epartment of the Treasury

ternal Revenue Service

Short Form

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)

▶ For organizations with gross receipts less than \$100,000 and total assets less

than \$250,000 at the end of the year

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-1150

2002

Open to Public Inspection

			ar year,	or tax year beginning	anuary 1	, 2002	z, and end	nug Dec	cember 3		, 20 02
]	Check if a Address o	change	Please use IRS label or	C Name of organization Canoochee River	keeper, Inc	•			D Employe 58	r ider 263	ntification number 16669
=	Name cha	· ,	print or	Number and street (or PO I	oox, if mail is not de	Ivered to street	address) F	Room/suite	E Telepho	ne nu	ımber
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╡	Final retur		Specific	City or town, state or countr	u and 7ID . A						
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				e 9 to determine gross receip		•					19699
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	1	Contribution	ns, gifts,	grants, and similar amoun	nts received				<u> </u>		19617
	2	Program se	ervice re	evenue including governn	nent fees and co	ontracts			<u> </u>	2	0
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\exists	21			balances at end of year			20)		. ▶ 2	21	43756
₽6	rt II	Balance S	Sheets-	-If Total assets on line 2	25, column (B) a	re \$250,000	or more,	file Form	990 inste	ad o	
			(Se	e page 39 of the instruc	tions)			(A) Beg	inning of yea	<u>. </u>	(B) End of year
22	Cash	n, savings, a	•	. •	•			19013		22	43756
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<u>?7</u>				ances (line 27 of column	(B) must agree	with line 21)	19013		27	43756
or				lotice, see the separate in			-	Cat No 1			Form 990-EZ (2002)

