DLN: 93493320097732

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Open to Public Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service A For the 2011 calendar year, or tax year beginning 01-01-2011 and ending 12-31-2011 D Employer identification number Name of organization CLEAN UP THE RIVER ENVIRONMENT B Check if applicable 31-1693392 Address change Doing Business As E Telephone number (320) 269-2984 Initial return Number and street (or P O box if mail is not delivered to street address) Room/suite 117 SOUTH FIRST ST G Gross receipts \$ 137,085 Terminated City or town, state or country, and ZIP + 4 MONTEVIDEO, MN 56265 Amended return Application pending Name and address of principal officer $\mathbf{H}(\mathbf{a})$ Is this a group return for PATRICK MOORE ∀es V No affiliates? 117 SOUTH 1ST ST MONTEVIDEO, MN 56265 H(b) Are all affiliates included? ┌ Yes ┌ No If "No," attach a list (see instructions) Tax-exempt status Group exemption number 🕨 Website: ► WWW CUREMNRIVER ORG L Year of formation 1992 ${f M}$ State of legal domicile Part I Summary 1 Briefly describe the organization's mission or most significant activities TO FOCUS PUBLIC AWARENESS ON THE UPPER MINNESOTA RIVER AND TO TAKE ACTION TO RESTORE THIS AREA OF THE RIVER'S WATER QUALITY, BIOLOGICAL INTEGRITY AND NATURAL BEAUTY FOR THE BENEFIT OF ALI Activities & Governance 2 Check this box 🔭 if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) . . . 16 4 16 f 4 Number of independent voting members of the governing body (Part VI, line 1b) . 5 4 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) . **6** Total number of volunteers (estimate if necessary) . 6 100 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0 b Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) . 318,846 106,000 28,582 Program service revenue (Part VIII, line 2g) . 10,077 241 169 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 1,269 1,581 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 330,433 136,332 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . 280 1,905 14 Benefits paid to or for members (Part IX, column (A), line 4) . 0 Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 Expenses 106.597 76,864 5 - 10)16a Professional fundraising fees (Part IX, column (A), line 11e) . . . 0 b Total fundraising expenses (Part IX, column (D), line 25) ►22,794 **17** Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . 56,898 110,826 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 163,775 189,595 19 Revenue less expenses Subtract line 18 from line 12 . 166,658 -53,263 Net Assets or land Balances **Beginning of Current End of Year** Year 324,907 501,628 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) 46.362 276.342

Net assets or fund balances Subtract line 21 from line 20 Part II Signature Block

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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.

	*****	20	2012-11-14		
Sign	Signature of officer	Da	te		
lere	DIXIE TILDEN SECRETARY Type or print name and title				
aid aid	Preparer's signature JAMES B KNUTSON	Date 2012-11-14	Check if self-employed	Preparer's taxpayer identification number (see instructions)	
reparer's se Only	Firm's name (or yours of self-employed), address, and ZIP + 4	EIN ▶			
	MONTEVIDEO, MN 56265	Phone no 🕨 (320) 269-2146			

278.545

225.286

-	(Expenses \$	109,642 includ	ding grants of \$	1,905) (Revenue \$	15,989)
_		100 642	d	1 005) (Daviania #	1 5 0 0 0 1
d		vices (Describe in Sched	•		
	MINNESOTA RIVER				
	(Code OTHER ACTIVITIES TO) (Expenses \$ FUNCTION AS A CATALYST AND	109,642 including grants COORDINATOR OF CITIZEN ACT	of \$ 1,905) (Revenue \$, ,
:	(Code) (Expenses \$	ıncludıng grants c	if \$) (Revenue \$)
	(0.1.	\ (F		() (D)	
•	(Code ANNUAL MEETING - SP) (Expenses \$ RING MEMBERS MEETING TO E	8,765 including grants LECT NEW DIRECTORS/REPORT (of \$) (Revenue \$ ON PROGRESS/SOCIAL GATHERING	12,233)
	RIVERS & HISTORY WE	EKEND - APPROXIMATELY 80 C	ANOES IN ONE WEEKEND ON LOC	CAL RIVERS FOR THIS YEARLY EVENT	
1	(Code) (Expenses \$	1,303 including grants		360)
	expenses Section 5	501(c)(3) and 501(c)(4) o	organizations and section 4	of its three largest program service 947(a)(1) trusts are required to refor each program service reported	port the amount of
	If "Yes," describe th	ese changes on Schedule	e O		
			ke significant changes in ho	ow it conducts, any program	┌ Yes ┌ No
	If "Yes," describe th	ese new services on Sch	edule O		
	_	undertake any significan or 990-EZ?		he year which were not listed on	┌ Yes ┌ No
<u>/ E</u>	R'S WATER QUALIT	Y, BIOLOGICAL INTEG	RITY AND NATURAL BEAU	ITY FOR THE BENEFIT OF ALL	
	OCUS PUBLIC AWA	RENESS ON THE UPPER	MINNESOTA RIVER AND	TO TAKE ACTION TO RESTORE	THIS AREA OF THE
	•	-			

Part IV Checklist of Required Schedules	Part IV	Checklist of	Required	Schedules
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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If</i> "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I^{\bullet}	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		N o
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
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)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II and IV.	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
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</i> "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		Νo
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20b		

1 01111	990 (2011)			Page •
Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If</i> "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			i
		28a		Νo
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Νo
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		Νo
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line $2 \cdot \cdot \cdot$.	35b		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Form 990 (2011)

Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V \cdot . \cdot . \cdot . $$. [
			Yes	No
-	Enter the number reported in Box 2 of Form 1006 Enter 10 if not applicable			.,,,
.d	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1			
		}		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b			
		1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1_	Yes	
	gaming (gambling) winnings to prize winners?	1c	res	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements filed for the calendar year ending with or within the year covered by this return	Ì		
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
U	That least one is reported on line 2a, did the organization me an required lederal employment tax returns.	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
	Did the organization have unrelated business gross income of \$1,000 or more during the			
la	year?	За		No
h	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
а	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities			
	account)?	4a		No
b	·			
_	If "Yes," enter the name of the foreign country ►	•		
	See madiactions for iming requirements for Form 1D F 30-22 1, Report of Foreign Bank and Financial Accounts	Ì		
	We a the communication a marky to a much higher heavy aboliton to make a mark to make the communication of the com			N. a
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	1	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	<u></u>	Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
ia	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νo
	organization solicit any contributions that were not tax deductible?			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
,	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		No
	services provided to the payor?			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7 c		Νo
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d]		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit	_		
	contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	 		
	Form 1098-C?	7h		
}	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did	Ì		
	the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	_		
		8		
1	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a	<u>L</u>	L_
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a	Ì		
		1		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	-		
_		Ì		
1	Section 501(c)(12) organizations. Enter	Ì		
а	Gross income from members or shareholders]		
b	Gross income from other sources (Do not net amounts due or paid to other	Ì		
	sources against amounts due or received from them)			
2-	Section 4947(a)(1) non-evernt charitable truete. Is the erganization filing Form 000 in liquid Form 10413	12a		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the	Ì		
2	year	1		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?			
	Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization			
	allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by		i	<u> </u>
	the states in which the organization is licensed to issue qualified health plans	Ì		
С	Enter the aggregate amount of reserves on hand	1		
-	13c			
.4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Ves " has it filed a Form 730 to report these payments? If "No " provide an explanation in Schedule O	4.41	 	

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

Se	ction A. Governing Body and Management			
	<u> </u>		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No.
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Yes	
	or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
	ction B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)			
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		No
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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?		, 03	
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
	Other officers or key employees of the organization	15a	165	No
U	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)	130		110
	Thes, to fine 15a of 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Se	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed►MN			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available.			
19	Own website Another's website Upon request Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	e orga	nızatıor	n ▶ -

MONTEVIDEO, MN 56265 (320) 269-2984

DIXIE TILDEN 117 SOUTH FIRST ST 117 SOUTH FIRST ST

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

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, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations

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

◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

(A) Name and Title	(B) A verage hours per week (describe	director/trustee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and				
	O) ustee		Officei	Key employee	Highest compensated employee	Former		MISC)	related organizations	
(1) JENNIFER HOFFMAN DIRECTOR	1 00	Х						0	0	0
(2) JOSH PRESTON CHAIRMAN	1 00	х		Х				0	0	0
(3) RACHEL RIGENHAGEN DIRECTOR	1 00	х						0	0	0
(4) TIM EHLING DIRECTOR	1 00	х						0	0	0
(5) DAN KURKIEWICZ DIRECTOR	1 00	х						0	0	0
(6) MARTIN MOORE DIRECTOR	1 00	х						0	0	0
(7) KEVIN WULF DIRECTOR	1 00	х						0	0	0
(8) SCOTT TEDRICK CO-CHAIRMAN	1 00	х		Х				0	0	0
(9) JIANHUA QIAN DIRECTOR	1 00	х						0	0	0
(10) DENNIS ULRICH TREASURER	1 00	Х		Х				0	0	0
(11) TROY GOODNOUGH DIRECTOR	1 00	х						0	0	0
(12) TOM WATSON DIRECTOR	1 00	х						0	0	0
(13) COLLIN CHRISTIANS DIRECTOR	1 00	х						0	0	0
(14) SHELLEY ELKINGTON DIRECTOR	1 00	х						0	0	0
(15) MARVIN BOIKE DIRECTOR	1 00	х						0	0	0
(16) TOM PAULING DIRECTOR	1 00	х						0	0	0
(17) PATRICK MOORE EXEC DIR	40 00			Х				40,000	0	6,080

\$100,000 of compensation from the organization \blacktriangleright

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

	(A) Name and Title	(B) Average hours per week (describe hours	more unles an	(C) Position (do not check more than one box, nless person is both an officer and a director/trustee) (D) Reportable compensation from the organization (W-2/1099-MISC) (E) Reportable compensation from related organizations (W-2/1099-MISC)						'	(F) Estimated amount of other compensation from the organization and related			
		for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former		11130)		organiza		
	DIXIE TILDEN ETARY	40 00			х				20,000		0		3,000	
SLCK	LIAKI										+			
											+			
						_					-			
						-					+			
											+			
1b	Sub-Total							<u> </u> ►-			<u> </u>			
C	Total from continuation sheets	to Part VII. Sec	tion A		•	•		<u>-</u>						
d	Total (add lines 1b and 1c) .							 	60,000				9,080	
2	Total number of individuals (incli \$100,000 of reportable compens					ted	above) who	received more tha	ın				
										_		Yes	No	
3	Did the organization list any forr on line 1a? <i>If</i> "Yes," complete Sch					ey e	mploy	ee, c	or highest compens	ated employee				
4	For any individual listed on line 1 organization and related organization	la, is the sum of	report	able	omi						3		No_	
				•	•			•			4		No	
5	Did any person listed on line 1a services rendered to the organiz						-		_		5		No	
Se	ection B. Independent Con	tractors												
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	highest comper the organizatio												
	Nan	(A) ne and business add	Iress						Desc	(B) ription of services		(C) Compen		
											Ŧ			
											\pm			
											1			
	Total number of independent conti	ra atawa (maludu		مدا ده		1 + - 1	.	liata	d = h = v = \ v = h = m = = v =	rad mara than	-			

