

Return of Organization Exempt From Income Tax

Form **990**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
 Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.

2022

Open to Public Inspection

A For the **2022** calendar year, or tax year beginning **JUL 1, 2022** and ending **JUN 30, 2023**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization WATERKEEPER ALLIANCE, INC. Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 180 MAIDEN LANE 603 City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY 10038 F Name and address of principal officer: MARC YAGGI SAME AS C ABOVE	D Employer identification number 13-4071318 E Telephone number 212-747-0622 G Gross receipts \$ 9,745,859. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		
J Website: WWW.WATERKEEPER.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1999
		M State of legal domicile: NY

Part I Summary

	1 Briefly describe the organization's mission or most significant activities: TO PROTECT OUR RIGHT TO CLEAN WATER IN COMMUNITIES AROUND THE WORLD.			
Activities & Governance	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3 Number of voting members of the governing body (Part VI, line 1a)	3		13
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4		13
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5		0
	6 Total number of volunteers (estimate if necessary)	6		13
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a		0.
	b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b		0.
Revenue			Prior Year	Current Year
	8 Contributions and grants (Part VIII, line 1h)		14,838,980.	8,742,551.
	9 Program service revenue (Part VIII, line 2g)		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 5, 6d, 8c, 9c, 10c, and 11e)		243,994.	24,036.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		15,198,182.	8,822,541.
Expenses				
	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), line 4)		0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		3,574,752.	3,318,295.
	16a Professional fundraising fees (Part IX, column (A), line 11e)		66,000.	78,000.
	b Total fundraising expenses (Part IX, column (D), line 25) 750,836.			
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-11g)		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.
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20 Total assets (Part X, line 16)		4,821,210.	9,064,151.
	21 Total liabilities (Part X, line 26)		2,558,272.	4,844,192.
	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.

Sign Here	Signature of officer	Date
	Type or print name and title	
Paid Preparer Use Only	Print/Type preparer's name ALEXANDER LAZZARUOLO	Preparer's signature <i>Alexander Lazzaruolo</i>
	Firm's name CONDON O'MEARA MCGINTY & DONNELLY LLP	Date 5/14/2024
	Firm's address ONE BATTERY PARK PLAZA, 7TH FL. NEW YORK, NY 10004	Check if self-employed <input type="checkbox"/> PTIN P01775353
		Firm's EIN 13-3628255
		Phone no. 212-661-7777

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part III Statement of Program Service Accomplishments

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

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

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

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 2,677,302. including grants of \$ 936,792.) (Revenue \$ 63,788.) WATERKEEPER ORGANIZING (SEE SCHEDULE O):

4b (Code:) (Expenses \$ 624,507. including grants of \$ 42,731.) (Revenue \$) GLOBAL CONFERENCE AND REGIONAL SUMMITS (SEE SCHEDULE O):

4c (Code:) (Expenses \$ 526,616. including grants of \$ 101,414.) (Revenue \$) PURE FARMS PURE WATERS CAMPAIGN (SEE SCHEDULE O):

4d Other program services (Describe on Schedule O.) (Expenses \$ 1,821,961. including grants of \$ 305,528.) (Revenue \$)

4e Total program service expenses 5,650,386.

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
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? <i>If "Yes," complete Schedule D, Part VII</i>		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? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	X	
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		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? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 22-38 covering various organizational requirements.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question ID, Question Text, Yes, No. Rows 1a-1c regarding Form 1096 and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee reporting, tax returns, gross income, foreign accounts, prohibited transactions, and charitable contributions.

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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 13; 1b Enter the number of voting members included on line 1a... 13; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders? X; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a The governing body? X; 8b Each committee with authority to act on behalf of the governing body? X; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O X

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

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

Section C. Disclosure

- 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 only) available 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 financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
RACHEL COOK - 212-747-0622
180 MAIDEN LANE, 603, NEW YORK, NY 10038