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-	tt III Statement of Program Service Accom	plishments (See page 3	9 of the instruction	ons)		Expenses
	at is the organization's primary exempt purpose?	Envioremental Educ	cation and So	cience		quired for 501(c)(3)
Desi	conbe what was achieved in carrying out the organization	ation's exempt purposes I	n a clear and cond	cise manner.		(4) organizations 4947(a)(1) trusts.
desc	cribe the services provided, the number of persons ber	nefited, or other relevant info	ormation for each p	program title		onal for others)
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20	See Schedule A - Water Quality Mor	HLOCING				
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30	See Schedule A Advocacy					
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31 (Other program services (attach schedule)		Grants \$	· /	31a	
_	Total program service expenses (add lines 28a th		Ciants w		32	1.0417
	t IV List of Officers, Directors, Trustees, and Key		en if not compensate	od Soo nage 4		16417
LE	List of Officers, Directors, Prostees, and Key I	(B) Title and average	(C) Compensation	(D) Contribute		(E) Expense
	(A) Name and address	hours per week	(If not paid,	employee benefit	plans &	account and
		devoted to position	enter -0-)	deferred compe	1154HUII	other allowances
-	See Schedule B.			}		
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Da	Other Information (Note the attachme	ent requirement in Gene	eral Instruction V	/ nage 14 \		Voc No
	rt V Other Information (Note the attachme					Yes No
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33 34 35 36 37a b 38a b 39 b 40a b	Did the organization engage in any activity not previously reward any changes made to the organizing or governing docume if the organization had income from business activities reported on Form 990-T, attach a statement explaining. Did the organization have unrelated business gross income if "Yes," has it filed a tax return on Form 990-T for Was there a liquidation, dissolution, termination, or senter amount of political expenditures, direct or income Did the organization file Form 1120-POL for this such loans made in a prior year and still unpaid a lif "Yes," attach the schedule specified in the line 38 if "Yes," attach the schedule specified in the line 38 if 501(c)(7) organizations. Enter a limitation fees and Gross receipts, included on line 9, for public use of 501(c)(3) organizations. Enter Amount of tax imposed or section 4911 \(\bigcirc\), section 49 501(c)(3) and (4) organizations. Did the organization engineering aware of an excess benefit transaction from a Amount of tax imposed on organization managers or discenter. Amount of tax on line 40c, above, reimburs List the states with which a copy of this return is file. The books are in care of \(\bigcirc\) Canoochee. Rive	eported to the IRS? If "Yes," at ents but not reported to the IRS? es, such as those reported on your reason for not reported of \$1,000 or more or 6033(e) or this year? Substantial contraction during direct, as described in the year? The ent to any officer, directed the start of the period of club facilities in the organization during the organization during the year? If "Yes," attach are qualified persons during the year year? If "Yes," attach are qualified persons during the year year?	tach a detailed description in "Yes," attach a conformation lines 2, 6, and 7 ring the income or inotice, reporting, and gethe year? (If "Yestinstructions > 1.5 co., trustee, or key overed by this return ount involved aided on line 9 1.5 co., section 4955 co., section 4955 co., explanation ear under 4912, 4955 co., Teleport.	ption of each a comed copy of the (among others in Form 990-The proxy tax rections," attach a same a	tatemer were	ents? any did it
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33 34 35 36 37a 38a 5 38a 5 40a 6 41 42	Did the organization engage in any activity not previously rewished with the organization had income from business activities reported on Form 990-T, attach a statement explaining. Did the organization have unrelated business gross income if "Yes," has it filed a tax return on Form 990-T for Was there a liquidation, dissolution, termination, or senter amount of political expenditures, direct or income Did the organization file Form 1120-POL for this such loans made in a prior year and still unpaid a lif "Yes," attach the schedule specified in the line 38 is 501(c)(7) organizations. Enter a limitation fees and Gross receipts, included on line 9, for public use of 501(c)(3) organizations. Enter Amount of tax imposed on section 4911 \(\bigcirc\), section 4915 \(\bigcirc\), section 49501(c)(3) and (4) organizations. Did the organization engineer aware of an excess benefit transaction from a Amount of tax imposed on organization managers or discenter. Amount of tax imposed on organization managers or discenter. Amount of tax on line 40c, above, reimburs List the states with which a copy of this return is file. The books are in care of \(\bigcirc\) Canochee Rive Located at \(\bigcirc\) 131. College Circle. Swa	eported to the IRS? If "Yes," at ents but not reported to the IRS? es, such as those reported on your reason for not reported of \$1,000 or more or 6033(e) or this year? Substantial contraction during direct, as described in the year? The example of \$1,000 or more or 6033(e) or this year? The example of the period of the start of the period of instructions and enter the arrivations and enter the arrivation of club facilities in the organization during the organization during the year? If "Yes," attach arrivation of the organization of the or	tach a detailed description in "Yes," attach a conformation lines 2, 6, and 7 riting the income or inotice, reporting, and gethe year? (If "Yestinstructions > 1.5 co., trustee, or key overed by this return ount involved aided on line 9 1.5 year under 1.5 year u	ption of each a comed copy of the (among others in Form 990-The proxy tax rectangles) and proxy tax rectangles are marked as the same as the proxy tax rectangles are marked a	tatemer were	ents? any did it

Date

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Chantable Trust

Supplementary Information—(See separate instructions.)

2002

Employer identification number

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

Name of the organization Canoochee Riverkeeper, Inc. 58 2636669 Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees (See page 1 of the instructions List each one If there are none, enter "None") (d) Contributions to (e) Expense (b) Title and average hours mployee benefit plans & (c) Compensation account and other than \$50,000 per week devoted to position deferred compensation allowances N/A Total number of other employees paid over \$50,000 Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services (See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None") (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service (c) Compensation N/A Total number of others receiving over \$50,000 for