Form 99		•						Page 9
Part \	<u>/##1</u>	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
##	1a	Federated cam	paigns 1a	·				
Contributions, gifts, grants and other similar amounts	ь	Membership du	es 1b	4,549				
S,G	c	Fundraising eve	ents 1c					
#E #	d	Related organiz	ations 1d					
<u>2</u>	e	Government grants	s (contributions) 1e					
tior si	f	All other contribution	ons, gifts, grants, and 1f	101,451		İ		İ
ē Ž	g		butions included in					
늍								
ပွဲမှ	h	Total. Add lines	s 1a-1f	· · · •	106,000			
				Business Code				
Program Service Revenue	2a	CONTRACTED SER	VICES	900099	16,269	16,269		
₽e	b	ANNUAL BANQUET		900099	12,233	12,233		
9,0	c	EVENTS		900099	80	80		
er E	d	_	_					
ج د	e							
Grag	f	All other progra	am service revenue					
Š	g	Total Add lines	s 2a-2f		28,582			
	3		ome (including dividen		20,302			
			ar amounts)	_	169			169
	4		stment of tax-exempt bond	⊢				
	5	Royalties		• [
			(ı) Real	(II) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	c	Rental income						
	d	or (loss) Net rental incoi	L me or (loss)	<u> </u>				
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other						
	ь	than inventory Less cost or other basis and sales expenses						
	c	Gain or (loss)						
	d	Net gain or (los	s)	▶				
nne	8a	Gross income f events (not inc \$	luding					
Other Revenue		of contributions See Part IV, lin	s reported on line 1c) ie 18 a					
the	ь		penses b					
0	C		(loss) from fundraising	events 🟲				
	9a	Gross income f See Part IV, lin	rom gaming activities ie 19 a	2,009				
	ь	Less direct ex	penses b	·				
	c		(loss) from gamıng actı		1,399			1,399
	10a	Gross sales of returns and allo		325				
	ь	Less cost of a	oods sold b	143				
	c		(loss) from sales of inv		182			182
		Miscellaneous		Business Code				
	11a							
	ь							
	С							
	d	All other reven	ue					
	e	Total. Add lines	s 11a-11d					
				· .				
	12	Total revenue.	See Instructions .	· · •	136,332	28,582		1,750

136,332

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) but are not required to complete columns (B), (C), and (D)
Check if Schedule O contains a response to any question in this Part IX

	heck if Schedule O contains a response to any question in this Part IX	<u></u>		<u> </u>	
	ot include amounts reported on lines 6b, o, 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 governments and organizations in the United States See Part IV, line 21	1,905	1,905		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	60,000	24,000	24,000	12,000
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	2,591	1,037	1,036	518
8	Pension plan contributions (include section $401(k)$ and section $403(b)$ employer contributions)	3,000	1,200	1,200	600
9	Other employee benefits	6,080	2,432	2,432	1,216
10	Payroll taxes	5,193	2,077	2,077	1,039
11	Fees for services (non-employees)				
а	Management				
b	Legal				
C	Accounting	1,482		1,482	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other	37,660	37,660		
12	Advertising and promotion	1,928	1,542		386
13	Office expenses	14,849	11,601	2,718	530
14	Information technology				
15	Royalties				
16	Occupancy	6,854	2,742	2,742	1,370
17	Travel	11,847	9,478		2,369
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	1,576	1,576		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,280	1,711	569	
23	Insurance	984		984	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
а	ENTERTAINMENT/SPEAKER FEE	11,857	11,857		
b	SUPPLIES	6,366	2,547	2,546	1,273
c	COMMUNICATION	3,663	2,930		733
d	MISCELLANEOUS	3,409	2,727		682
e					
f	All other expenses	6,071	688	5,305	78
25	Total functional expenses. Add lines 1 through 24f	189,595	119,710	47,091	22,794
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X **Balance Sheet** (A) (B) Beginning of year End of year 108,564 276,882 Cash—non-interest-bearing 1 8.221 5.262 2 2 Savings and temporary cash investments 3 3 4.000 4 Accounts receivable, net . 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 6 7 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 9 236.576 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10b 17,781 b Less accumulated depreciation 203,391 10c 218,795 668 689 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 15 15 324,907 16 16 501,628 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 17 17 Accounts payable and accrued expenses 18 18 19 45,000 19 275,000 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L \ldots . \ldots . \ldots 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 1,362 25 1,342 D 26 46,362 26 276,342 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 278,545 27 225,286 Unrestricted net assets 28 28 Temporarily restricted net assets Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 278.545 33 225.286 34 Total liabilities and net assets/fund balances 324.907 501.628 34

	Check if Schedule O contains a response to any question in this Part XI			. [고	
1	Total revenue (must equal Part VIII, column (A), line 12)	1			136,33
2	Total expenses (must equal Part IX, column (A), line 25)	2			189,59
3	Revenue less expenses Subtract line 2 from line 1	3			-53,26
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) \cdot .	4		2	278,54
5	Other changes in net assets or fund balances (explain in Schedule O)	5			
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, co (B))	olumn 6			225,28
Par	Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			୮	1
1	Accounting method used to prepare the Form 990	n		Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b		No
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversi 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, ex Schedule O	5	2c		
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year on a separate basis, consolidated basis, or both	were issued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set fort Single Audit Act and OMB Circular A-133?	h in the •	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	o the required	3b		

