization or government	<b>(b)</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
BUFFALO NIAGARA RIVERKEEPER							
721 MAIN ST							
BUFFALO, NY 14203	22-2993054	501(C)(3)	12,500.	0.			GRANT
YADKIN RIVERKEEPER							
308 N PATTERSON AVE.							
WINSTON-SALEM, NC 27101	26-1874687	501(C)(3)	35,623.	0.			GRANT & SCHOLARSHIP
LOS ANGELES WATERKEEPER							
120 BROADWAY SUITE 105							
SANTA MONICA, CA 90401	95-4444787	501(C)(3)	13,000.	0.			GRANT
,							
POTOMAC RIVERKEEPER NETWORK							
1615 M STREET							
WASHINGTON, DC 20036	54-1982624	501(C)(3)	5,000.	0.			GRANT & SCHOLARSHIP
WHITE OAK-NEW RIVERKEEPER ALLIANCE PO BOX 358							
JACKSONVILLE, NC 28541	26-3319011	501(C)(3)	34,687.	0.			GRANT
SUNCOAST WATERKEEPER PO BOX 1028							
SARASOTA, FL 34230	30-0753993	501(C)(3)	10,000.	0.			GRANT
HAW RIVER ASSEMBLY PO BOX 187							
BYNUM, NC 27228	58-1510282	501(C)(3)	41,280.	0.			GRANT & SCHOLARSHIP
MIAMI WATERKEEPER 2103 CORAL WAY 2NF FLR							
MIAMI, FL 33145	27-3627697	501(C)(3)	9,619.	0.			GRANT
CHARLESTON WATERKEEPER PO BOX 29							
CHARLESTON, NC 29402	26-4178586	501(C)(3)	5,000.	0.			GRANT

Part II Continuation of Grants and Other	Assistance to Gov	ernments and Organ	izations in the Un	ited States (Scho	edule I (Form 990), Pa	rt II.)	•
(a) Name and address of organization or government	<b>(b)</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
MIDDLE SUSQUEHANNA RIVERKEEPER ASSOCIATION, INC - PO BOX 252 - LEWISBURG, PA 17837	47-5000692	501(C)(3)	5,000.	0.			GRANT
SAN FRANCISCO BAYKEEPER 1736 FRANKLIN ST STE 800 OAKLAND, CA 94612	68-0120240	501(C)(3)	25,000.	0.			GRANT
WINYAH RIVERS FOUNDATION 301 ALLIED DRIVE CONWAY, SC 29526	57-1118288	501(C)(3)	50,757.	0.			GRANT
ORANGE COUNTY COASTKEEPER 3151 AIRWAY AVENUE SUITE F-110 COSTA MESA, CA 92626	33-0847892	501(C)(3)	13,000.	0.			grant
BAYOU CITY WATERKEEPER 2010 NORTH LOOP W STE 103 HOUSTON , TX 77018	26-0187498	501(C)(3)	11,000.	0.			GRANT
EARTHREPORTS 17412 NOTTINGHAM RD UPPER MARLBORO, MD 20772	22-3878950	501(C)(3)	10,692.	0.			GRANT
JAMES RIVER ASSOCIATION 4833 OLD MAIN STREET RICHMOND, VA 23231	51-0211913	501(C)(3)	10,000.	0.			GRANT
COMMUNITY FOUNDATION BOULDER COUNTY - 1123 SPRUCE STREET - BOULDER, CO 80302	84-1171836	501(C)(3)	5,000.	0.			GRANT

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	. Complete if the	organization answe	ered "Yes" on Form 9	90, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information req	uired in Part I, line	e 2; Part III, column	(b); and any other ad	ditional information.	
PART I - LINE 2					
WE MONITOR THE USE OF FUNDS IN THE UNITED STATES BY	Y REQUIRING R	EPORTS			
FROM EACH GRANTEE DETAILING THE ACTIVITIES AND ACCO	OMPLISHMENTS				
GENERATED BY THE FUNDS. IN THE CASE OF CAPITAL EXP	ENDITURES, WE				
ADDITIONALLY REQUIRE DOCUMENTATION OF PURCHASE. PRO	OPOSALS ARE G	IVE TO			
WATERKEEPER ALLIANCE FOR FUNDING. ONCE FUNDING IS A	APPROVED AND	GRANTED			
REPORTS ARE SUBMITTED TO WATERKEEPER ALLIANCE ON HO	OW THE FUNDS	WERE			
USED PROJECT/PROGRAM OURCOMES.					

