Form 990-EZ

Department of the Treasury Internal 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)

Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total assets less than \$2,500,000 at the end of the year may use this form

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

OMB No 1545-1150

Open to Public Inspection

A	For the	2008 calend	lar year	, or tax year beginning	07/01 , 2008, and er	nding			6/30,20 09
B	Check if ap	pplicable	Please	C Name of organization			D Emplo	yer ident	ification number
	Address o	change	use IRS label or	WISCONSIN WETLANDS ASSOCIATION	N INC		39	185260)1
口	Name cha	-	print or	Number and street (or P O box, if mail is not de		Room/suite	E Teleph		
닏	Initial retu		type.	222 South Hamilton Street Suite 1			(608		250-9971
님	Terminatio		See Specific	City or town, state or country, and ZIP + 4					
님	Amended		Instruc-	Madison, WI 53703			F Group		
므		on pending	tions.	· · · · · · · · · · · · · · · · · · ·				er	
	• Section	on 501(c)(3)		ations and 4947(a)(1) nonexempt charitable npleted Schedule A (Form 990 or 990-EZ).	trusts must attach		unting met r (specify)		Cash 🗹 Accrual
	•••		wisco	onsinwetlands.org		1			ganization is not
-	Websit								dule B (Form 990,
<u>J</u>	Organiz	zation type (c	check or	nly one)- 🗹 501(c) (3) ◀ (insert no) 🔲 🤄	1947(a)(1) or	990-1	EZ, or 990	·PF)	
			_	on is not a section 509(a)(3) supporting organization chooses to file a return, be sure to file a	_	eipts are nor	mally not r	nore tha	n \$25,000 A return is
L	Add lines	s 5b, 6b, and	7b, to lii	ne 9 to determine gross receipts, if \$1,000,000 or	more, file Form 990 ins	stead of Forn	n 990-EZ	▶ \$	376,428
	art I			enses, and Changes in Net Assets				ons fo	r Part I.)
_								1	370,187
	1			, •				2	3,972
	2			revenue including government fees and c				3	0,0,2
	3		•	s and assessments				- +	
	4	Investment	t incom	ne		•		4	2,269
	5a	Gross amo	ount fro	om sale of assets other than inventory	<u>5a</u>			1	
	b	Less: cost	or other	er basis and sales expenses					
•	c	Gain or (los	ss) from	sale of assets other than inventory (Subtrac	t line 5b from line 5a)	(attach sch	edule).	5c	0
Revenue	6	Special events	s and act	ivities (complete applicable parts of Schedule G) If any	amount is from gaming,	check here	• 🗆		
9		•		ot including \$ of co					
é	"	reported o	-		Flayer	5		*	
		•		1	RECHAP	- 1			
	b			nses other than fundraising expenses .	htraat line 6h from l	100 600		6c	0
	_	c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)						11	
	7a			ventory, less returns and allowances 📜	NOV. 1 30				
	b	Less: cost	_	\	10	<u>—————————————————————————————————————</u>			•
	С	Gross prof	fit or (Ic	oss) from sales of inventory (Subtract line escribe	7b-from line Za)	1 IT · · l		7c	<u> </u>
	8)	8	0
	9	Total reve	enue. A	dd lines 1, 2, 3, 4, 5c, 6c, 7c, and 8.		•	<u></u> ▶	9	376,428
	10	Grants and	d simila	ar amounts paid (attach schedule) .				10	0
	11			or for members				11	0
S								12	251,199
Š	13			and other payments to independent con		• • •		13	13,559
Expenses	. 44			. ,				14	16,645
X	14	•	•	utilities, and maintenance				15	16,125
_	15			ions, postage, and shipping			• • • •	16	23,627
	16								
_	17				<u> </u>			17	321,155
ž	18		-) for the year (Subtract line 17 from line 9				18	55,273
Net Assets	19	Net assets	s or fur	nd balances at beginning of year (from	line 27, column (A))	(must agr	ee with	<u> </u>	
Ä		end-of-yea	ar figur	e reported on prior year's return)				19	101,215
<u>ह</u>	20			net assets or fund balances (attach expl				20	0
Z	21			d balances at end of year. Combine lines				21	156,488
P	art II			s. If Total assets on line 25, column (B) a					of Form 990-EZ.
				See the instructions for Part II)			ginning of y		(B) End of year
0	n C==1	h	•	,		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		28 22	102,799
2		h, savings,				<u> </u>		0 23	0
2	Lanc	a and buildi	ngs .	See Statement 2		·	20.0		65,964
2	4 Othe	er assets (d	escribe	Dee Statement 2)			18 24	
2	5 Tota	al accete				<u> </u>		46 25	168,763
20	6 Tota	al liabilities	(descril	be ► See Statement 3)			31 26	12,275
2	7 Net	assets or f	fund ba	alances (line 27 of column (B) must agre	e with line 21) ..	. 1	101.2	15 27	156,488

