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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

B Createry Contributions and grants (Part VIII), ine 1th) B Creater Part VIII, column (A), lines 13, 4, and 7d, lines 11, 7a total revenue- add lines 9 through 11 (notwerless to state), experience or revenue (Part VIII), line 1th) B Contributions and grants (Part VIII), line 1th) B Contributions and grants (Part VIII), line 1th) B Total revenue- add lines 9 through 11 (noust equal Part VIII), column (A), lines 13, 4, and 7d, lines 12, 10 total revenue- add lines 9 through 11 (noust equal Part VIII), line 1th) B Contributions and grants (Part VIII), line 1th) B State is paid to 7 (or revenue- Part VIII), column (A), lines 13, 13, 14, 23, 194, 194, 194, 194, 194, 194, 194, 194	ΑI	or the	2022 calendar year, or tax year beginning $JUL 1$, 2022 and ending	JUN 30, 2023	
WATER ABJUANCE AND A STATE AND	B	Check if applicable		D Employer identif	ication number
State					
Manufact State (of P.U. Doe in float is not deleted to stroot abouts) E1 elegiptione number State Stat		Name	·	13-4071318	
City or town, state or province, country, and ZIP or foreign postal code Comparison Name YORK, NY 10038			Number and street (or P.O. box if mail is not delivered to street address) Room/s	uite E Telephone numb	 er
Second City or town, state or province, country, and ZIP or foreign postal code G. Cooser-septs			,		
Mail String a group return Feature and address of principal officer: MARC YARGI Mail String a group return Feature and address of principal officer: MARC YARGI Mail String a group return Mail String a group		termin-	City or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	9,745,859.
First Part and actions of Property First Part Street Property First Part Street Property First Part Street Property Prope		return	NEW TORK, NI 10036	H(a) Is this a group	return
Tax-exempt Status: X SDI(E)(X) SDI(E)() (insert no.) 4947(a)(1) or S27 Hole State inclusions Hole Group exemption number		tion	F name and address of principal officer: MARC TAGGT	for subordinate	s? Yes X No
J Webste: NWN. MATERISERER. DRR J. Corporation Trust Association Other L Year of formation: 1999 M State of legal domicile: NY Part Summary Part Summary Briefly describe the organization's mission or most significant activities: TO PROTECT OUR RIGHT TO CLEAN			SAME AS C ABOVE	H(b) Are all subordinates	included? Yes No
Name	<u>1</u>	Tax-exe	mpt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527 If "No," attach	a list. See instructions
The property Summary			- -		
1 Briefly describe the organization's mission or most significant activities: TO PROTECT OUR RIGHT TO CLEAN				ear of formation: 1999	M State of legal domicile: NY
WATER IN COMMUNITIES AROUND THE WORLD. 2 Check this box	Pa	_	-		
Total number of individuals employed in calendar year 2022 (Part V, line 2a) S	nce	1		UR RIGHT TO CLEAN	
Total number of individuals employed in calendar year 2022 (Part V, line 2a) S	rna	2	Check this box if the organization discontinued its operations or disposed of m	ore than 25% of its net as	sets.
Total number of individuals employed in calendar year 2022 (Part V, line 2a) S	ove	3	Number of voting members of the governing body (Part VI, line 1a)		
B Net unrelated business taxable income from Form 990-T, Part I, line 11 Prior Year Current Year	Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)		
B Net unrelated business taxable income from Form 990-T, Part I, line 11 Prior Year Current Year	es &				
B Net unrelated business taxable income from Form 990-T, Part I, line 11 Prior Year Current Year	ξį				
B Net unrelated business taxable income from Form 990-T, Part I, line 11 Prior Year Current Year	Acti				
8 Contributions and grants (Part VIII, line 1h) 14,838,980. 8,742,551. 9 Program service revenue (Part VIII, line 2g) 0. 0. 0. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 115,208. 55,954. 11 Other revenue (Part VIII, column (A), lines 3, 64, 8c, 9c, 10c, and 11e) 243,994. 24,036. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), lines 12) 15,198,182. 8,822,541. 13 Grants and similar amounts paid (Part IX, column (A), lines 13) 10,474,961. 1,386,465. 14 Benefits paid to or for members (Part IX, column (A), lines 4) 0. 0. 0. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 3,574,752. 3,318,295. 16 Professional fundraising fees (Part IX, column (A), line 11e) 66,000. 78,000. 17 Other expenses (Part IX, column (A), line 11e) 66,000. 78,000. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1-6,801,593. 6,915,227. 19 Revenue less expenses. Subtract line 18 from line 12 1-1,603,411. 1,907,214. 19 Revenue less expenses. Subtract line 18 from line 12 1-1,603,411. 1,907,214. 19 Part II Signature Block 2,558,272. 4,844,192. 21 Total liabilities (Part X, line 26) 2,262,938. 4,219,959. 22 Vet assets or fund balances. Subtract line 21 from line 20 2,262,938. 4,219,959. 23 Signature Block 2,262,938. 4,219,959. 24 Print/Type preparer's name Preparer's signature Alexandra Lagraruolo 5/14/2024 2,262,938. 20,1775,353 2,277. 4,844,192. 4,844	_	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		
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12 Total revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 15, 198, 1982, 8, 822, 541. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 10, 474, 961, 1, 386, 465. 14 Benefits paid to or for members (Part IX, column (A), lines 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16 Professional fundraising fees (Part IX, column (A), line 1) 17 Other expenses (Part IX, column (D), line 25) 18 Total fundraising expenses (Part IX, column (D), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 23 End of Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Primt Type or print name and title Print Type or print name and title Print Type preparer's name ALEXANDER LAZZARUOLO Firm's address ONE BATTERY PARK PLAZA, 7TH FL. NEW YORK, NY 10004 Phone no. 212-661-7777	ē	8			
12 Total revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 15, 198, 1982, 8, 822, 541. 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 10, 474, 961, 1, 386, 465. 14 Benefits paid to or for members (Part IX, column (A), lines 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16 Professional fundraising fees (Part IX, column (A), line 1) 17 Other expenses (Part IX, column (D), line 25) 18 Total fundraising expenses (Part IX, column (D), line 25) 19 Revenue less expenses. Subtract line 18 from line 12 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 23 End of Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Primt Type or print name and title Print Type or print name and title Print Type preparer's name ALEXANDER LAZZARUOLO Firm's address ONE BATTERY PARK PLAZA, 7TH FL. NEW YORK, NY 10004 Phone no. 212-661-7777	JE JE	9			<u> </u>
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16a Professional fundraising fees (Part IX, column (A), line 11e) 66,000. 78,000. 17 Other expenses (Part IX, column (A), line 11a, 11d, 11f, 24e) 2,685,880. 2,132,567. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 16,801,593. 6,915,327. 19 Revenue less expenses. Subtract line 18 from line 12 -1,603,411. 1,907,214. 19 Revenue less expenses. Subtract line 18 from line 12 -1,603,411. 1,907,214. 19 Revenue less expenses. Subtract line 18 from line 12 -1,603,411. 1,907,214. 19 Revenue less expenses. Subtract line 18 from line 12 -1,603,411. 1,907,214. 19 Revenue less expenses. Subtract line 18 from line 12 -1,603,411. 1,907,214. 19 Revenue less expenses. Subtract line 18 from line 12 -1,603,411. 1,907,214. 19 Revenue less expenses. Subtract line 18 from line 12 -1,603,411. 1,907,214. 19 Revenue less expenses. Subtract line 18 from line 12 -1,603,411. 1,907,214. 19 Revenue less expenses. Subtract line 18 from line 12 -1,603,411. 1,907,214. 19 Revenue less expenses. Subtract line 18 from line 12 -1,603,411. 1,907,214. 19 Revenue less expenses. Subtract line 18 from line 20 -1,603,411. 1,907,214. 19 Revenue less expenses. Subtract line 18 from line 12 -1,603,411. 1,907,214. 19 Revenue less expenses. Subtract line 18 from line 12 -1,603,411. 1,907,214. 19 Revenue less expenses. Subtract line 18 from line 20 -1,603,411. 1,907,214. 19 Revenue less expenses. Subtract line 18 from line 20 -1,603,411. 1,907,214. 20 Total assets (Part X, line 16) -1,907,214. 10 Revenue less expenses. Subtract line 18 from line 12 -1,603,411. 1,907,214. 10 Revenue less expenses. Subtract line 18 from line 20 -1,603,411. -1,907,214. 10 Revenue less expenses. Subtract line 18 from line 20 -1,603,411. -1,907,214. 10 Revenue less expenses. Subtract line 18 from line 12 -1,603,411. -1,907,214. 10 Revenue less expenses. Subtract line 18		45 .			<u> </u>
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19 Revenue less expenses. Subtract line 18 from line 12 -1,603,411. 1,907,214. Beginning of Current Year End of Year 4,821,210. 9,064,151. 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 22 Net assets or fund balances. Subtract line 21 from line 20 2,262,938. 4,219,959. Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Print/Type preparer's name ALEXANDER LAZZARUOLO Alexander Lazgaruelo Firm's name CONDON O'MEARA MCGINTY & DONNELLY LLP Firm's name CONDON O'MEARA MCGINTY & DONNELLY LLP Firm's address ONE BATTERY PARK PLAZA, 7TH FL. NEW YORK, NY 10004 Phone no.212-661-7777					
Beginning of Current Year End of Year		19		-1,603,411.	1,907,214.
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Type or print name and title Print/Type preparer's name Preparer's signature ALEXANDER LAZZARUOLO Preparer Firm's name CONDON O'MEARA MCGINTY & DONNELLY LLP Firm's EIN 13-3628255 Use Only Firm's address ONE BATTERY PARK PLAZA, 7TH FL. NEW YORK, NY 10004 Phone no. 212-661-7777	or	3	·	Beginning of Current Year	End of Year
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Type or print name and title Print/Type preparer's name Preparer's signature ALEXANDER LAZZARUOLO Preparer Firm's name CONDON O'MEARA MCGINTY & DONNELLY LLP Firm's EIN 13-3628255 Use Only Firm's address ONE BATTERY PARK PLAZA, 7TH FL. NEW YORK, NY 10004 Phone no. 212-661-7777	sets	20	Total assets (Part X, line 16)	4,821,210.	9,064,151.
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Sign Here Type or print name and title Print/Type preparer's name ALEXANDER LAZZARUOLO Preparer Firm's name CONDON O'MEARA MCGINTY & DONNELLY LLP Firm's address ONE BATTERY PARK PLAZA, 7TH FL. NEW YORK, NY 10004 Date Firm's signature Alexander Lazzaruolo Firm's signature Firm's signature Alexander Lazzaruolo Firm's ElN 13-3628255 Phone no.212-661-7777					y knowledge and belief, it is
Type or print name and title Print/Type preparer's name ALEXANDER LAZZARUOLO Preparer Firm's name CONDON O'MEARA MCGINTY & DONNELLY LLP Firm's address ONE BATTERY PARK PLAZA, 7TH FL. NEW YORK, NY 10004 Preparer Preparer's signature Alexander Lazgaruolo 5/14/2024 Firm's EIN 13-3628255 Phone no.212-661-7777	true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge.	
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Type or print name and title Print/Type preparer's name Paid Paid ALEXANDER LAZZARUOLO Preparer Firm's name CONDON O'MEARA MCGINTY & DONNELLY LLP Firm's address ONE BATTERY PARK PLAZA, 7TH FL. NEW YORK, NY 10004 Preparer's signature Alexander Lazzaruolo 5/14/2024 Firm's EIN Phone no.212-661-7777			Signature of officer	Date	
Print/Type preparer's name Print/Type preparer's name ALEXANDER LAZZARUOLO Preparer Firm's name CONDON O'MEARA MCGINTY & DONNELLY LLP Firm's address ONE BATTERY PARK PLAZA, 7TH FL. NEW YORK, NY 10004 Preparer's signature Alexander Lazzaruolo 5/14/2024 Firm's EIN Firm's EIN 13-3628255 Phone no.212-661-7777	Her	e	Type or print name and title		
Paid ALEXANDER LAZZARUOLO Alexander Lazzaruolo Firm's name CONDON O'MEARA MCGINTY & DONNELLY LLP Firm's address ONE BATTERY PARK PLAZA, 7TH FL. NEW YORK, NY 10004 FIRMS 3 Might a granuolo Alexander Lazzaruolo 5/14/2024 if self-employed P01775353 Firm's EIN 13-3628255				Date Chook	PTIN
Preparer Use Only Firm's name CONDON O'MEARA MCGINTY & DONNELLY LLP Firm's address ONE BATTERY PARK PLAZA, 7TH FL. NEW YORK, NY 10004 Phone no.212-661-7777	Do:	,		E /4 4/2024 f	
Use Only Firm's address ONE BATTERY PARK PLAZA, 7TH FL. NEW YORK, NY 10004 Phone no.212-661-7777		- I	Eirn's pages CONDON O'MEARA MCGINTY & DONNELLY LLD		,,,,,
NEW YORK, NY 10004 Phone no.212-661-7777		1		FIIII S EIN	
	USE	Jilly		Dhone no 21	2-661-7777
	May	the IE	S discuss this return with the preparer shown above? See instructions	FIIOHE 110.21	X Yes No