Employer identification number

OMB No 1545-0047

JMB NO 1545-004

2011

Open to Public Inspection

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

h

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

Public Charity Status and Public Support

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Name of the organization CLEAN UP THE RIVER ENVIRONMENT

Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety Seesection 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h c Type III - Functionally integrated Type III - Other Type I **b** Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizat col (i) list your gove docume	e Ion In ted In IrnIng	(v) Did you not organizat col (i) of suppor	ion in your	(vi) Is the organizat col (i) org	e Ion In anized	(vii) A mount of support?
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

Provide the following information about the supported organization(s)

instructions

Sch	edule A (Form 990 or 99	90-EZ)2011						Page 2
	(Complet	e only if you	checked the	box on line 5,	7, or 8 of Part	(b)(1)(A)(iv) I or if the orgar	nızatıon faıle	d to qualify
			<u>organızatıon f</u>	fails to qualify ι	<u>under the tests</u>	listed below, pl	<u>lease comple</u>	ete Part III.)
	ection A. Public Su					Т	1	
Cal	endar year (or fiscal ye in)	ar beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contribut	ions, and						
	membership fees recei							
	ınclude any "unusual							
_	grants ") Tax revenues levied fo	rtho						
2	organization's benefit a							
	paid to or expended on							
	behalf							
3	The value of services of							
	furnished by a governme the organization withou							
4	Total. Add lines 1 thro	_						
5	The portion of total cor	-						
-	by each person (other	than a						
	governmental unit or p	•						
	supported organization line 1 that exceeds 2%							
	amount shown on line 1							
	(f)	21,0014						
6	Public Support. Subtractine 4	ct line 5 from						
S	ection B. Total Sup	port						
Cal	endar year (or fiscal yea	r beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
_	ın)	_	(4) 2007	(2) 2000	(4) 2005	(4) 2020	(0) 2022	(1) 1 3 4 4
7 8	A mounts from line 4 Gross income from inte	rost –						
0	dividends, payments re							
	securities loans, rents							
	and income from simila	ır						
_	sources							
9	Net income from unrela business activities, wh							
	not the business is reg							
	carried on							
10	Other income (Explain							
	IV) Do not include gai from the sale of capital							
11	Total support (Add line							
	through 10)							
12	Gross receipts from re	lated activities	s, etc (See inst	ructions)			12	
13	First Five Years If the		r the organizati	on's first, second	l, thırd, fourth, or	fıfth tax year as a	501(c)(3) or	
	check this box and sto	p here						▶ □
S	ection C. Computat	ion of Publ	ic Support F	Percentage				
14	Public Support Percen	tage for 2011	(line 6 column	(f) dıvıded by lıne	11 column (f))		14	
15	Public Support Percen	tage for 2010	Schedule A , Pa	rt II, line 14			15	
16a	33 1/3% support test-					line 14 is 33 1/3%	% or more, che	
h	and stop here. The org 33 1/3% support test					6a and line 15 is	33 1/20% or m	ore check this
D	box and stop here. The					oa, and inte 15 IS	1/3%0 UI M	ore, check this
17a	10%-facts-and-circum	-	•		-	ne 13, 16a, or 16	b and line 14	٠,
	ıs 10% or more, and ıf							
	in Part IV how the orga	anızatıon meet	s the "facts and	d circumstances"	test The organiz	zatıon qualıfıes as	a publicly su	
b	organization 10%-facts-and-circum	stances test—	2010. If the ora	anization did not	check a hov on li	ne 13, 16a 16b	or 17a and lin	▶
,	15 is 10% or more, an							-
	Explain in Part IV how	the organizati						
10	supported organization Private Foundation If t		n did not chools	a hov on line 12	16a 16h 17a a	or 17h chack this	hov and coc	► □

▶□

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ection A. Public Support	•	<u>'</u>		, ,	•	
	ndar year (or fiscal year beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	in) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	188,588	322,970	197,992	183,258	106,000	998,808
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	21,955	15,437	7,647	10,107	28,582	83,728
3	Gross receipts from activities that are not an unrelated trade or business under section 513			5,959	1,860	2,009	9,828
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	210,543	338,407	211,598	195,225	136,591	1,092,364
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons	142,000	278,000	125,000	70,000	45,000	660,000
b	A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b	142,000	278,000	125,000	70,000	45,000	660,000
8	Public Support (Subtract line 7c from line 6)		,	,	,	,	432,364
Se	ction B. Total Support			_			
Cale	ndar year (or fiscal year beginning	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	ın) Amounts from line 6	210,543	338,407	211,598	195,225	136,591	1,092,364
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,646	1,594	278	241	169	4,928
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b	2,646	1,594	278	241	169	4,928
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support (Add lines 9, 10c, 11 and 12)	213,189	340,001	211,876	195,466	136,760	1,097,292
14	First Five Years If the Form 990 is check this box and stop here	for the organization	n's first, second,	thırd, fourth, or f	fth tax year as a	501(c)(3) organ	ization, ▶┌
	ection C. Computation of Pub	lic Sunnort De	rcentage				
15	Public Support Percentage for 201			L3 column (f))		15	39 400 %
16	Public support percentage from 20		•			16	36 530 %
	otion D. Commutation of Torr	actuacyt Tonas	no Dougeats -				
	ction D. Computation of Inv				/f\\	11	
17	Investment income percentage for	•		•	(1))	17	0 %
18	Investment income percentage from					18	1 000 %
19a	33 1/3% support tests—2011. If th more than 33 1/3%, check this box						line 17 is not ▶✓