For Privacy Act and Paperwork Reduction Act Notice, see the Instruction for Form 990.

Form **990-EZ** (2008)

Cat No 106421

-orr	n 990-EZ (2008)					Page Z
Pa	rt III Statement of Program Service Accom	plishments (See the instr	uctions for Part	11.)		Expenses
A //L	at is the organization's primary exempt purpose?	rotect and restore wetland	d areas of Wiscon	nsin	(Req	uired for 501(c)(3)
VVII	at is the organization's primary exempt purposer -	Acada august sumages In			and	(4) organizations
Ues	scribe what was achieved in carrying out the organization the services provided, the number of persons ber	ation's exempt purposes. In	a clear and conc	ise manner,	and	4947(a)(1) trusts; onal for others.)
		telled, or other relevant into	imation for each pi	ogram title.	Optio	
28	See Statement 4]]	
					1 1	
					! i	
	(Grants \$) If this amount inclu				28a	
29					[[
	(Grants \$) If this amount inclu	udes foreign grants, check	here	. ▶ ⊔	29a	
30						
	(Grants \$) If this amount incli	udes foreign grants, check	here	. ▶ □	30a	
	(Grants \$) If this amount incli		here	. ▶ □	31a	
	Total program service expenses (add lines 28a th		. `		32	251,325
Pä	art IV List of Officers, Directors, Trustees, and Key					
	(a) Name and address	(b) Title and average hours per week	(c) Compensation (if not paid,	(d) Contributio employee benefit		(e) Expense account and
		devoted to position	enter -0)	deferred comper		other allowances
Se	e Statement 5					
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Par	Other Information (Note the statement requirements in the instructions for Part VI.)			
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		1
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34		1
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.			
а	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	35a		√
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N	36		✓_
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0		~~~~	لتنا
	Did the organization file Form 1120-POL for this year?	37b	_	✓
	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a		<u>~</u>
39	Section 501(c)(7) organizations. Enter:	1	٠ ءِ ا	
	Initiation fees and capital contributions included on line 9	1-,		
	Gross receipts, included on line 9, for public use of club facilities] .		
	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶		,	-
b	Section 501(c)(3) and (4) organizations Did the organization engage in any section 4958 excess benefit transaction			
	during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule			
	L, Part I	40b		/
С	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶	- ,		
d	Enter amount of tax on line 40c reimbursed by the organization	١٠.	. `	
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed ▶ WI			
42a	The books are in care of ▶ Rebecca Abel Telephone no. ▶ (608		50-99	71
	Located at ► 222 S Hamilton Street, Madison, WI 53703 ZIP + 4 ►	537	03	·
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority		Voc	No
	over a financial account in a foreign country (such as a bank account, securities account, or other financial	42b	res	110
	account)?	i i		\ \ \
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank			1
	and Financial Accounts.	42c	 	
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	420	L	
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		•	▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43			
			Yes	No
	Dallie and adding an extra and a second of the CV (CV AVE 1992)	Γ.	res	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of	44	-	
A.E.	Form 990-EZ	444	 	1
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	1	1
	Yes, Form 990 must be completed instead of Form 990-EZ	1 70		