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

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Inspection

Internal Revenue Service Name of the organization

Department of the Treasury

WATERKEEPER ALLIANCE, INC.

Employer identification number 13-4071318

Pa	art I Questions Regarding Compensation			
			Yes	No
<b>1</b> a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel			
	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 (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	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 on 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			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?			X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?			Х
С	Participate in, or receive payment from, an equity-based compensation arrangement?	. 4c		Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	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 compensation			
	contingent on the revenues of:			
	The organization?			X
b	Any related organization?	5b		Х
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of:			v
	The organization?	6a		X
b	Any related organization?	6b		Х
_	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	-		х
	not described on lines 5 and 6? If "Yes," describe in Part III	. 7		_
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			х
^	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Α
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	.   9	ı	1

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

Schedule J (Form 990) 2018

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred		(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation		compensation	benefits	(6)(1)-(0)	reported as deferred on prior Form 990	
(1) ROBERT F. KENNEDY, JR.	(i)	200,000.	0.	0.		0.	26,139.	226,139.	0.	
	ii)	0.	0.	0.		0.	0.	0.	0.	
(2) MARY BETH POSTMAN	(i)	198,170.	0.	0.		0.	12,422.	210,592.	0.	
	ii)	0.	0.	0.		0.	0.	0.	0.	
(3) MARC YAGGI	(i)	228,197.	0.	0.		0.	36,823.	265,020.	0.	
	ii)	0.	0.	0.		0.	0.	0.	0,	
(4) KELLY FOSTER	(i)	124,322.	0.	0.		0.	34,947.	159,269.	0.	
	ii)	0.	0.	0.		0.	0.	0.	0.	
(5) DANIEL ESTRIN	(i)	180,336.	0.	0.		0.	34,947.	215,283.	0.	
	ii)	0.	0.	0.		0.	0.	0.	0.	
	(i)									
	ii)									
	(i)									
	ii)									
	(i)									
	ii)									
	(i)									
(	ii)									
	(i)									
(	ii)									
	(i)									
(	ii)									
	(i)									
(	ii)									
	(i)									
	ii)									
	(i)									
(	ii)									
	(i)									
	ii)									
	(i)									
	ii)									

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

#### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

WATERKEEPER ALLIANCE, INC.

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

Employer identification number 13-4071318

Par	rt I   Types of Property							
		(a)	(b)	(c)	(d)			
		Check if	Number of contributions or	Noncash contribution amounts reported on	Method of def		•	
		applicable		Form 990, Part VIII, line 1g	Horicasii contribu	lion an	iourits	,
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	5	85,528	, FMV			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other				\			
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory	1						
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (		7					
26	Other (							
27	Other ()							
28	Other ( )							
29	Number of Forms 8283 received by the organ	ization during	the tax year for co	ontributions	•			
	for which the organization completed Form 82	-						
							Yes	No
30a	During the year, did the organization receive to	oy contributio	n any property rep	orted in Part I, lines 1 throu	gh 28, that it			
	must hold for at least three years from the da				-			
	exempt purposes for the entire holding period	10	•			30a		Х
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that re	equires the review of	of any nonstandard contribu	itions?	31		Х
	Does the organization hire or use third parties					-		
	contributions?		_			32a		х
b	If "Yes," describe in Part II.							
33	If the organization didn't report an amount in	column (c) fo	r a type of property	/ for which column (a) is che	ecked.			
	describe in Part II.	(5, 10	-, i= p. sport)		· · · · · · · · · · · · · · · · · · ·			
I HA		the Instruc	tions for Form 990	).	Schedule M	(Form	990)	2018