professional services

hec	ule /	A (Form 990 or 990-EZ) 2002		P	ige 2
ar	t III	Statements About Activities (See page 2 of the instructions)	Y	es	No
•	atte	ring the year, has the organization attempted to influence national, state, or local legislation, including any empt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid incurred in connection with the lobbying activities \$\Bigsim \frac{350}{350} \text{(Must equal amounts on line 38, tV-A, or line i of Part VI-B)}	1	×	
	org	ganizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A Other lanizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of lobbying activities			
2	sub with ow	ring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any instantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or high any taxable organization with which any such person is affiliated as an officer, director, trustee, majority ner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the insactions)			
8	Sal	e, exchange, or leasing of property?	2a		_x x
b	Ler	nding of money or other extension of credit?	2b		x
С	Fur	mishing of goods, services, or facilities?	2c		×
d	Pay	yment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d	-	x
e	Tra	nsfer of any part of its income or assets?	2e		
)		es the organization make grants for scholarships, fellowships, student loans, etc? (See Note below) you have a section 403(b) annuity plan for your employees?	3		×
		ach a statement to explain how the organization determines that individuals or organizations receiving grants from it in furtherance of its chantable programs "qualify" to receive payments			
ar	t IV	Reason for Non-Private Foundation Status (See pages 3 through 5 of the instructions)			
		inization is not a private foundation because it is (Please check only ONE applicable box)			
i i		A church, convention of churches, or association of churches Section 170(b)(1)(A)(i) A school Section 170(b)(1)(A)(i) (Also complete Part V)			
•	_	A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii)			
3		A Federal, state, or local government or governmental unit Section 170(b)(1)(A)(v)			
)	_	A medical research organization operated in conjunction with a hospital Section 170(b)(1)(A)(iii) Enter the hosp and state ▶		-	
}	_	An organization operated for the benefit of a college or university owned or operated by a governmental unit Sect (Also complete the Support Schedule in Part IV-A.)			
	_	An organization that normally receives a substantial part of its support from a governmental unit or from the Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)	ne gener	al p	ublic
lb ?		A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A.) An organization that normally receives (1) more than 331/3% of its support from contributions, membership receipts from activities related to its charitable, etc., functions—subject to certain exceptions, and (2) no mosts support from gross investment income and unrelated business taxable income (less section 511 tax) from but by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part III.)	re than sinesses	33%	% 0
1		An organization that is not controlled by any disqualified persons (other than foundation managers) and supp described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(3))			
		Provide the following information about the supported organizations (See page 5 of the instructions)		
		(a) Name(s) of supported organization(s)	number above	_	
				_	
				_	
				_	

_	: You may use the worksheet in the instructions	-		•		_
Cale	ndar year (or fiscal year beginning in)	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Totai
15	Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	33570	n/a	n/a	n/a	33570
16	Membership fees received			 	 	
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's chantable, etc., purpose					
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975					
19	Net income from unrelated business activities not included in line 18					
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22	Other income Attach a schedule Do not include gain or (loss) from sale of capital assets	57				57
23	Total of lines 15 through 22	33627		 		33627
24	Line 23 minus line 17	33627		 -	 	33627
25	Enter 1% of line 23	336		 -	 	
<u> </u>	Organizations described on lines 10 or 11:		emount in colu	mn (a) line 24	▶ 268	672
	Prepare a list for your records to show the nan governmental unit or publicly supported organiz amount shown in line 26a. Do not file this list will appropriate the support for section 509(a)(1) test. Enter liii	ne of and amoun ation) whose tota ith your return. E	it contributed by al gifts for 1998 inter the total of a	each person (oth through 2001 exc	eeded the	
e f	• •	57	26ь _3500		 ≥ 266 ≥ 266 ≥ 261 	30070
27	Organizations described on line 12. a For person," prepare a list for your records to show Do not file this list with your return. Enter the	the name of, and	total amounts re	eceived in each ye	were received from, each *di	om a "disqualified squalified person
b	(2001)	year, that was mo 5 through 11, as w the larger amoun	son (other than the large vell as individuals to described in (1)	disqualified person or of (1) the amoun by Do not file this i or (2), enter the	ns"), prepare a list t on line 25 for the list with your retu sum of these diffe	e year or (2) \$5,000 rm. After computing prences (the excess
C	(2001) (2000)				. (1996)	
d	17 20	and line 27b tota	21		276	
9	Public support (line 27c total minus line 27d to			 _	276	
f	Total support for section 509(a)(2) test Enter a	,	23, column (e)	► 27f		
g h	Public support percentage (line 27e (numera investment income percentage (line 18, colu	tor) divided by I	ine 27f (denom	inator))	≥ 27g	
28	Unusual Grants: For an organization describe prepare a list for your records to show, for ear description of the nature of the grant Do not f	d in line 10, 11, ch year, the nam	or 12 that rece	eved any unusual outor, the date an	grants during 1 d amount of the	998 through 2001 grant, and a brie