Part VI	Section 501(c)(3) organizations only and complete the tables for lines 50 at		rganizations mu	ist answer question	ons 46	- 49	
6 Did th	ne organization engage in direct or indirect p	olitical campaign activities	on behalf of or i	n conceition to		Yes	No
	dates for public office? If "Yes," complete S				46		\
	Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II						
	and the second s						√
	ne organization make any transfers to an exe				49a		✓
	s," was the related organization(s) a section	· · · · · · · · · · · · · · · · · · ·			49b		L
	plete this table for the five highest compensations are than \$100,000 of compensations.				emplo	yees) who
(a) N	lame and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation		Expens ount ar allowar	nd
None							
						.,	
							
otal numb	per of other employees paid over \$100,000						
comp	pensation from the organization. If there is no (a) Name and address of each independent contractor		(b) T	ype of service	(c) Con	npensa	ition
None				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(0) 00	.,	
				_			
					-		
					,	•	
otal numb	ber of other independent contractors each re	eceiving over \$100,000 .	. ▶				
	Under penalties of perjury, I declare that I have examinand belief, it is true, correct, and complete. Declarat	ned this return, including accom-	panying schedules an	d statements, and to the mation of which prepare	best of ner has ar	ny kno ny kno	wledge wledge
Sign Here	Signature of officer			Date			
	Rebecca Abel, Executive Director Type or print name and title						
Paid	Preparer's Dana Chalor	Date	- 09 Check if self-employed	Preparer's Identifying	Number (See ins	nuctions
reparer's	Firm's name (or yours Dana Chabot CPA			EIN ►			
Jse Only	if self-employed), address, and ZIP + 4	ladison, WI 53713		Phone no ► (608)	44	2-191	11
May the IF	RS discuss this return with the preparer show	vn above? See instruction	ıs	<u></u> ▶	 ✓ Y	es [No
				F	orm 99	0-EZ	(2008)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

OMB No 1545-0047

2008

Open to Public

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

39 1852601 WISCONSIN WETLANDS ASSOCIATION INC Reason for Public Charity Status (All organizations must complete this part.) (see instructions) The organization is not a private foundation because it is: (Please check only one organization.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H.) ☐ 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). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33\% % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 33% % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). (see instructions) 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. a Type I b Type II **c** ☐ Type III–Functionally integrated e Dy 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 Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? Yes No (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (III) below, the governing body of the supported organization? 11g(ii) (ii) A family member of a person described in (i) above? 11g(iii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? . . . Provide the following information about the organizations the organization supports. (i) Name of supported (iii) Type of organization (ii) EIN (iv) Is the organization (v) Did you notify (vii) Amount of (vi) Is the the organization in organization in col in col (i) listed in your (described on lines 1-9 support organization governing document? above or IRC section col (i) of your (i) organized in the (see instructions)) support? US? Yes Yes Yes No No

	(Complete only if you check	ved the box	on line 5, 7, c	JI O OI FAIL I	·)		
	ion A. Public Support		T #1.655-		4.0		1 (0 = : :
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge			·			
4	Total. Add lines 1-3					ļ	
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	***			,		
6	Public support. Subtract line 5 from line 4.	· · · · · · · · · · · · · · · · · · ·	<u> </u>		<u>' , ' </u>	<u> </u>	
	ion B. Total Support		1 0.0			1	
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7	Amounts from line 4					 	
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10 .	<u> </u>	<u> </u> ,		<u> </u>	ļ	1
12	Gross receipts from related activities, etc					12	
13	First five years. If the Form 990 is for organization, check this box and stop he	re .	<u> </u>	nd, third, fourth			ction 501(c)(3)
	ion C. Computation of Public Su					1	
14	Public support percentage for 2008 (line		•	1, column (f))		14	
15	Public support percentage from 2007 Sc					15	
	33% % support test-2008. If the organiand stop here. The organization qualifies	as a publicly	supported orga	nızation			▶
	331/4 % support test—2007. If the organi box and stop here. The organization qua	ılıfıes as a pub	licly supported	organization .			▶
17a	10%-facts-and-circumstances test – 20 more, and if the organization meets the "facts-and-circum read the facts-and-circum	acts-and-circu	mstances" test,	check this box	and stop here	e. Explain in F	art IV how the
b	10%-facts-and-circumstances test – 2007 more, and if the organization meets the "facts-and-circumstances the "facts-and-circumstances" and circumstances the "facts-and-circumstances" and circumstances test – 2007 more, and if the organization meets the "facts-and-circumstances" and circumstances test – 2007 more, and if the organization meets the "facts-and-circumstances" and circumstances test – 2007 more, and if the organization meets the "facts-and-circumstances" and circumstances test – 2007 more, and if the organization meets the "facts-and-circumstances" and circumstances test – 2007 more, and if the organization meets the "facts-and-circumstances" and circumstances test – 2007 more, and circumstances the "facts-and-circumstances" and circumstances the "facts-and-circumstances" and circumstances the "facts-and-circumstances" and circumstances the "facts-and-circumstances" and circumstances the "facts-and-circumstances" and circumstances the "facts-and-circumstances" and circumstances the "facts-and-circumstances" and circumstances the "facts-and-circumstances" and circumstances the "facts-and-circumstances" and circumstances the "facts-and-circumstances" and circumstances the	acts-and-circur	mstances" test,	check this box	and stop here	. Explain in F	art IV how the