	Check if Schedule O contains a response or note to any line in this Part III	
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.	es? Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program service	es?Yes _A_ No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to a	others, the total expenses, and
4-	revenue, if any, for each program service reported.	Revenue \$ 63,788.)
4a	(Code:) (Expenses \$2,677,302. including grants of \$936,792.) (WATERKEEPER ORGANIZING (SEE SCHEDULE O):	Revenue \$)
	WATERREEPER ORGANIZING (SEE SCHEDULE O):	
4b	(Code:) (Expenses \$ 624,507. including grants of \$ 42,731.)	Revenue \$)
	GLOBAL CONFERENCE AND REGIONAL SUMMITS (SEE SCHEDULE O):	
4.	526 616	
4c	(Code:) (Expenses \$526,616. including grants of \$101,414.) (PURE FARMS PURE WATERS CAMPAIGN (SEE SCHEDULE O):	Revenue \$)
	FORE FARMS FORE WAIERS CAMPAIGN (SEE SCHEDOLE O):	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ 1,821,961. including grants of \$ 305,528.) (Revenue \$)
4e	5 (50 206	•
	·	Form 990 (2022)

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? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	<u> </u>		
-	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	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6		"		
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 donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	
b	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			
u	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	Х	
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		_
•	the organization's separate of consolidated infancial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		x
120	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
ıza	, ,	40-	х	
	Schedule D, Parts XI and XII	12a	21	
D	Was the organization included in consolidated, independent audited financial statements for the tax year?	401		_v
40	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		-
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	X	
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		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	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	<u> </u>
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	

232003 12-13-22

Form 990 (2022) WATERKEEPER ALLIANCE, INC.	13-4071318	Page 4
Part IV Checklist of Required Schedules (continued)		i age -

	· [continued]		V	NI.
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	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		
d	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			
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			v
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			Х
00	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Α
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i>			
а		28a		х
h	"Yes," complete Schedule L, Part IV A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If	200		
·	"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
35 a	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			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		_	
Dat	Note: All Form 990 filers are required to complete Schedule O	38	X	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			<u> </u>
			Yes	No
_	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included on line 13. Enter -0, if not applicable	-		
b	Litter the number of Forms w-2d included of line 1a. Litter -o- in not applicable	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	4	Х	
	DISTRIBUTE WORD WILLS TO DITTE WILLIEDS	1c	Λ	

13-4071318

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

				Yes	No		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						
	filed for the calendar year ending with or within the year covered by this return	2a					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		Х		
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b				
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority over, a					
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	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 Advanced in the Financi	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		5b		Х		
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c				
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organization solicit			l		
	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		 				
_	were not tax deductible?		6b				
7	Organizations that may receive deductible contributions under section 170(c).	dana anno del al santino a como	_		х		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser		7a				
b			7b				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		7.		x		
d	to file Form 8282? If "Yes," indicate the number of Forms 8282 filed during the year	7d	7c				
u	If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or	•	7e		х		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		X		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h				
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained						
			8				
9	Sponsoring organizations maintaining donor advised funds.						
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a				
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b				
10	Section 501(c)(7) organizations. Enter:						
а	Initiation fees and capital contributions included on Part VIII, line 12	10a					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b					
11	Section 501(c)(12) organizations. Enter:	l I					
а	Gross income from members or shareholders	11a	4				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against						
	amounts due or received from them.)	11b	-				
	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	-				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		10-				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a				
h	Note: See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the						
b	organization is licensed to issue qualified health plans	13b					
С	Enter the amount of reserves on hand	13c					
	Did the second in the second of the description of the second of the sec		14a		х		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b				
15	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		x		
	If "Yes," see the instructions and file Form 4720, Schedule N.						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		х		
	If "Yes," complete Form 4720, Schedule O.						
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act	tivities					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17				
	If "Yes," complete Form 6069.						

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 on Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			Х
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 13			
	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 on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 13			
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, trustees, or key employees to a management company or other person?	3		x
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	
h	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	- ra		
D	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:	10		
	The governing body?	8a	х	
a	Each committee with authority to act on behalf of the governing body?	8b	X	
ь 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	OD		
9	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	<u> </u>	l	
	This Section B requests information about policies not required by the internal Revenue Code.)		Yes	No
102	Did the organization have local chapters, branches, or affiliates?	10a	X	110
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	104		
	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 on Schedule O the process, if any, used by the organization to review this Form 990.			
12a		12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
·	on 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	17		
10	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
2	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b		х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	100		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
iou	Associate and the design of the core of	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	102		
17	List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O			
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)	availal	ble
-	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	RACHEL COOK - 212-747-0622			
	180 MAIDEN LANE, 603, NEW YORK, NY 10038			

13-4071318

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEĆ) of more than \$100,000 from the organization and any related organizations.

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

- 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. See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per	(do box		Pos heck	c) ition more rson i	than o	one n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key employee	Highest compensated employee		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) MARC YAGGI	40.00									
CHIEF EXECUTIVE OFFICER	50.00	<u> </u>		Х				262,249.	0.	29,642.
(2) MARY BETH POSTMAN	50.00	4						021 044		100
DEPUTY DIRECTOR	40.00				Х			231,944.	0.	120.
(3) DANIEL ESTRIN GENERAL COUNSEL/ADVOCACY DIRECTOR	40.00	-			х			198,598.	0.	28 134
(4) RACHEL COOK	40.00				^			190,390.	0.	28,134.
CHIEF FINANCE & OPERATIONS OFFICER	10.00	1			х			180,440.	0.	10,477.
(5) KATHRYN CECIL	40.00							100,440.	<u> </u>	10,177.
FMR DEVELOPMENT DIRECTOR	10.00	1					х	144,456.	0.	18,951.
(6) KELLY HUNTER FOSTER	40.00									
SENIOR ATTORNEY		1				x		139,085.	0.	18,374.
(7) LORI HARRISON	40.00							,		,
COMMUNICATIONS & MARKETING DIRECTOR		1				x		129,088.	0.	28,134.
(8) CHRIS WILKE	40.00									
GLOBAL ADVOCACY MANAGER		1				х		112,948.	0.	18,951.
(9) KATHERINE LUSCHER	40.00									
TRAINING DIRECTOR						Х		106,123.	0.	10,477.
(10) GLENN RINK	3.00									
CHAIR		Х		Х				0.	0.	0.
(11) GLORIA REUBEN	3.00	1								
PRESIDENT		Х		Х				0.	0.	0.
(12) YVONNE ZAPPULLA	3.00	1								
TREASURER		Х		Х				0.	0.	0.
(13) BRUCE REZNIK	3.00	1								
SECRETARY		Х		Х				0.	0.	0.
(14) TONYA BONITATIBUS	3.00	4							_	_
DIRECTOR	2 00	Х						0.	0.	0.
(15) BRUNO MONTEFERRI	3.00	∤								2
DIRECTOR (16) KDIGHEN MOODE	3 00	Х						0.	0.	0.
(16) KRISTEN MOORE DIRECTOR	3.00	x						0.	0.	^
(17) CHERYL NENN	3.00	<u> </u>						0.	· · · · · · · · · · · · · · · · · · ·	0.
DIRECTOR	3.00	х						0.	0.	0.
	1	1>		<u> </u>				ı	<u> </u>	Form 990 (2022)