Pal	(To be completed ONLY by schools that checked the box on line 6 in Part IV)			
29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31		
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)			
32	Does the organization maintain the following	32a		
	Records indicating the racial composition of the student body, faculty, and administrative staff? Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c 32d		
d	Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)			
33	Does the organization discriminate by race in any way with respect to			
a	Students' rights or privileges? .	33a		
b	Admissions policies?	33b		
С	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		-
e	Educational policies?	33e 33f		
1	Use of facilities? Athletic programs?	33g		
h	Other extracumcular activities?	33h		
	If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)			
34a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		-
b	Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b		
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

chedule	A (Form	990 or	990-F	Z) 2002

Page 5

Pa	To be completed ONLY by ar					ruction	าร)	
Che	ck ▶ a ☐ if the organization belongs to an affili					ited co	ntrol"	provisions apply
	Limits on Lobbyi (The term "expenditures" mea				Affil	(a) lated gro totals	que	(b) To be completed for ALL electing organizations
 36	Total lobbying expenditures to influence public			3	6			
30 37	Total lobbying expenditures to influence a legi	-	=-	3				
38	Total lobbying expenditures (add lines 36 and	•	or loopying)	3	8			
39	Other exempt purpose expenditures	51)		3				
40	Total exempt purpose expenditures (add lines	38 and 30)			0			
41	Lobbying nontaxable amount Enter the amount	•	ına table—					
•		bbying nontaxab	•					
		of the amount on I		۱ 🛚				
	·	00 plus 15% of the		00.000				
	•	00 plus 10% of the		1 1 -	1			
		00 plus 5% of the		1 9///				
	Over \$17,000,000 \$1,000	•		·) ///				
42	Grassroots nontaxable amount (enter 25% of	line 41)			2			
43	Subtract line 42 from line 36 Enter -0- if line	42 is more than lir	ne 36	4	3			
44	Subtract line 41 from line 38 Enter -0- if line	41 is more than lir	ne 38	4	4	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<i></i>	
	Caution: If there is an amount on either line 4	3 or line 44 your	pust file Form 47	W				
	- 							
	(Some organizations that made a section	eraging Penoc			the five	columi	ne he	low
	See the instructions							
		Lob	bying Expendit	res During 4-	Year Av	eragin	g Pe	nod
	Calendar year (or	(a)	(b)	(c)		(d)		(e)
	fiscal year beginning in) ▶	2002	2001	2000		1999		Total
45	Lobbying nontaxable amount							
46	Lobbying ceiling amount (150% of line 45(e))							
47	Total lobbying expenditures	<u> </u>						<u> </u>
48_	Grassroots nontaxable amount							
49_	Grassroots ceiling amount (150% of line 48(e))							
50	Grassroots lobbying expenditures	!			- }			
_	t VI-B Lobbying Activity by Nonele	cting Public Ci	harities	<u> </u>	!			L
	(For reporting only by organize			Part VI-A) (Se	ee pag	e 11 c	of the	e instructions)
Dun	ng the year, did the organization attempt to infi							1
	npt to influence public opinion on a legislative i		_		ig uity	Yes	No	Amount
	Volunteers		- , -: .					
b	Paid staff or management (Include compensate	tion in expenses re	eported on lines	c through h)		\mathbf{x}		
c	Media advertisements			,,			X	
d	Mailings to members, legislators, or the public	;				×		300
e						1	X	1
f	Publications, or published or broadcast statem	nents				├		
•							х	
8	Publications, or published or broadcast staten	poses	or a legistative t	oody		x	х	50
	Publications, or published or broadcast statem Grants to other organizations for lobbying pur	poses vernment officials,	-			x	×	
g	Publications, or published or broadcast statem Grants to other organizations for lobbying pur Direct contact with legislators, their staffs, government	poses vernment officials, s, speeches, lectu igh h.)	ires, or any other	r means				50 35 ₀

Page	6

Pai	rt VI			insfers To and Transaction e page 12 of the instruction	ns and Relationships With Noins)	ıcharıtal	ole 	
51					following with any other organization on 527, relating to political organization		d in se	etion
а		• •		to a nonchantable exempt orga	= '		Yes	No
-	m		3 - 3	, , ,		51a(i)	L	_x-
	(ii)	Other assets				a(ii)		X
Ь	Oth	er transactions						^
	(1)	Sales or exchange	es of assets with a	nonchantable exempt organizat	non	b(i)		
	(ii)	Purchases of asse	ets from a nonchan	table exempt organization		<u>b(ii)</u>		x_
	(iii)	Rental of facilities	s, equipment, or oth	ner assets .		b(iti)	 	X_
	(iv)	Reimbursement a	rrangements		•	p(iv)		<u> </u>
	(v)	Loans or loan gua	arantees			<u>b(v)</u>		<u> </u>
	(vi)	Performance of se	ervices or members	ship or fundraising solicitations		p(A)		X
C	Sha	iring of facilities, ed	quipment, mailing li	sts, other assets, or paid emplo	y ee s .	<u> </u>		<u> </u>
đ	900	ds, other assets, or	services given by th	e reporting organization. If the organization	Column (b) should always show the fair ganization received less than fair market is, other assets, or services received			the
-	a)	(b)		(c)	(d)			
Line	no	Amount involved	Name of nonc	chantable exempt organization	Description of transfers, transactions, and	snanng am	видели	erne
								