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Sec	tion A. Public Support						
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	138,312	339,578	223,920	311,163	370,187	1,383,160
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	50,068	31,820	29,293	76,553	3,972	191,706
3	Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0			0
5	The value of services or facilities furnished by a governmental unit to the organization without charge	0 188,380	0 371,398	0 253,213	387,716	374,159	0 1,574,866
6 7a	Total. Add lines 1-5	62,150	99,510	126,760	160,733	248,854	698,007
b	received from disqualified persons. Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000	02,130	0	120,700	0	240,004	030,007
	year or \$5,000	62,150	99,510	126,760	160,733	248,854	698,007
8	Public support (Subtract line 7c from line 6.)		2 7 5				876,859
Sec	tion B. Total Support	<u> </u>		L	· - • ·	l,	
Ca	alendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	188,380	371,398	253,213	387,716	374,159	1,574,866
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,285	2,163	3,669	4,328	2,269	13,714
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
с 11	Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	1,285	2,163	3,669	4,328	2,269	13,714
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	0	0	0	0	0	0
13	Total support. (Add lines 9, 10c, 11, and 12)	· * 152				- ;	1,588,580
14	First five years. If the Form 990 is for organization, check this box and stop		•	nd, third, fourth	•		on 501(c)(3) ▶ □
Sec	tion C. Computation of Public Su	pport Percei	ntage	· · · · · · · · · · · · · · · · · · ·			
15	Public support percentage for 2008 (lin					15	55.2 %
16	Public support percentage from 2007 S			7g	· · · · · · · · · · · · · · · · · · ·	16	66.27 %
	tion D. Computation of Investmen						0.86 %
17	Investment income percentage for 200	-		-	olumn (f)) .	17	0.86 %
18	Investment income percentage from 20 33% % support tests—2008. If the organization				 and line 15 ic s	·	
ısa	17 is not more than 331/3 %, check this b						
b	33\% % support tests - 2007. If the organ line 18 is not more than 33\% %, check this	nization did not	check a box or	line 14 or line	19a, and line 1	6 is more than	331/3 %, and _
20	Private foundation. If the organization	' - '	=	•	· -	• • •	_

Schedule A (Fo	Form 990 or 990-EZ) 2008			Page 4
Part IV		t to provide the ide any other ac	e explanation required by dditional information. (see	Part II, line 10; instructions)
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		~- ~-		
			••••••	
		•••••		•
				• • • • • • • • • • • • • • • • • • • •
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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ To be completed by organizations described below.