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-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MARC YAGGI CHIEF EXECUTIVE OFFICER	40.00			X			262,249.	0.	29,642.	
(2) MARY BETH POSTMAN DEPUTY DIRECTOR	50.00				X		231,944.	0.	120.	
(3) DANIEL ESTRIN GENERAL COUNSEL/ADVOCACY DIRECTOR	40.00				X		198,598.	0.	28,134.	
(4) RACHEL COOK CHIEF FINANCE & OPERATIONS OFFICER	40.00				X		180,440.	0.	10,477.	
(5) KATHRYN CECIL FMR DEVELOPMENT DIRECTOR	40.00					X	144,456.	0.	18,951.	
(6) KELLY HUNTER FOSTER SENIOR ATTORNEY	40.00					X	139,085.	0.	18,374.	
(7) LORI HARRISON COMMUNICATIONS & MARKETING DIRECTOR	40.00					X	129,088.	0.	28,134.	
(8) CHRIS WILKE GLOBAL ADVOCACY MANAGER	40.00					X	112,948.	0.	18,951.	
(9) KATHERINE LUSCHER TRAINING DIRECTOR	40.00					X	106,123.	0.	10,477.	
(10) GLENN RINK CHAIR	3.00	X		X			0.	0.	0.	
(11) GLORIA REUBEN PRESIDENT	3.00	X		X			0.	0.	0.	
(12) YVONNE ZAPPULLA TREASURER	3.00	X		X			0.	0.	0.	
(13) BRUCE REZNIK SECRETARY	3.00	X		X			0.	0.	0.	
(14) TONYA BONITATIBUS DIRECTOR	3.00	X					0.	0.	0.	
(15) BRUNO MONTEFERRI DIRECTOR	3.00	X					0.	0.	0.	
(16) KRISTEN MOORE DIRECTOR	3.00	X					0.	0.	0.	
(17) CHERYL NENN DIRECTOR	3.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) BETSY NICHOLAS DIRECTOR	3.00	X						0.	0.	0.
(19) THEO THOMAS DIRECTOR	3.00	X						0.	0.	0.
(20) LAURA TURNER SEYDEL DIRECTOR	3.00	X						0.	0.	0.
(21) LESSING STERN DIRECTOR	3.00	X						0.	0.	0.
(22) KENT WEED DIRECTOR	3.00	X						0.	0.	0.
1b Subtotal								1,504,931.	0.	163,260.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,504,931.	0.	163,260.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 9

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)		
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514		
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a						
	b Membership dues	1b						
	c Fundraising events	1c	120,480.					
	d Related organizations	1d						
	e Government grants (contributions)	1e						
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	8,622,071.					
	g Noncash contributions included in lines 1a-1f	1g	\$ 15,235.					
	h Total. Add lines 1a-1f		8,742,551.					
Program Service Revenue	2 a _____	Business Code						
	b _____							
	c _____							
	d _____							
	e _____							
	f All other program service revenue							
	g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		47,872.			47,872.		
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6 a Gross rents	6a	(i) Real					
			(ii) Personal					
			b Less: rental expenses ...	6b				
			c Rental income or (loss)	6c				
	d Net rental income or (loss)							
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	774,900.				
			(ii) Other					
			b Less: cost or other basis and sales expenses	7b	766,818.			
			c Gain or (loss)	7c	8,082.			
	d Net gain or (loss)		8,082.			8,082.		
	8 a Gross income from fundraising events (not including \$ 120,480. of contributions reported on line 1c). See Part IV, line 18	8a		116,748.				
			b Less: direct expenses	8b	156,500.			
c Net income or (loss) from fundraising events		-39,752.			-39,752.			
9 a Gross income from gaming activities. See Part IV, line 19	9a							
		b Less: direct expenses	9b					
c Net income or (loss) from gaming activities								
10 a Gross sales of inventory, less returns and allowances	10a							
		b Less: cost of goods sold	10b					
		c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a LICENSING FEES & OTHER REVENUE	Business Code	900099	63,788.	63,788.			
	b _____							
	c _____							
	d All other revenue							
	e Total. Add lines 11a-11d		63,788.					
12 Total revenue. See instructions		8,822,541.	63,788.	0.	16,202.			

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	292,922.	292,922.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	1,093,543.	1,093,543.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	981,730.	780,141.	112,119.	89,470.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,674,813.	1,330,945.	191,251.	152,617.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	661,752.	525,831.	75,596.	60,325.
10 Payroll taxes				
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	13,400.	10,680.	1,548.	1,172.
d Lobbying	21,686.	21,686.		
e Professional fundraising services. See Part IV, line 17	78,000.			78,000.
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.
12 Advertising and promotion				
13 Office expenses	140,612.	106,293.	16,010.	18,309.
14 Information technology				
15 Royalties				
16 Occupancy	520,464.	410,431.	62,609.	47,424.
17 Travel	67,830.	54,062.	9,083.	4,685.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	21,419.		21,419.	
23 Insurance	32,961.	26,270.	3,807.	2,884.
24 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 O.)				
a EDUCATIONAL / OUTREACH	707,048.	457,126.	2,200.	247,722.
b WKA SUPPORT	283,656.	283,656.		
c LITIGATION / REGULATION	52,342.	50,356.		1,986.
d STAFF DEVELOPMENT	1,512.	1,205.	175.	132.
e All other expenses	24.			24.
25 Total functional expenses. Add lines 1 through 24e	6,915,327.	5,650,386.	514,105.	750,836.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	694,688.	347,725.	0.	346,963.