			 					
								
			<u> </u>					—
								
			 					
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	des	cribed in section 5		other than section 501(c)(3)) or i	e or more tax-exempt organizations n section 527?	☐ Yes	ş (x) No
		(a) Name of organiz	zation	(b) Type of organization	(c) Description of relation	ship		
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Canoochee Riverkeeper, Inc. FY 2002 Tax Return 990-EZ

Form 990-EZ Part III. Statement of Program Service Accomplishments Schedule A.

28. Water Quality Monitoring. Actively monitor the Canoochee River and streams, respond to citizen complaints, and conduct permit reviews. Over 50 citizen complaints were logged in 2002 and this program is allocated about 16 hours/week.

28a. \$8566

29. Public education/outreach. Educate communities on the importance of clean water through presentations, cleanup and citizen monitoring. This program is allocated approximately 15 hours/week and over 200 citizens participated in cleanups in 2002

29a. \$7274

30. Advocacy. Promote protection of the Canoochee River through enhanced legislation and enforcement of environmental regulations. Approximately 2 hours/week for this program.

30a. \$577

Canoochee Riverkeeper, Inc. FY 2002 Tax Return 990-EZ

Schedule B. Form 990-EZ
Part IV List of Officers. Directors, Trustees and Key Employees

ran in List of Officers, Directors, Hustees and	, Hustees and ney Employees			
(A)Name and Address	(B) Title and average hours	(C) Compensation	(D) Contributions to	(E) Expense account
	per week devoted to position		employee benefit nlans	and other
Chandra Brown	Canoochee Riverkeeper	\$14668 68	-0	Ŷ
PO Box 263	50 hours per week			
Swainsboro, GA 30401				
Keith Barnard	Board Member		¢	¢
PO Box 263				
Swainsboro, GA 30401	1 hour/week			
Mike Boney	Board Member	¢	ቀ	¢
PO Box 263				
Swainsboro, GA 30401	1 hour/week			
Linda Burkhalter	Board Secretary	ф	ቀ	-
PO Box 263				
Swainsboro, GA 30401	2 hours/week			
Perry Lee Deloach	Board Member	¢	ቀ	þ
PO Box 263				
Swainsboro, GA 30401	5 hours/week			
Phyllis Holland	Board Treasurer	ф	ф	φ
PO Box 263				
Swainsboro, GA 30401	1 hour/week			
James Reichard, PhD	Board Member	þ	수	¢
Department of Geology				
PO Box 8149	1 hour/week			
Statesboro, GA 30460				
Donald D J Stack	Board Chairperson	¢	ф	ቀ
800 Flatiron Building				
84 Peachtree St , NW	3 hours/week			
Atlanta, GA 30303				
Stephen Vives	Board Member	¢	ᅌ	¢
P O Box 8042				
DEPT OF BIOLOGY				
Georgia Southern University	1 hour/week			
Statesboro, GA 30460				
Dianna Wedincamp	Board Vice-Chair	¢	\$	ф
PO Box 263	,			
Swainsboro, GA 30401	2 hours/week			

For Schedule A Form 990 EZ Schedule C Line 22. Other Income

2002	
Interest Income	\$57

For Schedule A From 990 EZ
Part VI-B
Schedule D.
Lobbying Activity by Nonelecting Public Charities

Description of Activity	Description of Expenditure	Cost
Forward emails from Georgia		\$300
Environmental Action Network and other		
listserves to members		
Letter to Sonny Perdue about Georgia	Staff time	\$50
Water Coalition recommendations		
Total		\$350