Form **990** (2022) 232007 12-13-22

Part VII Section A. Officers, Directors, Tru		ploy	ees,			ghes	t C				-	·\
(A)	(B) Average			Pos	C) ition	1		(D)	(E)		(F	
Name and title	hours per		not c	heck	more	than dis both		Reportable compensation	Reportable compensation	,	Estim amou	
	week					or/trus		from	from related	'	oth	
	(list any	ector						the	organizations		comper	
	hours for	or dire				ted		organization	(W-2/1099-MIS	2/	from	the
	related	stee	truste			pensa		(W-2/1099-MISC/	1099-NEC)		organi	
	organizations below	altru	onal t		ployee	com ee		1099-NEC)			and re	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	ormer				organiz	ations
(18) BETSY NICHOLAS	3.00	=	=		~	Τ 0	-					
DIRECTOR		х						0.		0.		0.
(19) THEO THOMAS	3.00											
DIRECTOR		Х						0.		0.		0.
(20) LAURA TURNER SEYDEL	3.00											
DIRECTOR		х						0.		0.		0.
(21) LESSING STERN	3.00											
DIRECTOR		х						0.		0.		0.
(22) KENT WEED	3.00											
DIRECTOR		Х						0.		0.		0.
			_			_						
		-										
			├			\vdash						
		-										
-			\vdash			\vdash						
1b Subtotal			<u> </u>		<u> </u>	<u> </u>	<u> </u>	1,504,931.		0.	16	3,260.
c Total from continuation sheets to Part \								0.		0.		0.
d Total (add lines 1b and 1c)								1,504,931.		0.	16	3,260.
2 Total number of individuals (including but									000 of reportable			·
compensation from the organization									•			9
											Ye	s No
3 Did the organization list any former office	r, director, trust	ee, l	кеу е	empl	loye	e, or	hig	hest compensated empl	oyee on			
line 1a? If "Yes," complete Schedule J for	such individual										3 X	
4 For any individual listed on line 1a, is the s												
and related organizations greater than \$15	50,000? If "Yes	," cc	mpl	ete S	Sche	edule	J f	for such individual			4 X	
5 Did any person listed on line 1a receive or	•				•			•	lual for services			
rendered to the organization? If "Yes," co	<u>mplete Schedul</u>	e J f	or su	ıch <u>ı</u>	pers	on					5	Х
Section B. Independent Contractors								t t t t	100 000 - 5			
 Complete this table for your five highest c the organization. Report compensation fo 	•	•							•	ensa	tion from	
(A)	r trie caleridar y	eare	eriair	ig w	illi C	or wi	unin	the organization's tax years. (B)	ear.		(C)	
Name and busines	s address	NO	NE					Description of s	ervices	С	ompensa	tion
								·			-	
							\dashv					
2 Total number of independent contractors	(including but a	Ot lie	nito	1 +0	thor	ما مع	ted	ahove) who received me	ore than			
- Total humber of independent contractors	(II IOIGGII IG DUL II	Or 111		٠.٠	11105	JC 113	····u	above, with tenetred life	// Culaul			

\$100,000 of compensation from the organization

Form 990 (2022) WATERKEEPER
Part VIII Statement of Revenue

			Check if Schedule O contains a res	snonse (or note to any lin	e in this Part VIII			
			Cricci ii Geriedale o contains a rec	эропас (or riote to arry iiri	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded
							function revenue	business revenue	from tax under sections 512 - 514
				т —					Sections 512 - 514
nts	1		Federated campaigns1						
Sra Iou			Membership dues1						
Contributions, Gifts, Grants and Other Similar Amounts			Fundraising events1		120,480.				
aif		d	Related organizations 1	d					
is, ini		е	Government grants (contributions) 1	е					
rior S		f	All other contributions, gifts, grants, and						
the			similar amounts not included above 1	f	8,622,071.				
		g	Noncash contributions included in lines 1a-1f	g \$	15,235.				
Co		h	Total. Add lines 1a-1f			8,742,551.			
					Business Code				
Ð	2	а							
, vic		b							
Ser		С							
E S		d							
Peg		e							
Program Service Revenue			All other program service revenue						
			Total. Add lines 2a-2f						
	3	3	Investment income (including dividend						
	_		other similar amounts)			47,872.			47,872.
	4		Income from investment of tax-exempt			, -			,
	5		Royalties	-					
	3		(i) F		(ii) Personal				
	6	_			(1) 1 0.001141				
			Gross rents 6a 6b						
			Rental income or (loss) 6c						
			Net rental income or (loss)						
			Gross amount from sales of (i) Sec	ırities	(ii) Other				
	'	а	CH 000 CH 10 CH 0 CH 0 CH 10 C	1,900.	(ii) Garier				
		L	Less: cost or other basis	,,,,,,,,					
ø		D		5,818.					
ž		_		3,082.					
Revenue						8,082.			8,082.
۳.			Net gain or (loss)			0,002.			0,002.
Other	0	а	including \$ 120,480.						
٥			contributions reported on line 1c). See	'					
			Part IV, line 18	8a	116,748.				
		h	Less: direct expenses						
			Net income or (loss) from fundraising e			-39,752.			-39,752.
			Gross income from gaming activities.			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			22,122.
	9	а	Part IV, line 19						
		h	Less: direct expenses						
			Net income or (loss) from gaming activ						
			Gross sales of inventory, less returns						
	10	а	and allowances	10a					
		h	Less: cost of goods sold						
			Net income or (loss) from sales of inver						
		<u> </u>	THE THEOTIE OF (1033) HOTH Sales OF HIVE	itory	Business Code				
sno	11	а	LICENSING FEES & OTHER REVENU	JE	900099	63,788.	63,788.		
Miscellaneous Revenue	••	b				,	,		
əlla		C							
Be			All other revenue						
Σ			Total. Add lines 11a-11d			63,788.			
	12		Total revenue. See instructions			8,822,541.	63,788.	0.	16,202.

Form **990** (2022) 232009 12-13-22

Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a response of include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
	b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
	Grants and other assistance to domestic organizations	202 022	202 022		
	and domestic governments. See Part IV, line 21	292,922.	292,922.		
	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign	1 002 542	1 002 542		
	individuals. See Part IV, lines 15 and 16	1,093,543.	1,093,543.		
	Benefits paid to or for members				
	Compensation of current officers, directors,	001 720	700 141	112 110	90 47
	trustees, and key employees	981,730.	780,141.	112,119.	89,47
	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	4 674 042	1 222 245	104 054	450.64
	Other salaries and wages	1,674,813.	1,330,945.	191,251.	152,61
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
	Other employee benefits	661,752.	525,831.	75,596.	60,32
0	Payroll taxes				
	Fees for services (nonemployees):				
а	Management				
b	Legal				
C	Accounting	13,400.	10,680.	1,548.	1,17
d I	Lobbying	21,686.	21,686.		
e l	Professional fundraising services. See Part IV, line 17	78,000.			78,00
f	Investment management fees	6,323.		6,323.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	263,290.	205,239.	11,965.	46,086
2	Advertising and promotion				
3	Office expenses	140,612.	106,293.	16,010.	18,309
4	Information technology				
	Royalties				
	Occupancy	520,464.	410,431.	62,609.	47,42
	Travel	67,830.	54,062.	9,083.	4,685
8	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
	Conferences, conventions, and meetings				
	Interest				
	Payments to affiliates				
	Depreciation, depletion, and amortization	21,419.		21,419.	
	Insurance	32,961.	26,270.	3,807.	2,884
	Other expenses. Itemize expenses not covered	,	,	,	,
;	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.)				
	EDUCATIONAL / OUTREACH	707,048.	457,126.	2,200.	247,72
٠.	WKA SUPPORT	283,656.	283,656.	, ,	,
~ .	LITIGATION / REGULATION	52,342.	50,356.		1,98
•	STAFF DEVELOPMENT	1,512.	1,205.	175.	13:
	All other expenses	24.	_,		2
	Total functional expenses. Add lines 1 through 24e	6,915,327.	5,650,386.	514,105.	750,83
		5,515,527.	3,030,300.	314,103.	750,05
	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
(educational campaign and fundraising solicitation.				