832142 10-18-18 Schedule M (Form 990) 2018

#### **SCHEDULE O**

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

2018 Open to Public

OMB No. 1545-0047

Open to Public Inspection

Name of the organization **Employer identification number** 13-4071318 WATERKEEPER ALLIANCE, INC. PART III, LINE 1 WATERKEEPER ALLIANCE, INC. IS A GLOBAL ENVIRONMENTAL ORGANIZATION UNITING MORE THAN 300 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 2.8M SQUARE MILES OF WATERSHEDS IN THE AMERICAS, EUROPE, AUSTRALIA, ASIA AND PART SCIENTIST, TEACHER, AND LEGAL ADVOCATE, WATERKEEPERS AFRICA. 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 STREGHTHENS & GROWS A GLOBAL NETWORK OF GRASSROOTS LEADERS PROTECTING THE RIGHT TO CLEAN WATER. FORM 990, PART III, LINE 4A

WATERKEEPER ALLIANCE CONNECTS OVER 300 (AND GROWING) INDIVIDUAL

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

Schedule O (Form 990 or 990-EZ) (2018)

WATERKEEPER ORGANIZING:

Name of the organization  WATERKEEPER ALLIANCE, INC.	Employer identification number 13-4071318
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 CONFERENCES, SUMMITS, REGIONAL MEETINGS AND LISTSERV PROVIDE	
INVALUABLE OPPORTUNITIES FOR WATERKEEPER ORGANIZATIONS TO NETWORK AND	
LEARN FROM EACH OTHER'S 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 ADDS TO THE STRENGTH OF LOCAL ACTION-POLLUTERS KNOW THAT	
THE ENTIRE ALLIANCE STANDS BEHIND EACH OF OUR WATERKEEPERS. ONE 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	tule O (Farma 000 ar 000 FZ) (0040)

Schedule O (Form 990 or 990-EZ) (2018)		Page 2
Name of the organization WATERKEEPER ALLIANCE	E, INC.	Employer identification number 13-4071318
OUR TRADEMARK STANDARDS.		
FORM 990, PART III, LINE 4B		
GLOBAL CONFERENCE AND REGIONAL SUMMITS:		
SINCE ITS INCEPTION, THE WATERKEEPER ALL	IANCE CONFERENCE HAS BEEN THE	
CORNERSTONE OF OUR MOVEMENT. THE CONFERE	NCE EDUCATES, INSPIRES, AND	
ENERGIZES INDIVIDUAL WATERKEEPER ORGANIZ.	ATIONS AND STRENGTHENS THEIR	
FIGHT FOR CLEAN WATER. AS THE WATERKEEPE	R MOVEMENT INCREASES ITS GLOBAL	
PRESENCE, THE CONFERENCE BECOMES INCREAS	INGLY IMPORTANT AS A WAY TO	
KEEP WATERKEEPER ORGANIZATIONS CONNECTED	, TO MAINTAIN THE UNIQUE	
WATERKEEPER IDENTITY, AND TO INCREASE TH	E EFFECTIVENESS OF THE	
INDIVIDUAL ORGANIZATIONS. NEARLY 300 WAT	ERKEEPER, WATER EXPERTS AND	
STAKEHOLDERS CONVENE TO SHARE INFORMATION	N AND INSIGHTS FROM OUR GLOBAL	
NETWORK, LEARN CUTTING EDGE ADVOCACY STR.	ATEGIES, AND BECOME	_
REINVIGORATED TO CONTINUE THEIR WORK PRO	TECTING THEIR WATERSHEDS AND	
LEADING THE FIGHT FOR CLEAN WATER. TO PRO	OMOTE THE SHARING OF	
FORWARD-LOOKING STRATIFIES AND THE DEVEL	OPMENT 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 DISCUSS	IONS, AND TO SHARE THEIR VISION	
FOR A MORE SUSTAINABLE WORLD IN PLENARY	SPEECHES. THE CONFERENCE	
FEATURES MORE THAN 30 PANELS OVER ITS TH	REE DAYS COVERING TOPICS SUCH	
AS ENVIRONMENTAL LAW AND ECONOMICS, MEDI.	A AND COMMUNICATIONS,	
ORGANIZATIONAL DEVELOPMENT, FUNDRAISING	AND WATER QUALITY MONITORING.	