▶ Attach to Form 990 or Form 990-EZ.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, 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.

		that have NOT filed Form 5768 (elections," to Form 990, Part IV, line 5 (Proxy		(h)) Complete Part II-B. Do	o not complete Part II-A
• :	Section 501(c)(4), (5), or (6) orga	nizations Complete Part III.			
Nar	me of organization			1 ' '	er identification number
	SCONSIN WETLANDS ASS				1852601
Par		ed by all organizations exemptions for Schedule C for details.		n 501(c) and section	527 organizations.
1	Provide a description of th	 organization's direct and indirect 	t political campai	gn activities in Part IV	
2	Political expenditures .			▶ \$	
3	Volunteer hours				
Pai		ed by all organizations exemions for Schedule C for details		n 501(c)(3).	
1	Enter the amount of any e	xcise tax incurred by the organiza	tion under section	1 4955 ▶ \$	
2		xcise tax incurred by organization			
3		l a section 4955 tax, did it file For	m 4720 for this ye	ear?	🖳 Yes 🛄 No
					· · 🗌 Yes 🔲 No
	If "Yes," describe in Part I'	v. ed by all organizations exem	nt under sectio	n 501/a) avaant sa	otion 501(a)(2)
rai		ions for Schedule C for details			
1		expended by the filing organization		7 exempt function	
2		ing organization's funds contribute			
_	527 exempt function activi	- -	_	> \$	
3	Total of direct and indirect	exempt function expenditures Ac	dd lines 1 and 2 a	nd enter here and	
4		file Form 1120-POL for this year?			🗌 Yes 🗌 No
5		and employer identification number			
Ŭ		unt paid and indicate if the amoun			
	contributions received and p	promptly and directly delivered to a	separate political of	rganization, such as a se	eparate segregated fund
	or a political action committe	ee (PAC). If additional space is need	ded, provide inform	nation in Part IV	
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds if none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

d Grassroots non-taxable amount

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Sche	dule C (Form 990 or 990-EZ) 2008					Page 2
Pa	rt II-A To be completed by orga (election under section 5					768
<u> </u>	Check ► ☐ if the filing organization	· ''			dotano.	
B. (Check ▶ ☐ if the filing organization	checked box	A and "limited	control" provision	ons apply.	
		bying Expendi	tures		(a) Filing organization's totals	(b) Affiliated group totals
12	Total lobbying expenditures to influence	e public opinio	n (grass roots lob	bying)		
	Total lobbying expenditures to influence					
c		-				
d						
е	Total exempt purpose expenditures (a					
f	Lobbying nontaxable amount. Enter the columns.					
	If the amount on line 1e, column (a) or (b) is: Not over \$500,000		nontaxable amoun	t is:	2 6 6 5 A	
	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	2.2.	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess of	over \$1,500,000	, ,	
	Over \$17,000,000	\$1,000,000				
g	Grassroots nontaxable amount (enter	25% of line 1f)				
h	Subtract line 1g from line 1a. Enter -0	- if line g is mo	re than line a .			
i	Subtract line 1f from line 1c. Enter -0-	if line f is more	e than line c .			
j	If there is an amount other than zero of section 4911 tax for this year?		or line 1i, did the o		orm 4720 reporting	☐ Yes ☐ No
	4-) (Some organizations that m columns below. See	ade a section		o not have to co		five
	Lobbyir	g Expenditure	s During 4-Year	Averaging Perio	d	
	Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2 a	Lobbying non-taxable amount					
t	Lobbying ceiling amount (150% of line 2a, column(e))		F 1, 1 > 1	,		
c	Total lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2008