Form 990 (2022) Part X | Balance Sheet

Pai	rt X	Balance Sheet					
		Check if Schedule O contains a response or	note to any li	ne in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			2,598,010.	1	2,684,184.
	2	Savings and temporary cash investments			2		
	3	Pledges and grants receivable, net		311,014.	3	809,343	
	4	Accounts receivable, net			4		
	5	Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su					
र		controlled entity or family member of any of	hese persons	s		5	
	6	Loans and other receivables from other disquared	ualified persor	ns (as defined			
		under section 4958(f)(1)), and persons descri	bed in sectior	n 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
ğ	9	Donata del como como con el el efermo el electrone			124,327.	9	97,097
	10a	Land, buildings, and equipment: cost or other	er				
		basis. Complete Part VI of Schedule D	10a	475,243.			
	b	Less: accumulated depreciation	10b	460,426.	36,236.	10c	14,817
	11	Investments - publicly traded securities		1,516,283.	11	1,219,912	
	12	Investments - other securities. See Part IV, lin			12		
	13	Investments - program-related. See Part IV, li		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11	235,340.	15	4,238,798		
	16	Total assets. Add lines 1 through 15 (must e			4,821,210.	16	9,064,151
	17	Accounts payable and accrued expenses		2,125,180.	17	433,828	
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
es	22	Loans and other payables to any current or f					
Liabilities		trustee, key employee, creator or founder, su					
ja ja		controlled entity or family member of any of		·····		22	
_	23	Secured mortgages and notes payable to un				23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax					
		parties, and other liabilities not included on li	nes 17-24). C	omplete Part X	422 000		4 410 264
		of Schedule D		·····	433,092.	25	4,410,364
	26	Total liabilities. Add lines 17 through 25	· · · ·	X	2,558,272.	26	4,844,192
ý		Organizations that follow FASB ASC 958,	check here				
nce		and complete lines 27, 28, 32, and 33.			942,119.	07	1 697 135
ala	27				1,320,819.	27	1,687,135. 2,532,824.
g B	28				1,320,019.	28	2,332,024
ڃ		Organizations that do not follow FASB AS	C 958, cneck	nere			
ᅙ		and complete lines 29 through 33.	al -			20	
şt	29	Capital stock or trust principal, or current fur				29	
SS	30	Paid-in or capital surplus, or land, building, o		Г		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated		Г	2,262,938.	31	4,219,959.
ž	32				4,821,210.	32	9,064,151.
	33	Total liabilities and net assets/fund balances			=,021,210.	33	Form 990 (2022

Pai	TEXT 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	8 ,	,822,	541.
2	Total expenses (must equal Part IX, column (A), line 25)	2	6 ,	,915,	327.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,	,907,	214.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2 ,	,262,	938.
5	Net unrealized gains (losses) on investments	5		49,	807.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	4	,219,	959.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
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?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2022)

232012 12-13-22

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

WATERKEEPER ALLIANCE, INC.

Open to Public

OMB No. 1545-0047

Employer identification number

13-4071318

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

Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions)) Total

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	15,467,851.	17,237,129.	11,662,266.	14,838,980.	8,742,551.	67,948,777.
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	Total. Add lines 1 through 3	15,467,851.	17,237,129.	11,662,266.	14,838,980.	8,742,551.	67,948,777.
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)						35,673,119.
6	Public support. Subtract line 5 from line 4.						32,275,658.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	15,467,851.	17,237,129.	11,662,266.	14,838,980.	8,742,551.	67,948,777.
8	Gross income from interest,						_
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	12,023.	6,524.	12,210.	34,061.	47,872.	112,690.
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.)	57,302.	61,369.	67,999.	243,994.	63,788.	494,452.
11	Total support. Add lines 7 through 10						68,555,919.
12	Gross receipts from related activities,	etc. (see instructio	ns)			12	
13	First 5 years. If the Form 990 is for th	ne organization's fir	st, second, third, f	ourth, or fifth tax y	ear as a section 5	01(c)(3)	
	organization, check this box and stop	here					
Sec	ction C. Computation of Publi	c Support Per	centage				
14	Public support percentage for 2022 (I	ine 6, column (f), di	ivided by line 11, c	olumn (f))		14	47.08 %
15	Public support percentage from 2021	Schedule A, Part I	II, line 14			15	44.24 %
16a	33 1/3% support test - 2022. If the o	organization did no	t check the box or	line 13, and line 1	4 is 33 1/3% or m	ore, check this box	and
	stop here. The organization qualifies	as a publicly suppo	orted organization				X
b	33 1/3% support test - 2021. If the o	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check thi	s box
	and stop here. The organization qual	ifies as a publicly s	upported organiza	tion			
17a	10% -facts-and-circumstances test	- 2022. If the org	anization did not c	heck a box on line	13, 16a, or 16b, a	and line 14 is 10% o	or more,
	and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop her	e. Explain in Part	VI how the organiz	ation
	meets the facts-and-circumstances te	st. The organizatio	n qualifies as a pul	blicly supported or	ganization		
b	10% -facts-and-circumstances test	- 2021. If the org	anization did not c	heck a box on line	13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets the	ne facts-and-circum	stances test, chec	k this box and st	op here. Explain i	n Part VI how the	
	organization meets the facts-and-circu	umstances test. Th	e organization qua	lifies as a publicly	supported organiz	ation	
18	Private foundation. If the organization	n did not check a l	oox on line 13, 16a	a, 16b, 17a, or 17b	, check this box a	nd see instructions	
						Schedule A	(Form 990) 2022

232022 12-09-22

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.)

Sed	ction A. Public Support	siow, picase comp	oicte i art ii.j				
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or 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						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6	(a) 2010	(6) 2019	(6) 2020	(4) 2021	(6) 2022	(i) iotai
	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 on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	J		,	•	() ()	· —
	check this box and stop here						
	ction C. Computation of Publi					 	
	Public support percentage for 2022 (li	, ,,,	•	column (f))		15	%
	Public support percentage from 2021					16	%
	ction D. Computation of Inves			. 10 1 (0)		14-1	
	Investment income percentage for 20					17	%
	Investment income percentage from 2					18	% 7 in
198	33 1/3% support tests - 2022. If the						
b	more than 33 1/3%, check this box ar 33 1/3% support tests - 2021. If the	organization did r	not check a box or	line 14 or line 19a	a, and line 16 is m	ore than 33 1/3%, a	and
	line 18 is not more than 33 1/3%, che	ck this box and st	top here. The orga	anization qualifies a	as a publicly supp	orted organization	
20	Private foundation. If the organization	n did not check a	hox on line 14 19	a or 19h check th	nis hox and see in	structions	

232023 12-09-22

Schedule A (Form 990) 2022

Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, 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 lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c 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 lines 5b and 5c 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

 If "Yes." complete Part I of Schedule L (Form 990).
- 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 on 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 on 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 line 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		
OD .		
3c		
4a		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
3		
9a		
9b		
9c		
10a		
10b		
ule A (Forr	n 990)	2022

Pai	TIV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	directors, or trustees at all times during the 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 remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
-	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
	<i>y</i> 11 0 0		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		103	140
•	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
		1		
0	organization's governing documents in effect on the date of notification, to the extent not previously provided?	_		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
•	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
<u>Sac</u>	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	struction		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in			
	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes." describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportir	ıg Orga	nizations	y
1	Check here if the organization satisfied the Integral Part Test as a qualifyir	ng trust on	Nov. 20, 1970 (explain in I	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus		•	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
_4	Add lines 1 through 3.	4		
_5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 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-functiona	lly integra	ted Type III supporting orga	nization (see
	instructions).			•

Schedule A (Form 990) 2022

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	nizations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes	1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity		2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	
4	Amounts paid to acquire exempt-use assets		4	
_5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)	5	
_6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI). See instructions.		8	
9	Distributable amount for 2022 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	
		(i)	(ii)	(iii)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2022	Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2022 (reason-			
	able cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2022			
a	From 2017			
b	From 2018			
c	From 2019			
d	From 2020			
e	From 2021			
f_	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2022 distributable amount			
<u>i</u>	Carryover from 2017 not applied (see instructions)			
<u>j_</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2022 from Section D,			
	line 7: \$			
<u>a</u>	Applied to underdistributions of prior years			
<u> </u>	Applied to 2022 distributable amount			
<u> </u>	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2022, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2022. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2023. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2018			
	Excess from 2019			
	Excess from 2020			
<u>a</u>	Excess from 2021 Excess from 2022			

Schedule A (Form 990) 2022

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:
OTHER REVENUE
2018 AMOUNT: \$ 57,302.
2019 AMOUNT: \$ 61,369.
2020 AMOUNT: \$ 67,999.
2021 AMOUNT: \$ 243,994.
2022 AMOUNT: \$ 63,788.

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

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

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

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

Open to Public Inspection

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

• Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of org	anization	iono. compieto i ait iii.		Emp	loyer identification number
		R ALLIANCE, INC.			13-4071318
Part I-A	Complete if the org	anization is exempt und	ler section 501(c)	or is a section 527 or	ganization.
2 Politica		ation's direct and indirect polition ures gn activities			
Part I-B	Complete if the org	anization is exempt und	ler section 501(c)(3).	
2 Enter th 3 If the or 4a Was a c	ne amount of any excise tax rganization incurred a section correction made?	incurred by the organization un incurred by organization manag n 4955 tax, did it file Form 4720	gers under section 4955 ofor this year?	\$	Yes No
Part I-C	describe in Part IV. Complete if the org	anization is exempt und	ler section 501(c).	except section 501(c	3)(3).
 2 Enter the exempt 3 Total exempt in 17th 4 Did the 5 Enter the made potential 5 Contribution 	ne amount of the filing organ function activities compt function expenditures filing organization file Form ne names, addresses and en ayments. For each organizations received that were productions and the second received that were productions activities and the second received that were productions activities and the second received that were productions activities activities and the second received received that were productions activities activities and the second received r	by the filing organization for se ization's funds contributed to o . Add lines 1 and 2. Enter here in the second of the second	ther organizations for sea and on Form 1120-POL IN) of all section 527 po id from the filing organiz a separate political orga	s, , \$ ilitical organizations to which zation's funds. Also enter the anization, such as a separat	Yes No n the filing organization e amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990) 2022