Name of the organization WATERKEEPER ALLIANCE, INC.	Employer identification number 13-4071318
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 COAL.	
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:	
ALL OTHER PROGRAMS:	
THE REMAINDER OF OUR MISSION PROGRAMS INCLUDES PROMOTING THE	
WATERKEEPER 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	

Name of the organization  WATERKEEPER ALLIANCE, INC.	Employer identification number 13-4071318
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.	
EXPENSES \$ 2,819,017. INCLUDING GRANTS OF \$ 425,233. REVENUE \$ 0.	
FORM 990, PART VI, SECTION A, LINE 6:	
THE WATERKEEPER ALLIANCE, INC. WAS INCORPORATED AS A MEMBERSHIP	
ORGANIZATION.	
FORM 990, PART VI, SECTION A, LINE 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 ALLIANCE (A	_
"MEMBER") THE ORGANIZATION'S WATERKEEPER OR A PERSON WHO IS A MEMBER OF THE	_
ORGANIZATION'S GOVERNING BOARD OR OF THE ORGANIZATION'S SENIOR MANAGEMENT.	_
THE DIRECTORS MAY LEVY DUES OR FEES AS A CONDITION FOR MEMBERSHIP AS IT	_
SEES FIT. EACH MEMBER SHALL BE ENTITLED TO ONE VOTE IN ALL MATTERS THAT	
COME BEFORE THE MEMBERS, INCLUDING THE ELECTION OF EACH AT-LARGE COUNCIL	
MEMBER AND THE PRESIDENT. ALL MATTERS, EXCEPT AS OTHERWISE REQUIRED BY	
STATUTE OR BY THESE BY-LAWS, SHALL BE DECIDED BY THE MAJORITY OF THE	

Name of the organization  WATERKEEPER ALLIANCE, INC.	Employer identification number 13-4071318
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.	
FORM 990, PART VI, SECTION A, LINE 7B:	
******* NEED DESCRIPTION ********	
FORM 990, PART VI, SECTION B, LINE 11B:	
THE FORM 990 WILL BE PRESENTED TO THE TREASURER AND AUDIT COMMITTEE FOR	
REVIEW PRIOR TO FILING.	
FORM 990, PART VI, SECTION B, LINE 12C:	
THE POLICY IS REVIEWED AT MEETINGS OF THE EXECUTIVE COMMITTEE FOR ANY NEW	
CONFLICTS AND ANNUAL DISCLOSURE STATEMENTS ARE REQUIRED.	
FORM 990, PART VI, SECTION B, LINE 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.	
FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:	
AL,AK,AZ,AR,CA,CO,CT,DC,FL,GA,HI,IL,KS,KY,LA,ME,MD,MA,MI,MS,NV,NH,NJ,NM,NY	
NC,OH,PA,RI,SC,TN,TX,WA,WI,MN,MO,ND,OK,OR,UT,VA,WV	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS BY-LAWS AND FINANCIAL STATEMENTS AVAILABLE ON	
THEIR WEBSITE. THE CONFLICT OF INTEREST POLICY AND GOVERNING DOCUMENTS ARE	

Name of the organization  WATERKEEPER ALLIANCE, INC.	Employer identification number 13-4071318
NOT MADE AVAILABLE TO THE PUBLIC.	
PART VII, SECTION B LINE 1 & PART IX, LINE 24A	
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.	