33 1/3% support tests-2010. 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 **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV	Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).							
	Facts And Circumstances Test							
	Explanation							

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493320097732

OMB No 1545-0047

┌ Yes

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

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

Political Campaign and Lobbying Activities

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Internal Revenue Service

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

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

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

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

Did the filing organization file Form 1120-POL for this year?

	ction 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B e organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (F			•	II-A	
	ction 501(c)(4), (5), or (6) organizations Complete Part III	TOX	y I a x	, then		
	me of the organization AN UP THE RIVER ENVIRONMENT	rıde	ntıfıca	ation numbe	er	
CLE	31-1693	3392	<u> </u>			
Par	t I-A Complete if the organization is exempt under section 501(c) or is a section	52	7 or	ganizatio	n.	_
1	Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV					
2	Political expenditures	-	\$ _			_
3	Volunteer hours		_			_
Par	t 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	 -	\$ <u>_</u>			
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					
Par	t I-C Complete if the organization is exempt under section 501(c) except section	า 50	1(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 funtion activities	F	\$ <u>_</u>			

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

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

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

┌ Yes ┌ No

Sch	nedule C (Form 990 or 990-EZ) 2011				Page 2
Pä	cart II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3) a	and file	ed Form 5768	(election
	expenses, and share of excess lobb	an affiliated group (and list in Part IV each affilia bying expenditures) x A and "limited control" provisions apply	ated gro	up member's name	, address, EIN
	Limits on Lobbying E (The term "expenditures" means ar			(a) Filing Organization's Totals	(b) Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lobbying)			
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)			
C	Total lobbying expenditures (add lines 1a and 1	b)			
d	O ther exempt purpose expenditures				
e	Total exempt purpose expenditures (add lines 1	c and 1d)			
f	Lobbying nontaxable amount Enter the amount to	from the following table in both			
	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 lir	ne 1f)			
h	Subtract line 1g from line 1a If zero or less, ent	er -0 -			
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -			

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 instructions for lines 2a through 2f on page 4.)

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?

Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total		
2a	Lobbying non-taxable amount	54,289				54,289		
b	Lobbying ceiling amount (150% of line 2a, column(e))					81,434		
c	Total lobbying expenditures	2,016				2,016		
d	Grassroots non-taxable amount	13,572				13,572		
e	Grassroots ceiling amount (150% of line 2d, column (e))					20,358		
f	Grassroots lobbying expenditures							

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

		(6	a)	(b)
		Yes	No	Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
а	Volunteers?		Νo	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		Νo	
C	Media advertisements?		Νo	
d	Mailings to members, legislators, or the public?		Νo	
e	Publications, or published or broadcast statements?		Νo	
f	Grants to other organizations for lobbying purposes?		Νo	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?		Νo	
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νo	
i	Other activities? If "Yes," describe in Part IV		Νo	
j	Total lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Νo	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		Νo	

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

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		Νo
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		No
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?	3		No

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

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
C	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	

_		_	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess		
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and		
	political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV **Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identi	tier	Return Reference	Explanation
		SCHEDULE C, PART II-B, LINE 1	WORK ON BSII AND CEM

DLN: 93493320097732

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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

Supplemental Financial Statements

Name of the organization

Employer identification number

CLEAN UP THE RIVER ENVIRONMENT		21 1602202	
Part I Organizations Maintaining Donor A		31-1693392 • Funds or Accou	nts. Complete if the
organization answered "Yes" to Form 9	1	(h) Fd	
L Total number at end of year	(a) Donor advised funds	(b) Funds a	nd other accounts
2 Aggregate contributions to (during year)			
B Aggregate grants from (during year)			
		<u> </u>	
Did the organization inform all donors and donor adv funds are the organization's property, subject to the	organization's exclusive legal control?	,	▽Yes ▽No
Did the organization inform all grantees, donors, and used only for charitable purposes and not for the bell conferring impermissible private benefit			┌ Yes
Part II Conservation Easements. Complete	ıf the organization answered "Yes	s" to Form 990, Par	t IV, line 7.
Purpose(s) of conservation easements held by the of Preservation of land for public use (e.g., recreated Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qua	tion or pleasure)	f a certified historic s	tructure
easement on the last day of the tax year			
		Held at	the End of the Year
a Total number of conservation easements		2a	
b Total acreage restricted by conservation easements		2b	
c Number of conservation easements on a certified hi	storic structure included in (a)	2c	
d Number of conservation easements included in (c) a	acquired after 8/17/06	2d	
Number of conservation easements modified, transf the taxable year ▶	erred, released, extinguished, or termir	nated by the organizat	ion during
Number of states where property subject to conserv	vation easement is located 🗠		
Does the organization have a written policy regarding enforcement of the conservation easements it holds		nandling of violations,	and Yes
Staff and volunteer hours devoted to monitoring, ins	pecting and enforcing conservation eas	sements during the ve	ear ►
 A mount of expenses incurred in monitoring, inspect 	-		
▶ \$,	,	
Does each conservation easement reported on line 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of	section	┌ Yes
In Part XIV, describe how the organization reports of balance sheet, and include, if applicable, the text of the organization's accounting for conservation ease	the footnote to the organization's finan-		
Organizations Maintaining Collection Complete of the organization answered	ons of Art, Historical Treasure "Yes" to Form 990, Part IV, line 8.	s, or Other Simil	ar Assets.
If the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fi	S 116, not to report in its revenue state d for public exhibition, education or rese	ement and balance sh earch in furtherance o	
b If the organization elected, as permitted under SFAS historical treasures, or other similar assets held for provide the following amounts relating to these item	public exhibition, education, or researc		
(i) Revenues included in Form 990, Part VIII, line	1	► \$	
(ii) Assets included in Form 990, Part X		► \$	
If the organization received or held works of art, his following amounts required to be reported under SFA		· · ·	rovide the
a Revenues included in Form 990, Part VIII, line 1		► \$	