LHA

232041 11-08-22

Schedule C		WATERKEEPER ALLI				071318 P	Page 2
Part II-A		ganization is exen	npt under section	501(c)(3) and file	d Form 5768 (ele	ction under	
	section 501(h)).						
A Check	if the filing organiza	ation belongs to an affil	liated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,	
	expenses, and sha	re of excess lobbying e	expenditures).				
B Check	if the filing organiza	ation checked box A ar	nd "limited control" pro	visions apply.			
		its on Lobbying Exper ditures" means amou			(a) Filing organization's totals	(b) Affiliated g totals	roup
1a Total	lobbying expenditures to infl	uence public opinion (d	grassroots lobbying)		18,927.		
	lobbying expenditures to infl		. / !!		2,759.		
	lobbying expenditures (add li	•	, , , , , ,		21,686.		
	r exempt purpose expenditur				6,893,641.		
e Total	exempt purpose expenditure				6,915,327.		
	ying nontaxable amount. Ent				495,766.		
If the	amount on line 1e, column (a) o	or (b) is: The lob	bying nontaxable am	ount is:			
Not c	ver \$500,000	20% of	the amount on line 1e.				
Over	\$500,000 but not over \$1,00	0,000 \$100,00	00 plus 15% of the exce	ess over \$500,000.			
Over	\$1,000,000 but not over \$1,5	500,000 \$175,00	00 plus 10% of the exce	ess over \$1,000,000.			
Over	\$1,500,000 but not over \$17	,000,000 \$225,00	00 plus 5% of the exces	ss over \$1,500,000.			
Over	\$17,000,000	\$1,000,	000.				
g Grass	sroots nontaxable amount (er	nter 25% of line 1f)			123,942.		
h Subti	ract line 1g from line 1a. If zer	ro or less, enter -0			0.		
i Subti	ract line 1f from line 1c. If zero	o or less, enter -0			0.		
j If the	re is an amount other than ze	ero on either line 1h or	line 1i, did the organiza	tion file Form 4720			
repor	ting section 4911 tax for this	year?				Yes	No
	(Some organizations t	hat made a section 50	eraging Period Under 01(h) election do not I ate instructions for lir	nave to complete all o	of the five columns be	low.	
		Lobbying Exper	nditures During 4-Yea	r Averaging Period			
(or fi	Calendar year scal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total	

	Lobbying Expen	ditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount	1,000,000.	648,911.	990,080.	495,766.	3,134,757.
b Lobbying ceiling amount (150% of line 2a, column(e))					4,702,136.
c Total lobbying expenditures	2,234.	2,620.	16,651.	21,686.	43,191.
d Grassroots nontaxable amount	250,000.	162,228.	247,520.	123,942.	783,690.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,175,535.
f Grassroots lobbying expenditures	2,234.	2,620.	13,892.	18,927.	37,673.

Schedule C (Form 990) 2022

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)).

	ch "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	· · · · · · · · · · · · · · · · · · ·		,,	o)
or the i	lobbying activity.	Yes	No	Amo	ount
1 [During the year, did the filing organization attempt to influence foreign, national, state, or				
le	local legislation, including any attempt to influence public opinion on a legislative matter				
c	or referendum, through the use of:				
a ∖	Volunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c N	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
f (Grants to other organizations for lobbying purposes?				
_	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h F	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912			<u> </u>	
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		05.00	otion	
	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	11 30 1 (6)(3)	, or se	Stion	
art					
art	00.(0)(0).			Yes	N
	Were substantially all (90% or more) dues received nondeductible by members?		1	Yes	N
1 V				Yes	N
1 V 2 [Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the 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	e prior year? n 501(c)(5)	2 3), or se	ction	
1 V 2 [3 [Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the 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	e prior year? n 501(c)(5) 'No" OR (l), or seeb) Part	ction	
1 V 2 [3 [Part	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the 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 political expenditures)	e prior year? n 501(c)(5) 'No" OR (l), or seeb) Part	ction	
1 V 2 [3 [2 s	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-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).	e prior year? n 501(c)(5) 'No" OR (l	2 3), or se b) Part	ction	
1 V 2 [3 [2 art	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the 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 political expenses for which the section 527(f) tax was paid). Current year	e prior year? n 501(c)(5) 'No" OR (l	2 3), or se b) Part	ction	
1 V 2 [3 [2 art	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the lill-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).	e prior year? n 501(c)(5) 'No" OR (l	2 3), or see b) Part	ction	
1 \ \V2 \ \cdot \c	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the 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	e prior year? n 501(c)(5) 'No" OR (l	2 3), or sec b) Part	ction	
1 V 2 [3 [2 c 4 c l 3 /	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the 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	e prior year? n 501(c)(5 'No" OR (l	2 3), or sec b) Part	ction	3, is
1 V 22 [33 [22 st 4 1 1 1 1 1 1 1 1 1	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the solid the organization agree to carry over lobbying and political campaign activity expenditures from the solid 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 exceeds	e prior year? n 501(c)(5) 'No" OR (l	2 3), or sec b) Part	ction	
1 V 2 [3] 3 2 3 4 1 3 4 1 3	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the source of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the source of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the source of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the section \$01(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 political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues are section of the excellent of the section of the excellent of the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures.	e prior year? n 501(c)(5) 'No" OR (l	2 3), or sec b) Part	ction	
11 V 2 [33 [33 [34] 4]	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the solid the organization agree to carry over lobbying and political campaign activity expenditures from the solid 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 exceeds	e prior year? n 501(c)(5) 'No" OR (l	2 3), or sec b) Part	ction	

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.

OMB No. 1545-0047 Inspection

Name of the organization

WATERKEEPER ALLIANCE, INC.

Employer identification number

 $13\!-\!4071318$

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		ilar Funds or Ad	counts. Complete if the
		(a) Donor advised fu	ınds	(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 w	riting that the assets held in	n donor advised fund	ds
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ac	lvisors in writing that grant f	funds can be used o	nly
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any ot	her purpose conferr	ing
	impermissible private benefit?			Yes No
Pai			n Form 990, Part IV	, line 7.
1	Purpose(s) of conservation easements held by the organizatio	`		
	Preservation of land for public use (for example, recreat	ion or education)	reservation of a histo	orically important land area
	Protection of natural habitat	Pı	reservation of a cert	ified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualific	ed conservation contribution	n in the form of a co	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
b				2b
	Number of conservation easements on a certified historic stru			2c
d	Number of conservation easements included in (c) acquired at			
_	historic structure listed in the National Register			
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or term	inated by the organi	ization during the tax
	year			
4	Number of states where property subject to conservation ease			
5	Does the organization have a written policy regarding the periodic little and		•	
•	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and e	nforcing conservation	on easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforc	ing conservation ea	sements during the year
		3	3	J ,
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of	section 170(h)(4)(B)	(i)
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation	n easements in its revenue	and expense statem	nent and
	balance sheet, and include, if applicable, the text of the footnote	ote to the organization's fina	ancial statements the	at describes the
_	organization's accounting for conservation easements.			
Pai	t III Organizations Maintaining Collections of		ires, or Other S	imilar Assets.
	Complete if the organization answered "Yes" on Form			
1a	If the organization elected, as permitted under FASB ASC 958	•		
	of art, historical treasures, or other similar assets held for publ			nce of public
	service, provide in Part XIII the text of the footnote to its finance			
b	If the organization elected, as permitted under FASB ASC 958	•		
	art, historical treasures, or other similar assets held for public	exhibition, education, or res	search in furtherance	e of public service,
	provide the following amounts relating to these items:			•
	(i) Revenue included on Form 990, Part VIII, line 1			
_				'
2	If the organization received or held works of art, historical trea			provide
	the following amounts required to be reported under FASB AS			•
a	Revenue included on Form 990, Part VIII, line 1			
b	Assets included in Form 990, Part X			\$

Schedule D (Form 990) 2022

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

) (Form 990) 2022	WATERKEEPER	ALLIANCE,	INC

Sche	dalo D (i oitti oco) Loll	ALLIANCE, INC.					13-407		Р	age 2
Pai	rt III Organizations Maintaining Col	lections of Art,	Historical Tre	asures, or	Other S	Similar	Assets	(contin	nued)	
3	Using the organization's acquisition, accession	, and other records,	check any of the fe	ollowing that	make sign	ificant us	se of its			
	collection items (check all that apply):									
а	Public exhibition	d	Loan or excl	hange progra	m					
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's colle	ections and explain	how they further th	e organizatio	n's exempt	t purpos	e in Part 2	XIII.		
5	During the year, did the organization solicit or re	eceive donations of	art, historical treas	ures, or othe	r similar as	sets				
	to be sold to raise funds rather than to be main							Yes		No
Pai	t IV Escrow and Custodial Arrange	ements. Complet	e if the organization	n answered "	Yes" on Fo	orm 990,	Part IV, I	ine 9, or		
	reported an amount on Form 990, Part >	K, line 21.								
1a	Is the organization an agent, trustee, custodian	or other intermedia	ry for contributions	or other ass	ets not inc	luded		_		
	on Form 990, Part X?						\square	Yes		No
b	If "Yes," explain the arrangement in Part XIII an									
								Amount	t	
С	Beginning balance					1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance					1f				
2a	Did the organization include an amount on Form	n 990, Part X, line 2	1, for escrow or cu	stodial accou	unt liability?	?		Yes		No
	If "Yes," explain the arrangement in Part XIII. Cl]
Pai	rt V Endowment Funds. Complete if the		wered "Yes" on Fo	rm 990, Part	IV, line 10.					
		(a) Current year	(b) Prior year	(c) Two year			ars back			
1a	Beginning of year balance	1,320,819.	2,023,045.	2,480	,349.		8,829.	4,	665,	585.
b	Contributions	3,509,478.	10,643,425.	4,956	,388.	14,58	8,082.	12,	697,	610.
С	Net investment earnings, gains, and losses									
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	2,297,473.	11,345,651.	5,413	,692.	14,74	6,562.	14,	724,	366.
f	Administrative expenses									
g	End of year balance	2,532,824.	1,320,819.	2,023	,045.	2,48	0,349.	2,	638,	829.
2	Provide the estimated percentage of the current	t year end balance	(line 1g, column (a)) held as:						
а	Board designated or quasi-endowment		_%							
b	Permanent endowment 3.9480	%								
С	Term endowment96.0520 %									
	The percentages on lines 2a, 2b, and 2c should	d equal 100%.								
За	Are there endowment funds not in the possess	ion of the organizati	on that are held an	d administer	ed for the			_		
	organization by:								Yes	No
	(i) Unrelated organizations							3a(i)		Х
	(ii) Related organizations							3a(ii)		Х
b	If "Yes" on line 3a(ii), are the related organization	ons listed as require	d on Schedule R?					3b		
4	Describe in Part XIII the intended uses of the or		ment funds.							
Pai	rt VI Land, Buildings, and Equipme	nt.								
	Complete if the organization answered "	Yes" on Form 990,	Part IV, line 11a. S	ee Form 990,	Part X, lin	e 10.				
	Description of property	(a) Cost or othe	, ,	I .		umulated	t	(d) Bool	k valu	е
1a	Land									
b	Buildings									
c	Leasehold improvements			9,493.		6,9	61.		2.	532.
d	Equipment			465,750.		453,4				285.
	Other					,				
	I. Add lines 1a through 1e. (Column (d) must eau		column (P) line 10	<u> </u>					14	817.
1010	, taatoo Ta tiiroagii To. (Colulliii (aj Must equ	airuiii 330, Fa fl A	<u>. columni (D), line 10</u>	/ <u>/./</u>			 Schedule	D (Form		