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	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 current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	124,327.	9	97,097.
	10a Land, buildings, and equipment: cost or other 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, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	235,340.	15	4,238,798.
16 Total assets. Add lines 1 through 15 (must equal line 33)	4,821,210.	16	9,064,151.	
Liabilities	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 Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	433,092.	25	4,410,364.
	26 Total liabilities. Add lines 17 through 25	2,558,272.	26	4,844,192.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	942,119.	27	1,687,135.
	28 Net assets with donor restrictions	1,320,819.	28	2,532,824.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	2,262,938.	32	4,219,959.
	33 Total liabilities and net assets/fund balances	4,821,210.	33	9,064,151.

Form 990 (2022)

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	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.

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits

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

Form **990** (2022)

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.)

Section A. Public Support

Calendar 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 organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	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.

Section B. Total Support

Calendar 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 instructions)					12	
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	47.08	%
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	44.24	%
16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

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

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

Section A. Public Support

Table with 7 columns: (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total. Add lines 1 through 5; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support. (Subtract line 7c from line 6.)

Section B. Total Support

Table with 7 columns: (a) 2018, (b) 2019, (c) 2020, (d) 2021, (e) 2022, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 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 organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

Table with 2 columns: Description, Percentage. Row 15: Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2021 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Description, Percentage. Row 17: Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2021 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked 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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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? Row 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?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 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)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Row 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? Row 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?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (<i>explain in detail in Part VI</i>):		
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	

Section 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - <i>explain in Part VI</i>). 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			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c 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, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 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

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

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 organization WATERKEEPER ALLIANCE, INC.	Employer identification number 13-4071318
---	---

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures \$ _____
- 3 Volunteer hours for political campaign activities _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990) 2022

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

- A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)	18,927.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)	2,759.													
c Total lobbying expenditures (add lines 1a and 1b)	21,686.													
d Other exempt purpose expenditures	6,893,641.													
e Total exempt purpose expenditures (add lines 1c and 1d)	6,915,327.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	495,766.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)	123,942.													
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 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)).

Table with 3 main columns: (a) Yes, (a) No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation...; 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members?; 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?; 3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

Table with 2 main columns: Question, Amount. Rows include: 1 Dues, assessments and similar amounts from members; 2 Section 162(e) nondeductible lobbying and political expenditures; 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues; 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?; 5 Taxable amount of lobbying and political expenditures.

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Blank lines for providing supplemental information as required by the instructions.

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

2022

Open to Public Inspection

Name of the organization: WATERKEEPER ALLIANCE, INC. Employer identification number: 13-4071318

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two Yes/No questions regarding donor property and grant fund usage.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose(s) of conservation easements, a table for lines 2a-2d (Total number, acreage, certified historic structures, acquired after 2006), and questions 3-9 regarding monitoring, expenses, and reporting.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions 1a, 1b, 2, and 3 regarding reporting of art and historical treasures.

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

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

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,320,819.	2,023,045.	2,480,349.	2,638,829.	4,665,585.
b Contributions	3,509,478.	10,643,425.	4,956,388.	14,588,082.	12,697,610.
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs	2,297,473.	11,345,651.	5,413,692.	14,746,562.	14,724,366.
f Administrative expenses					
g End of year balance	2,532,824.	1,320,819.	2,023,045.	2,480,349.	2,638,829.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____%
 - b Permanent endowment 3.9480%
 - c Term endowment 96.0520%
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|----|
| (i) Unrelated organizations | | X |
| (ii) Related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		9,493.	6,961.	2,532.
d Equipment		465,750.	453,465.	12,285.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				14,817.

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)		
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 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (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.

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	
(2) OPERATING LEASE PAYABLES	4,410,364.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	4,410,364.

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 ...