Assets included in Form 990, Part X

Par	Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Tre</u>	easu	res, or Ot	<u>:her</u>	Similar	Asse ⁻	ts (ca	ntinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	he fol	lowing th	nat are	e a significa	nt us	e of its co	llection		
а	Public exhibition		d	Γ	Loan o	rexch	nange progra	ams				
b	Scholarly research		е	Γ	Other							
С	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	ıın hov	w the	y further	the o	rganızatıon'	s exe	mpt purpo	se in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								lar	Γ,	Yes	√ No
Pai	t IV Escrow and Custodial Arrang Part IV, line 9, or reported an an						answered	l "Ye	s" to For	m 990	,	
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?	ian or other interme	edıary	for c	ontribut	ions o	rother asse	ets no	ot	Γ,	Yes	√ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follov	ving t	able		Г	<u> </u>		Amou	nt	
С	Reginning helenge						-	1c		Alliou		
d	Additions during the year						-	1d				
e	Additions during the year						<u> </u>	1e				
f	Distributions during the year						-	ıe 1f				
	Ending balance	orm 000 Bart V III	~ 7 1 7	,			L	±1				✓ No
2a	Did the organization include an amount on Fo		e 21 /							,	res	la MO
	If "Yes," explain the arrangement in Part XIV				ad !!Vaa	" to [Dowl	TV line:	10		
Рα	rt V Endowment Funds. Complete	(a)Current Year)Prior			Years Back		nree Years B		Four Ye	ears Back
1a	Beginning of year balance	(a) carrent rear	(5	<i>j</i>	, ca.	(6)	o rears back	(4)	nee rears b	ack (C)		Saro Back
ь	Contributions											
c	Investment earnings or losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held	as							•		
а	Board designated or quasi-endowment 🕨											
b	Permanent endowment 🕨											
С	Term endowment ▶											
За	Are there endowment funds not in the posse	ssion of the organiz	ation	that	are held	and a	dmınıstered	for t	he	ı		
	organization by (i) unrelated organizations								Г	3a(i)	Yes	No No
	(ii) related organizations			•		•		•	· · · · }	3a(ii)		No
b	If "Yes" to 3a(II), are the related organization							• • •		3b		No
4	Describe in Part XIV the intended uses of th	e organization's en	dowm	ent fu	ınds				L			
Pai	t VI Land, Buildings, and Equipme	ent. See Form 99	90, Pa	art X	, line 10	٥.						
	Description of property				o) Cost or sis (investi		(b)Cost or o basis (othe		(c) Accumu depreciat		(d) Bo	ook value
1a	Land											
	Buildings						205,	463		1,184		204,279
	Leasehold improvements						<u> </u>					
	Equipment						31.	113		16,597		14,516
	Other						<u> </u>	+				
	I. Add lines 1a-1e (Column (d) should equal Fo	orm 990, Part X, colui	mn (B), line	10(c).)				▶			218,795
	- ((-)	, , , , , , , , , , , , , , , ,	. (-)	.,	(-/-/	-				ıle D (F	orm 9	90) 2011

Part VII Investments—Other Securities. See	Form 990, Part X, line 12	2.
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	•	
Part VIII Investments—Program Related. Se	e Form 990, Part X, line	13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
	(-,	Cost or end-of-year market value
	<u>* </u>	
Part IX Other Assets. See Form 990, Part X, II (a) Descri		(b) Book value
(a) Descri	ption	(b) book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line.	15)	
Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes	, ,	
PAYROLL TAXES PAYABLE	1,342	
	, i	
Total. (Column (b) should equal Form 990, Part X, col (B) line 25)	1,342	
· · · · · · · · · · · · · · · · · · ·	1,572	

_	Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	11.5	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
	Total expenses (Form 990, Part IX, column (A), line 25)	2	
	Excess or (deficit) for the year Subtract line 2 from line 1	3	
	Net unrealized gains (losses) on investments	4	
	Donated services and use of facilities	5	
	Investment expenses	6	
	Prior period adjustments	7	
	Other (Describe in Part XIV)	8	
	Total adjustments (net) Add lines 4 - 8	9	
		10	
) •	Excess or (deficit) for the year per financial statements Combine lines 3 and 9 XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		
14	Reconciliation of Revenue per Audited Financial Statements With Revenue p Total revenue, gains, and other support per audited financial statements	ег ке 1	eturn
	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
	Net unrealized gains on investments 2a		
•	Donated services and use of facilities		
	Recoveries of prior year grants		
	Other (Describe in Part XIV)		
' :	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	
	Amounts included on Form 990, Part VIII, line 12, but not on line 1	3	
	Investment expenses not included on Form 990, Part VIII, line 7b . 4a Other (Describe in Part XIV)		
1	, , , , , , , , , , , , , , , , , , , ,		
	Add lines 4a and 4b	4c	
4	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	Doturn
ĽЧ	Total expenses and losses per audited financial	рег	Return
	statements	1	
	Amounts included on line 1 but not on Form 990, Part IX, line 25		
1	Donated services and use of facilities		
•	Prior year adjustments		
	Other losses		
ı	Other (Describe in Part XIV) 2d		
:	Add lines 2a through 2d	2e	
	Subtract line 2e from line 1	3	
	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
1	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
,	Other (Describe in Part XIV)	1	
	Add lines 4a and 4b	4c	
2			
:	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	

Identifier Return Reference Explanation

additional information

OMB No. 1545-0

0044

2011

OMB No 1545-0047

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on

Form 990 or to provide any additional information.

Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization CLEAN UP THE RIVER ENVIRONMENT **Employer identification number**

31-1693392

Identifier	Return Reference	Explanation
ORGANIZATION'S MISSION	FORM 990 - ORGANIZATION'S MISSION	TO FOCUS PUBLIC AWARENESS ON THE UPPER MINNESOTA RIVER AND TO TAKE ACTION TO RESTORE THIS AREA OF THE RIVER'S WATER QUALITY, BIOLOGICAL INTEGRITY AND NATURAL BEAUTY FOR THE BENEFIT OF ALL
ALL OTHER ACCOMPLISHMENT DESCRIPTION	FORM 990, PAGE 2, PART III, LINE 4D	OTHER ACTIVITIES TO FUNCTION AS A CATALYST AND COORDINATOR OF CITIZEN ACTION EFFORTS DESIGNED TO RAISE AWARENESS AND CLEAN UP THE MINNESOTA RIVER
ELECTION OF MEMBERS AND THEIR RIGHTS	FORM 990, PAGE 6, PART VI, LINE 7A	MEMBERSHIP IS OPEN TO ALL PERSONS WHO PAY ANNUAL MEMBERSHIP DUES
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11B	THE BOARD OF DIRECTORS REVIEWS THE 990 AT THE BOARD MEETING AFTER THE 990 HAS BEEN FILED
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	AN ANNUAL CONFLICTS OF INTEREST DISCLOSURE STATEMENT IS TO BE FILLED OUT BY EMPLOYEES AND BOARD MEMBERS THE BOARD OR A DULY CONSTITUTED COMMITTEE SHALL DETERMINE WHETHER A CONFLICT EXISTS AND IN THE CASE OF AN EXISTING CONFLICT, WHETHER THE CONTEMPLATED TRANSACTION MAY BE AUTHORIZED AS JUST, FAIR, AND REASONABLE TO CURE
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	THE EXECUTIVE DIRECTOR WILL HAVE A PERFORMANCE EVALUATION DONE BY THE FULL BOARD OF DIRECTORS AS LISTED AS AN AGENDA ITEM AT THE OCTOBER OR NOVEMBER MEETING THIS WILL DETERMINE THE EXECUTIVE DIRECTOR'S SALARY FOR THE COMING YEAR THAT SALARY WILL BE REVIEWED IN COMPARISON TO THE REST OF THE STATE AS LISTED ON THE MN NONPROFIT SALARY AND BENEFITS SURVEY FOR THE PRIOR YEAR AVAILABLE IN NOVEMBER OF EACH YEAR THE EXECUTIVE DIRECTOR SHOULD PROVIDE A WRITTEN NARRATIVE OF THE PAST YEAR'S ACCOMPLISHMENTS FOR USE OF THE BOARD AT THE PERFORMANCE REVIEW
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	THEY ARE AVAILABLE IN THE FORM OF A REPORT AT THE ANNUAL MEETING AND BY REQUEST AT ANYTIME BY STOPPING AT THE OFFICE
OTHER CHANGES IN NET ASSETS EXPLANATION	FORM 990, PART XI, LINE 5	FMV OF STOCKS INCREASED BY 4 00

Additional Data

Software ID:

Software Version:

EIN: 31-1693392

Name: CLEAN UP THE RIVER ENVIRONMENT

Form 990, Special Condition Description:

Special Condition Description

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 109,642 including grants of \$ 1,905) (Revenue \$ 15,989)

OTHER ACTIVITIES TO FUNCTION AS A CATALYST AND COORDINATOR OF CITIZEN ACTION EFFORTS DESIGNED TO RAISE AWARENESS AND CLEAN UP THE MINNESOTA RIVER DLN: 93493320097732

OMB No 1545-0172

Form 4562

Depreciation and Amortization (Including Information on Listed Property)