Schedule D (Form 990) 2022 WATERKEEPER ALLIANCE, INC.	13-4071318 Page 3
Part VII Investments - Other Securities.	
Complete if the organization answered "Yes" on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security) (b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives	
(2) Closely held equity interests	
(3) Other	
(A)	
(B)	
(C)	
(D)	
(E)	
(F)	
(G)	
(H)	1
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.	
Complete if the organization answered "Yes" on Form 990, Part IV, line	11c See Form 900 Part V line 13
(a) Description of investment (b) Book value	(c) Method of valuation: Cost or end-of-year market value
	(c) Method of Valuation. Cost of end-of-year market value
(1)	<u> </u>
(2)	
(3)	
(4)	
(5)	
(6)	
(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" on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.
(a) Description	(b) Book value
(1) SECURITY DEPOSIT	235,340.
(2) RIGHT-OF-USE ASSET OPERATING LEASE, NET	4,003,458.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	4,238,798.
Part X Other Liabilities.	<u> </u>
Complete if the organization answered "Yes" on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.
1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
	4,410,364.
(2) OPERATING LEASE PAYABLES	
(2) OPERATING LEASE PAYABLES	
(3)	
(3) (4)	
(3) (4) (5)	
(3) (4)	

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

4,410

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2022

4,410,364.

(9)

Sche	dule D (Form 990) 2022 WATERKEEPER ALLIANCE, INC.			13-4071318	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statemen	its With R	evenue per Ret	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total revenue, gains, and other support per audited financial statements			1	9,022,525.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	49,807.		
b	Donated services and use of facilities				
С	Recoveries of prior year grants				
d	Other (Describe in Part XIII.)	1	156,500.		
	Add lines 2a through 2d			2e	206,307.
3	Subtract line 2e from line 1				8,816,218.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a	6,323.		
	Other (Describe in Part XIII.)		,		
				4c	6,323.
5	Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)				8,822,541.
	t XII Reconciliation of Expenses per Audited Financial Stateme	nts With E	xpenses per R		0,022,022.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		-xp0000 p0		
1	T. I			1	7,065,504.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	, ,	20			
a	Donated services and use of facilities	2a			
b	Prior year adjustments				
С.	Other losses		156,500.		
d	Other (Describe in Part XIII.)	•			156 500
	Add lines 2a through 2d			2e	156,500.
3	Subtract line 2e from line 1			3	6,909,004.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	1 1	6 202		
	Investment expenses not included on Form 990, Part VIII, line 7b		6,323.		
	Other (Describe in Part XIII.)	4b			
	Add lines 4a and 4b			4c	6,323.
5 Dar	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) t XIII Supplemental Information.			5	6,915,327.
				5	
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part II	•		; Part X, line 2; P	'art XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addit	ional informa	ition.		
D. D. D. W.	T. T				
PART	V, LINE 4:				
пемъ					
1 EMP	ORARILY RESTRICTED				
ידדי	TEMPORARILY RESTRICTED NET ASSETS REPRESENT CONTRIBUTIONS AND	CD A MTC			
Ins	TEMPORARILI RESIRICIED NEI ASSEIS REFRESENI CONTRIBUTIONS AND	GLANIS			
тидит	ARE RESTRICTED BY THE DONOR FOR A SPECIFIC PURPOSE OR PERTAIN	ΨO			
	THE RESIRECTED BY THE BONOR FOR A STREET CONTOBE OF TERMINA	10			
ווייווים	RE PERIODS (TIMING). ONCE THAT SPECIFIC PURPOSE HAS BEEN MET O	в тнг			
	ALI TERIODE (TIMINO); OROL TIMI BILETITE TORTOBE MID BEEN MET C				
ттме	RESTRICTION EXPIRES, THE FUNDS ARE RELEASED AND REFLECTED AS	NET			
	RESTRICTION DATERED, THE TORDS THE RESERVED THE RESTREETED TO				
ASSE	TS RELEASED FROM RESTRICTIONS. THE FUNDS PURPOSE ARE TO FURTHE	в тнг			
71001	TO KEELINGED INON KEELIKEELIOMO, THE LONDO LONGODE AND TO LONGE				
WATE	RKEEPER ALLIANCE, INC.'S MISSION.				
******	MADELLA INSTITUTE, STITUTE, ST				
PERM	ANENTLY RESTRICTED				
PERM	ANENTLY RESTRICTED NET ASSETS ARE SUBJECT TO DONOR-IMPOSED				
REST	RICTIONS WHOSE CONTRIBUTIONS MUST BE MAINTAINED IN PERPETUITY	BY THE			
				Cabadula D (Ca	000\ 0000

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

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

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

OMB No. 1545-0047

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 United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (e) If activity listed in (d) (b) Number of (c) Number of (d) Activities conducted in the region (f) Total (a) Region employees, agents, and expenditures offices (by type) (such as, fundraising, prois a program service, for and in the region gram services, investments, grants to describe specific type independent investments contractors recipients located in the region) of service(s) in the region in the region in the region ASIA AND THE PACIFIC 16 0 GRANTMAKING GRANTS & SCHOLARSHIP 24,350. LATIN AMERICA & CARIBBEAN 26 0 GRANTMAKING GRANTS & SCHOLARSHIP 1,021,693. MIDDLE EAST AND NORTH AFRICA 7 0 GRANTMAKING GRANTS & SCHOLARSHIP 47,500. 49 0 1,093,543. 3 a Subtotal **b** Total from continuation 0 0 0. sheets to Part I Totals (add lines 3a 1,093,543. and 3b)

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

Schedule F (Form 990) 2022

3 Enter total number of other organizations or entities

Part II

Grants and Other Assistance to Organizations or Entities Outside the United States.	Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any
recipient who received more than \$5,000. Part II can be duplicated if additional space is n	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.						
		AMERICA/CARIBBEAN	SUPPORT	1,021,693.	WIRE	0.		
		EAST ASIA/PACIFIC	SUPPORT	24,350.	WIRE	0.		
		MIDDLE EAST/NORTH						
		AFRICA	SUPPORT	47,500.	WIRE	0.		
			recognized as charities by the f					

Schedule F (Form 990) 2022	WATERKEEPER ALLIAN	CE, INC.			13-4071318		Page :
Part III Grants and Other Assista	nce to Individuals Outsi	de the United Sta	ates. Complete i	f the organization answered "Yes	" on Form 990, Part	IV, line 16.	
Part III can be duplicated it	fadditional space is need	ed.					_
(a) Type of grant or assistance	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

	What the experiention of LLC transferor of property to a feroign porneciation during the toy year?		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? # "Yes,"		
	the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign		X No
	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? f "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		
U			
	"Yes," the organization may be required to separately file Form 5713, International Boycott Report (see	Ves	X No
	Instructions for Form 5713; don't file with Form 990)	Yes	ĽX No

Schedule F (Form 990) 2022

Part V Supplemental Information	
Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c)	
(estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.	
PART I, LINE 2:	
CRITERIA FOR ALLOCATING FUNDS FOR INTERNATIONAL PROGRAM SUPPORT PROJECT:	
- PRIORITY OF FUNDING GIVEN TO FIRST TIME APPLICANTS.	
- APPLICANTS ARE REQUIRED TO SUBMIT A PROPOSAL OR OTHER FORMAL REQUEST.	
- FUNDS REQUESTED MUST BE UTILIZED TO FULFILL OR CONTINUE COMPLIANCE OF A	
SPECIFIC WATERKEEPER ALLIANCE'S QUALITY STANDARD.	
- REPORT OF EXPENDED FUNDS WITH DOCUMENTATION REQUIRED WITHIN TWELVE	
MONTHS OF GRANT ISSUANCE OR WITHIN TWO MONTHS OF EXPENSE, WHICHEVER COMES	
FIRST.	
- GRANTS CHANNELED FROM WKA FROM OUTSIDE FUNDERS ARE REQUIRED TO COMPLY	
WITH ADDITIONAL REPORTING IN ACCORDANCE WITH FUNDER RULES.	
PROPOSALS ARE GIVE TO WATERKEEPER ALLIANCE FOR FUNDING. ONCE FUNDING IS	
APPROVED AND GRANTED REPORTS ARE SUBMITTED TO WATERKEEPER ALLIANCE ON HOW	
THE FUNDS WERE USED AND PROJECT/PROGRAM OUTCOMES.	