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

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

1	Total revenue, gains, and other support per audited financial statements	1	9,022,525.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	49,807.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	156,500.
e	Add lines 2a through 2d	2e	206,307.
3	Subtract line 2e from line 1	3	8,816,218.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	6,323.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	6,323.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	8,822,541.

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

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

1	Total expenses and losses per audited financial statements	1	7,065,504.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	156,500.
e	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:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	6,323.
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	6,323.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	6,915,327.

Part XIII Supplemental Information.

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

PART V, LINE 4:

TEMPORARILY RESTRICTED

THE TEMPORARILY RESTRICTED NET ASSETS REPRESENT CONTRIBUTIONS AND GRANTS

THAT ARE RESTRICTED BY THE DONOR FOR A SPECIFIC PURPOSE OR PERTAIN TO

FUTURE PERIODS (TIMING). ONCE THAT SPECIFIC PURPOSE HAS BEEN MET OR THE

TIME RESTRICTION EXPIRES, THE FUNDS ARE RELEASED AND REFLECTED AS NET

ASSETS RELEASED FROM RESTRICTIONS. THE FUNDS PURPOSE ARE TO FURTHER THE

WATERKEEPER ALLIANCE, INC.'S MISSION.

PERMANENTLY RESTRICTED

PERMANENTLY RESTRICTED NET ASSETS ARE SUBJECT TO DONOR-IMPOSED

RESTRICTIONS WHOSE CONTRIBUTIONS MUST BE MAINTAINED IN PERPETUITY BY THE

Part XIII Supplemental Information (continued)

ALLIANCE. DONORS OF THESE ASSETS PERMIT THE ALLIANCE TO USE ALL OR PART OF

THE RETURN EARNED ON RELATED INVESTMENTS FOR GENERAL OR SPECIFIC PURPOSES.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

DIRECT FUNDRAISING EXPENSE 156,500.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

DIRECT FUNDRAISING EXPENSE 156,500.

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

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

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

3 Enter total number of other organizations or entities ▶ _____

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

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

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

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

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.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events NONE	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	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.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs	156,500.			156,500.
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				156,500.
11 Net income summary. Subtract line 10 from line 3, column (d)				-39,752.	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7 Direct expense summary. Add lines 2 through 5 in column (d)					
8 Net gaming income summary. Subtract line 7 from line 1, column (d)					

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 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? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____
- c If "Yes," enter name and address of the third party:

Name _____

Address _____

16 Gaming manager information:

Name _____

Gaming manager compensation \$ _____

Description of services provided _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: ROBBINS KIRSTEN DIRECT

(I) ADDRESS OF FUNDRAISER: 35 PARKWOOD DRIVE, STE 160, HOPKINTON, MA 01748

**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 ALLIANCE, INC.** Employer identification number **13-4071318**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of 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	58-2198018	501(C)(3)	14,856.	0.			PURE FARMS PURE WATERS

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **14.**
- 3** Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2022

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

(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
MOUNTAINTRUE 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
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 WASHINGTON, NC 27889	58-1475258	501(C)(3)	7,348.	0.			PURE FARMS PURE WATERS

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

PART I, LINE 2:

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 J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

WATERKEEPER ALLIANCE, INC.

Employer identification number

13-4071318

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

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.

- | | |
|--|---|
| <input type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** 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.

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:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- 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

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

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a		
1b		
2		
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
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.

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

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

WATERKEEPER ALLIANCE, INC.

Employer identification number

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

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

Schedule O (Form 990) 2022

232211 10-28-22

Name of the organization WATERKEEPER ALLIANCE, INC.	Employer identification number 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

Name of the organization WATERKEEPER ALLIANCE, INC.	Employer identification number 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

Name of the organization WATERKEEPER ALLIANCE, INC.	Employer identification number 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

Name of the organization WATERKEEPER ALLIANCE, INC.	Employer identification number 13-4071318
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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.

Name of the organization WATERKEEPER ALLIANCE, INC.	Employer identification number 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

Name of the organization WATERKEEPER ALLIANCE, INC.	Employer identification number 13-4071318
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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.

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

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

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 print	Name of exempt organization or other filer, see instructions. WATERKEEPER ALLIANCE, INC.	Taxpayer identification number (TIN) 13-4071318
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 180 MAIDEN LANE, 603	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. NEW YORK, NY 10038	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

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 box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until MAY 15, 2024 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year _____ or
- ▶ tax year beginning JUL 1, 2022 , and ending JUN 30, 2023 .

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

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

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.