Department of the Treasury See separate instructions. Attach to your tax return. Sequence No 179 Internal Revenue Service (99) Name(s) shown on return Business or activity to which this form relates **Identifying number** CLEAN UP THE RIVER ENVIRONMENT INDIRECT DEPRECIATION 31-1693392 **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. 500,000 1 Maximum amount (see instructions) 1 2 Total cost of section 179 property placed in service (see instructions) . . 2 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 2,000,000 4 4 Reduction in limitation Subtract line 3 from line 2 If zero or less, enter -0-5 Dollar limitation for tax year Subtract line 4 from line 1 If zero or less, enter -0- If married filing separately, see instructions (b) Cost (business use 6 (a) Description of property (c) Elected cost only) **7** Listed property Enter the amount from line 29 8 Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7 9 9 Tentative deduction Enter the smaller of line 5 or line 8 **10** Carryover of disallowed deduction from line 13 of your 2010 Form 4562 10 11 Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 12 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 13 Carryover of disallowed deduction to 2012 Add lines 9 and 10, less line 12 . Note: Do not use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property) (See instructions) 14 Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) 14 15 **16** Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2011 2,010 18 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2011 Tax Year Using the General Depreciation System (c) Basis for (b) Month and depreciation (g)Depreciation (a) Classification of (d) Recovery year placed in (business/investment (e) Convention (f) Method deduction property period service use only—see instructions) 19a 3-year property **b** 5-year property c 7-year property d 10-year property **e** 15-year property **f** 20-year property S/L g 25-year property 25 yrs 27 5 yrs ΜМ S/L h Residential rental property MMS/L 27 5 yrs 39 yrs i Nonresidential real property ММ Section C—Assets Placed in Service During 2011 Tax Year Using the Alternative Depreciation System 4,205 20a Class life 100 HY S/L 265 **b** 12-year S/L 12 yrs 5 c40-year 2011-12 40 yrs ΜМ S/L **Summary** (see instructions) 22 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 Enter here 2,280 and on the appropriate lines of your return Partnerships and S corporations—see instructions 23 For assets shown above and placed in service during the current year, enter the 23 portion of the basis attributable to section 263A costs

Part V

Listed Property (Include automobiles, certain other vehicles, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete **only** 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A—Depre	ciation a	nd Other I	nforma	tion (C	aution	: See i	the i	instruc	tions	for li	mits 1	or pa	sseng	er au	tomot	iles.)	
24a Do you have evider	nce to support	the business/inv	estment ι	ise claime	d? ┌ Yes	Γ _{No}		2	4b If "\	∕es," ıs	the ev	ıdence	written?	Гүе	sГN)	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/ investment use percentage	Cost o	(e) Basis for depreciation (business/investment use only)				(f) Recover period	y M∈	(g) ethod/ ventior		(h) Depreciation/ deduction			(i) Elected section 179 cost		
25 Special depreciation allo 50% in a qualified busi	•		erty placed	in service (during the	tax year	and u	used moi	e than	25							
26 Property used more	e than 50%	ın a qualıfıed	business	use													
		%									+			-			
		%									+						
27 Property used 50%	orless in a		iness us	e													
		%							S/L - S/L -		_						
		%							S/L -								
28 Add amounts in co	olumn (h), lır	ies 25 throug	jh 27 En	ter here a	and on lu	ne 21, _l	oage	1 .	28	8							
29 Add amounts in co	olumn (ı), lın	e 26 Enterh	ere and c	n line 7,	page 1					•		29					
			ction B														
Complete this section If you provided vehicles to														e vehic	les		
				(6	a)	(1)		(c)		((≘)	(f)	
year (do not inclu-			-	Vehi	cle 1	Vehi	cle 2	: V	ehicle	3	Vehi	cle 4	Vehi	cle 5			
31 Total commuting i	miles driven	during the ye	ear .							$\neg \dagger$							
32 Total other persor	nal(noncomm	nuting) miles	drıven							$\neg \dagger$							
33 Total miles driven through 32	during the y		s 30														
34 Was the vehicle a			•	Yes	No	Yes	No	Ye	s 1	No.	Yes	No	Yes	No	Yes	No	
during off-duty ho	urs? .															1	
35 Was the vehicle us		by a more tl	nan 5%														
36 Is another vehicle			e? .														
Section	on C—Que	stions for	Employ	ers W	ho Pro	vide \	/ehi	icles	or U	se by	/ The	ir En	nploy	ees			
Answer these questio 5% owners or related				eption to	comple	ting Se	ction	B for v	ehicle	s use	d by e	mploy	ees wh	o are	not mo	re tha	
37 Do you maintain a employees?		y statement											our.	Y	es	No	
38 Do you maintain a	written polic	y statement	that prof	nibits per	sonal us	e of vel	nicle	s, exce	pt con	nmutır	ng, by						
employees? See t	he instructio	ns for vehicle	es used b	y corpor	ate office	ers, dire	ector	s, or 1	% or m	nore o	wners						
39 Do you treat all us	se of vehicles	s by employe	es as pei	sonal us	e? .		•	•		•	•		•				
40 Do you provide movehicles, and reta				oyees, ol	btaın ınfo	rmatio •	n fro	m your • •	emplo •	yees	about •	the us	e of the	9			
41 Do you meet the r	equirements	concerning	qualified a	automobi	le demor	nstratio	n us	e? (See	ınstrı	uction	s)						
Note: If your answ	ver to 37, 38	, 39, 40, or 4	1 is "Ye	s," do no	t comple	te Sect	ion E	3 for the	cove	red ve	hicles	5					
	rtization														I		
(a) Description of c	(b)			(c) A mortizable amount			(d) Code section		A mortiz e period		(e) nortization period or ercentage		Amor		(f) tization for nis year		
42 A mortization of co	sts that her		ur 2011	tax vear	(see ins	truction	ns)		<u> </u>		5						
			1	,	,_ ,_ ,,,,	T	,										
						-+			\dashv								
43 Amortization of co	sts that beg	an before you	ur 2011 t	ax year		-			•		43						
44 Total. Add amoun	_	•		•	ere to re	port				Ì	44						

TY 2011 Averaging Attachment

Name: CLEAN UP THE RIVER ENVIRONMENT

EIN: 31-1693392

Explanation: THERE HAS BEEN NO LOBBYING ACTIVITY BY THE ORGANIZATION

IN 2009,2010 AND 2011.