SCHEDULE G (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

2022

Open to Public Inspection

Name of the organization **Employer identification number** 13-4071318 WATERKEEPER ALLIANCE, INC. Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations e X Solicitation of non-government grants X Internet and email solicitations Solicitation of government grants b g X Special fundraising events Phone solicitations In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or X Yes key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) ROBBINS KIRSTEN DIRECT - 35 Yes No PARKWOOD DRIVE, STE 160 Х DIRECT MAIL 232,610 78,000 154,610. 232 610 78,000, 154 610. Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NV, NH, NJ, NM NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, TX, UT, VA, WA, WV, WI

232081 10-27-22

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SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990) 2022

			(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through
ש			(event type)	(event type)	(total number)	col. (c))
enelae	1	Gross receipts	237,228.			237,228.
	2	Less: Contributions	120,480.			120,480
	3_	Gross income (line 1 minus line 2)	116,748.			116,748.
	4	Cash prizes				
- 1	5	Noncash prizes				
	6	Rent/facility costs	156,500.			156,500.
Direct Experises	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				176 700
	10	Direct expense summary. Add lines 4 through				156,500.
ar	1 +	Net income summary. Subtract line 10 from li				-39,752
aı	LI	II Gaming. Complete if the organization s \$15,000 on Form 990-EZ, line 6a.	answered "Yes" on Form	990, Part IV, line 19, of	r reported more than	
$\overline{}$		\$15,000 OH FOHH 990-EZ, line 6a.	I	(b) Pull tabs/instant	1	(d) Total gaming (add
			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c)
	1	Gross revenue				
2	2	Cash prizes				
מושלי-	3	Noncash prizes				
DI ect Expelises	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes % No	Yes % No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
a I	s tl	ter the state(s) in which the organization conducted to conduct gaming actions in the conduct gaming actions.	ctivities in each of these s	states?		Yes No
ا ca -	r "I	No," explain:				
- a \		ere any of the organization's gaming licenses re	· · · · · · · · · · · · · · · · · · ·		•	Yes No
b	f "`	TES, EXPIAITI.				

Sch	edule G (Form 990) 2022 WATERKEEPER ALLIANCE, INC.	40/1318		Page 3
11	Does the organization conduct gaming activities with nonmembers?	Y	es	No No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed			
	to administer charitable gaming?	Y	es	☐ No
13	Indicate the percentage of gaming activity conducted in:			
а	The organization's facility	13a		<u>%</u>
	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			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	🔲 Y	es	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount			
	of gaming revenue retained by the third party \$			
С	If "Yes," enter name and address of the third party:			
	Name			
	Address			
16	Gaming manager information:			
	Name			
	Gaming manager compensation \$			
	Description of services provided			
	☐ Director/officer ☐ Employee ☐ Independent contractor			
47	Mandatoni diatributiana			
	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to			
a	retain the state gaming license?		es	☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year \$			
Pa	Tt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	art III, lines	s 9, 9	b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.			
פרש	EDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:			
БСП	EDULE G, FART I, DINE 2B, DIST OF TEN HIGHEST FAID FUNDRALSERS:			
(I)	NAME OF FUNDRAISER: ROBBINS KIRSTEN DIRECT			
/ T \	ADDRESS OF FUNDRALSED, 25 DARWISOD DRIVE SHE 160 HODVINGON MA 01740			
(1)	ADDRESS OF FUNDRAISER: 35 PARKWOOD DRIVE, STE 160, HOPKINTON, MA 01748			

Schedule G	G (Form 990)	WATERKEEPER ALLIANCE, INC.	13-4071318	Page 4
Part IV	G (Form 990) Supplemental Infor	mation (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.

OMB No. 1545-0047

2022

Open to Public

Inspection

Name of the organization WATERKEEPER A	Employer identification number 13-4071318						
Part I General Information on Grants a							
Does the organization maintain records criteria used to award the grants or assis Describe in Part IV the organization's properties. Part II Grants and Other Assistance to recipient that received more than	stance? ocedures for monit Domestic Organi	oring the use of grant	funds in the United	States. Complete if the orga			X Yes No
Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
LOS ANGELES WATERKEEPER 120 BROADWAY STE 105 SANTA MONICA, CA 90401	95-4444787	501(C)(3)	36,703.	0.			WATERKEEPER ORGANIZING
RIVERKEEPER, INC. 20 SECOR ROAD OSSINING, NY 10562	13-3204621	501(C)(3)	29,500.	0.			WATERKEEPER ORGANIZING
MIAMI WATERKEEPER 220 MIRACLE MILE STE 229 B CORAL GABLES, FL 33134	27-3627697	501(C)(3)	25,000.	0.			WATERKEEPER ORGANIZING
WINYAH RIVERS ALLIANCE 302 ALLIED DRIVE CONWAY, SC 29526	57-1118288	501(C)(3)	15,706.	0.			PURE FARMS PURE WATERS
SAN FRANCISCO BAYKEEPER 1736 FRANKLIN ST STE 800 OAKLAND, CA 94612	68-0120240	501(C)(3)	15,000.	0.			WATERKEEPER ORGANIZING
COASTAL CAROLINA RIVERWATCH 700 ARENDELL ST MOREHEAD CITY, NC 28557 2 Enter total number of section 501(c)(3) a	58-2198018		14,856.	0.			PURE FARMS PURE WATERS

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

Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) 2022

Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	T
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OUNTAINTRUE							
29 NORTH MARKET ST STE 610							
ASHEVILLE, NC 28801	56-1422691	501(C)(3)	14,810.	0.			PURE FARMS PURE WATERS
PATUXENT RIVERKEEPER							
17412 NOTTINGHAM RD							
UPPER MARLBORO, MD 20772	22-3878950	501(C)(3)	12,628.	200.			WATERKEEPER ORGANIZING
WHITE OAK-NEW RIVERKEEPER ALLIANCE							
PO BOX 358							
JACKSONVILLE, NC 28541	26-3319011	501(C)(3)	12,208.	0.			PURE FARMS PURE WATERS
YADKIN RIVERKEEPER							
308 N PATTERSON AVE				_			
WINSTON-SALEM, NC 27101	26-1874687	501(C)(3)	10,723.	0.			PURE FARMS PURE WATERS
CATAWBA RIVERKEEPER FOUNDATION INC							
421 MINUTE LANE STE 205							
CHARLOTTE, NC 28217	56-2034780	501(C)(3)	10,365.	0.			PURE FARMS PURE WATERS
	00 2001/00		25,555.				
CAPE FEAR RIVER WATCH							
617 SURREY ST							
WILMINGTON, NC 28401	58-2121884	501(C)(3)	7,644.	0.			PURE FARMS PURE WATERS
SOUND RIVERS							
PO BOX 1854	58-1475258	E01/G\/3\	7 240	0.			PURE FARMS PURE WATERS
WASHINGTON, NC 27889	36-14/3236	501(C)(3)	7,348.	0.			PURE FARMS PURE WATERS

45

SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

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

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

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization

Employer identification number WATERKEEPER ALLIANCE, INC. 13-4071318 Part I Questions Regarding Compensation

۔ فہ	Obselvible communicate has (se) if the approximation provided on set the Cilinate base from the Cilinate base (see		Yes	No
та	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 Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence Legith or conjugation and green up payments			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
D	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	46		
2	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,	2		
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	 _		
2	Indicate which if any of the following the organization used to establish the compensation of the expenization?			
3	Indicate which, if any, of the following the 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			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year did any naven listed on Form 200. Part VII. Section A line to with respect to the filing			
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:	4a		Х
	Receive a severance payment or change-of-control payment? Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		Х
b		4c		Х
·	Participate in or receive payment from an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Tes to any or lines 4a o, list the persons and provide the applicable amounts for each item in that in.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
-	contingent on the revenues of:			
а	The organization?	5a		х
	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:			
а	The organization?	6a		Х
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			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

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

Schedule J (Form 990) 2022

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.

		(B) Breakdown of W	I-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) MARC YAGGI	(i)	262,249.	0.	0.	0.	29,642.	291,891.	0.
CHIEF EXECUTIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MARY BETH POSTMAN	(i)	231,944.	0.	0.	0.	120.	232,064.	0.
DEPUTY DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) DANIEL ESTRIN	(i)	198,598.	0.	0.	0.	28,134.	226,732.	0.
GENERAL COUNSEL/ADVOCACY DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) RACHEL COOK	(i)	180,440.	0.	0.	0.	10,477.	190,917.	0.
CHIEF FINANCE & OPERATIONS OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) KATHRYN CECIL	(i)	144,456.	0.	0.	0.	18,951.	163,407.	0.
FMR DEVELOPMENT DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) KELLY HUNTER FOSTER	(i)	139,085.	0.	0.	0.	18,374.	157,459.	0.
SENIOR ATTORNEY	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) LORI HARRISON	(i)	129,088.	0.	0.	0.	28,134.	157,222.	0.
COMMUNICATIONS & MARKETING DIRECTOR	(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)							

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 O (Form 990)

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 Form 990-EZ.

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

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

WATERKEEPER ALLIANCE, INC.	13-4071318
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 6M SQUARE	
MILES OF WATERSHEDS IN THE AMERICAS, EUROPE, AUSTRALIA, ASIA AND	
AFRICA. PART SCIENTIST, TEACHER, AND LEGAL ADVOCATE, WATERKEEPERS	
COMBINE FIRSTHAND KNOWLEDGE OF THEIR WATERWAYS WITH AN UNWAVERING	
COMMITMENT TO THE RIGHTS OF THEIR COMMUNITIES AND TO THE RULE OF LAW.	
WHETHER ON THE WATER, IN A CLASSROOM, OR IN A COURTROOM, WATERKEEPERS	
SPEAK FOR THE WATERS THEY DEFEND - WITH THE BACKING OF THEIR LOCAL	
COMMUNITY AND THE COLLECTIVE STRENGTH OF WATERKEEPER ALLIANCE.	
WATERKEEPER ALLIANCE ENSURES THAT THE WORLD'S WATERKEEPERS ARE AS	
CONNECTED TO EACH OTHER AS THEY ARE TO THEIR LOCAL WATERS, ORGANIZING	
THE FIGHT FOR CLEAN WATER INTO A COORDINATED GLOBAL MOVEMENT AND	
PROVIDING A WAY FOR COMMUNITIES TO STAND UP FOR THEIR RIGHT TO CLEAN	
WATER AND FOR THE WISE AND EQUITABLE USE OF WATER RESOURCES, BOTH	
LOCALLY AND GLOBALLY. THE VISION OF THE WATERKEEPER MOVEMENT IS THAT WE	
ARE A GLOBAL MOVEMENT UNITED FOR CLEAN, HEALTHY, AND ABUNDANT WATER FOR	
ALL PEOPLE AND THE PLANET, OUR MISSION IS THAT WE PROTECT OUR RIGHT TO	
CLEAN WATER IN COMMUNITIES AROUND THE WORLD. AND WE BELIEVE: WATER IS	
LIFE; HEALTHY WATERSHEDS CONNECT AND SUSTAIN US ALL; CLEAN WATER IS A	
BASIC RIGHT FOR ALL LIVING BEINGS; WATERKEEPERS ARE GUARDIANS OF THIS	
RIGHT, FIERCELY DEFENDING, ENFORCING, AND PROMOTING JUST AND EQUITABLE	
CLEAN WATER LAWS; EACH WATERKEEPER HAS A UNIQUE VOICE, REFLECTING OUR	
DIVERSE COMMUNITIES AND WATERSHEDS; AS A MOVEMENT, WE ARE STRONG	

232211 10-28-22

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

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022

Name of the organization

Employer identification number

WATERKEEPER ALLIANCE, INC. 13-4071318

TOGETHER WHEN WE LIFT UP EACH OTHERS' VOICES AND THE VOICES OF THE

COMMUNITIES WE SERVE.

FORM 990, PART III, LINE 4A

WATERKEEPER ORGANIZING:

WATERKEEPER ALLIANCE CONNECTS OVER 300 (AND GROWING) INDIVIDUAL

WATERKEEPER GROUPS TO EACH OTHER AND SUPPORTS THEM BY PROVIDING

EXPERTISE IN SCIENCE, LAW, STRATEGIC PLANNING, AND COMMUNICATIONS, AND

INCREASING THEIR EFFECTIVENESS IN COURTROOMS, TOWN HALLS, CLASSROOMS,

AND IN THE MEDIA. AS A GLOBAL GRASSROOTS MOVEMENT, OUR CONFERENCES

SUMMITS, REGIONAL MEETINGS, AND COMMUNICATIONS PROVIDE INVALUABLE

OPPORTUNITIES FOR WATERKEEPER GROUPS TO NETWORK, LEARN FROM EACH

OTHER'S CHALLENGES AND SUCCESSES, INCREASE CAPACITY AND TECHNICAL

EXPERTISE, AND DRAW INSIGHTS AND INSPIRATION FROM WORLD-RENOWNED

SPEAKERS.

WATERKEEPER ALLIANCE PROVIDES WATERKEEPERS WITH A WEALTH OF RESOURCES

INCLUDING A TEAM OF EXPERTS IN ENVIRONMENTAL LAW COMMUNITY ORGANIZING,

COMMUNICATIONS, AND FUNDRAISING TO HELP THEIR ADVOCACY EFFORTS,

ORGANIZATIONAL MANAGEMENT, AND DEVELOPMENT SKILLS. WE ALSO PROVIDE

FISCAL SPONSORSHIP OPPORTUNITIES FOR OUR MEMBERS AFTER BEING VETTED.

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 WATER RESOURCE EXPERTS TO FURTHER ENHANCE AND STRENGTHEN THE

EFFECTIVENESS OF OUR MOVEMENT. BY WORKING TOGETHER, WATERKEEPER GROUPS

Schedule O (Form 990) 2022

Schedule O (Form 990) 2022 Page 2 Name of the organization **Employer identification number** WATERKEEPER ALLIANCE, INC. 13-4071318 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 WATERKEEPER GROUPS. 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 OUR TRADEMARK STANDARDS. FORM 990, PART III, LINE 4C GLOBAL CONFERENCE AND REGIONAL SUMMITS: REGIONAL MEETINGS AFFORD WATERKEEPER GROUPS THE OPPORTUNITY TO DEVELOP REGIONAL ADVOCACY STRATEGIES, SHARE RESOURCES, AND CONTINUE CAPACITY-BUILDING AND TECHNICAL LEARNING. FORM 990, PART III, LINE 4B PURE FARMS PURE WATERS CAMPAIGN: THE PURE FARMS. PURE WATERS CAMPAIGN ADDRESSES THE FAILURE TO REGULATE POLLUTION FROM INDUSTRIALIZED SWINE, POULTRY, AND DAIRY FACILITIES THAT IS DEVASTATING RIVERS, LAKES, AND ESTUARIES AND LOWERING QUALITY OF

LIFE IN OUR COMMUNITIES. WATERKEEPER ALLIANCE EDUCATES THE PUBLIC AND

DECISION-MAKERS ABOUT THE IMPACTS OF INDUSTRIALIZED LIVESTOCK

OPERATIONS, SUPPORTS COMMUNITIES AND LOCAL FARMERS, AND ADVOCATES FOR

SUSTAINABLE FOOD SYSTEMS. WE LOBBY STATE AND FEDERAL AUTHORITIES TO

STRENGTHEN AND ENFORCE EXISTING PROHIBITIONS ON THE DISCHARGE OF ANIMAL

<u>Schedule O (Form 990) 2022</u> Page **2**

Name of the organization **Employer identification number** WATERKEEPER ALLIANCE, INC. 13-4071318 WASTE INTO OUR WATERWAYS, SEEK TO HOLD CORPORATIONS THAT DICTATE FACILITY OPERATIONS ACCOUNTABLE FOR WASTE MANAGEMENT PRACTICES, PROMOTE SOUND POLICIES THAT PROTECT OUR WATERWAYS AND SUPPORT INDEPENDENT FARMERS AND TAKE LEGAL ACTION AGAINST THE MOST EGREGIOUS VIOLATORS. FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: (SEE SCHEDULE O): EXPENSES \$ 1.821.961. INCLUDING GRANTS OF \$ 305.528. 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 MEMBERS PRESENT OR BY PROXY. ANY MEMBER MAY APPOINT A PROXY TO VOTE FOR

<u>Schedule O (Form 990) 2022</u> Page **2**

Name of the organization **Employer identification number** WATERKEEPER ALLIANCE, INC. 13-4071318 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: THE MEMBERSHIP RATIFIES AMENDMENTS TO THE BYLAWS, ELECTS THE PRESIDENT, AND ELECTS REPRESENTATIVES TO THE WATERKEEPER COUNCIL. 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 CHIEF EXECUTIVE OFFICER IS REVIEWED ANNUALLY BY THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS, WITH INPUT FROM THE BOARD OF DIRECTORS. 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 FINANCIAL STATEMENTS AVAILABLE ON THEIR WEBSITE. ITS BY-LAWS, CONFLICT OF INTEREST POLICY AND GOVERNING DOCUMENTS ARE NOT MADE AVAILABLE TO THE PUBLIC.

<u>Schedule O (Form 990) 2022</u> Page **2**

Name of the organization **Employer identification number** WATERKEEPER ALLIANCE, INC. 13-4071318 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. FORM 990, PART III, LINE 4D ALL OTHER PROGRAMS: THE REMAINDER OF OUR PROGRAMS INCLUDES PROMOTING THE WATERKEEPER METHOD OF ADVOCACY AND ISSUES OF COMMON CONCERN TO WATERKEEPER GROUPS THROUGH DIGITAL COMMUNICATIONS, PRINT PUBLICATIONS, AND OTHER MEDIA; LICENSING NEW WATERKEEPER GROUPS; 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 PUBIC OUTREACH CAMPAIGNS TO INCREASE AWARENESS FOR THE WATERKEEPER MOVEMENT, THREATS TO CLEAN WATER, AND HEALTHY ECOSYSTEMS VIA OUR CLEAN WATER DEFENSE CAMPAIGN. A SIGNIFICANT AREA OF ADVOCACY IS

Schedule O (Form 990) 2022	Page 2
Name of the organization WATERKEEPER ALLIANCE, INC.	Employer identification number 13-4071318
WATERKEEPER ALLIANCE'S CLIMATE AND SAFE ENERGY CAMPAIGN. THE CAMPAIGN'S	
FOCUS IS TO COMBAT THE GLOBAL CLIMATE CRISIS AND ADVOCATE FOR A	
NO-CARBON FUTURE. WATERKEEPER ALLIANCE ENGAGES IN LOCAL, NATIONAL, AND	
INTERNATIONAL EFFORTS BUILT AROUND LEGAL ADVOCACY, GRASSROOTS	
MOBILIZATION, AND AGGRESSIVE MEDIA ATTENTION AND PUBLIC EDUCATION	
TOWARD A NO-CARBON FUTURE THAT UTILIZES CLEAN AND SAFE ENERGY.	

Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

Application for Automatic Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) print WATERKEEPER ALLIANCE, INC. 13-4071318 File by the Number, street, and room or suite no. If a P.O. box, see instructions. filing your 180 MAIDEN LANE, 603 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions. NEW YORK, NY 10038 Enter the Return Code for the return that this application is for (file a separate application for each return) **Application** Return **Application** Return Is For Code Is For Code Form 990 or Form 990-EZ Form 1041-A 01 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 Form 990-T (corporation) RACHEL COOK The books are in the care of ► 180 MAIDEN LANE, 603 - NEW YORK, NY 10038 Telephone No. ▶ 212-747-0622 Fax No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this If it is for part of the group, check this box MAY 15, 2024 I request an automatic 6-month extension of time until , to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year ► X tax year beginning JUL 1, 2022 JUN 30, 2023 , and ending Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions

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

Form 8868 (Rev. 1-2022)