	5768 (election under section 501(h)). See the instructions for Schedule C for		IIIS. a)		(b)	
		Yes	No		mount	<u> </u>
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:		* 1.35		1. 3 % 1.	#, ·
а	Volunteers?		1	. A.		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1)? .	1		<u> </u>	7.57	
С	Media advertisements?		1			
d	Mailings to members, legislators, or the public?		✓			
е	Publications, or published or broadcast statements?	L	1			
f	Grants to other organizations for lobbying purposes?		✓			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	✓				900
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means? .		1	ļ		
i	Other activities? If "Yes," describe in Part IV	<u></u>	√			
j	Total lines 1c through 1i					900
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .		<u> </u>		(- ₇	
b	If "Yes," enter the amount of any tax incurred under section 4912	ļ. · .	. ,	<u> </u>		
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.		<u> </u>	ļ	r .	•
d Date	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? till-A To be completed by all organizations exempt under section 501(c)(4), sec	tion	501/	c)(5)		
u Gu	section 501(c)(6). See the instructions for Schedule C for details.	Juon	JU 10	C)(O), (,,	
			-		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	ــــــ	<u> </u>
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	ļ	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		<u> </u>
Par	t III-B To be completed by all organizations exempt under section 501(c)(4), sec section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered "No"					
	question 3 is answered "Yes." See Schedule C instructions for details.	Un	II Fa	II (111-7	٦,	
			1	1		
1	Dues, assessments and similar amounts from members		. : -	ļ -		
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).	S 01	, ,			
_			2a			
a b	Current 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	f the				
•	excess does the organization agree to carryover to the reasonable estimate of nondeductible lob		<u> </u>			
	and political expenditure next year?	, ,	4			
5	Taxable amount of lobbying and political expenditures (line 2c total minus 3 and 4)		5			
Par	t IV Supplemental Information					
Com	plete 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, lin	e 1ı
	complete this part for any additional information.					
See	Statement 6				, . 	
•					 .	
•						
•		• • • • • •	· - • • · · ·			

ichedule C (Fo	rm 990 or 990-EZ) 200	8 Page 4
Part IV	Supplementa	I Information (continued)
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Statement 1 : Other Expenses Schedule

Statement 2 : Other Assets

Statement 3 : Liabilities Schedule

Statement 4 : Program Service Accomplishments

Statement 5 : Officers, Directors, Trustees and Key Employees Compensation

Statement 6 : Supplemental Information

Statement 1

WISCONSIN WETLANDS ASSOCIATION INC 39-1852601 Form 990-EZ

Page 1

Line Number: Part I Line 16 OtherExpensesSchedule2

Other Expenses Schedule

Description	Amount
Conferences and workshops	\$2,016
Travel and meetings	\$3,208
Supplies and equipment	\$9,787
Telephone and internet	\$2,264
Depreciation	\$1,101
Insurance	\$1,971
Dues, fees, and other	\$3,280
Total:	\$23,627

WISCONSIN WETLANDS ASSOCIATION INC 39-1852601

Statement 2 Form 990-EZ

Page: 1

Line Number: Part II Line 24 OtherAssetsSchedule3

Other Assets

	воу	EOY
Description	Amount	Amount
Unconditional promises to give	\$30,000	\$50,000
Accounts receivable	\$5,961	\$8,013
Investments	\$0	\$4,743
Prepaid expenses	\$487	\$2,739
Equipment	\$1,570	\$469
Total:	\$38,018	\$65,964

Statement 3

Form 990-EZ

Page 1

Line Number: Part II Line 26 OtherLiabilitiesSchedule3 WISCONSIN WETLANDS ASSOCIATION INC 39-1852601

Liabilities Schedule

Description	воу	EOY
·	Amount	Amount
Accounts payable and accrued expenses	\$22,031	\$12,275
Total:	\$22,031	\$12,275

Statement 4

Statement 4

Form: 990-EZ Page. 2

Line Number: Part III Line 28

ProgramServiceAccomplishmentStatement

Program Service Accomplishments

WISCONSIN WETLANDS ASSOCIATION INC

39-1852601

includes **Program Grants And** Foreign Service **Achievement** Allocations Grants **Expenses** Natural Resources Conservation & Protection Uphold effective wetland \$0 \$100,648 regulations, remove tax barners to private wetland conservation, monitor permitting of wetland development, and advise communities about the defense of wetlands \$0 \$150,677 Environmental Education Programs Develop and present education and outreach programs to diverse audiences of laypersons and experts, and promote scientific research on matters related to wetland conservation Total: \$251,325 Statement 5 Form: 990-EZ

Page: 2

Line Number: Part IV
OfficersDirectorsEtcStatement

Officers, Directors, Trustees and Key Employees Compensation

Name	Title and Hrs	Compensation	Benefits	Expense
Carl Sinderbrand PO Box 1767 Madison, WI 53701	Board Member 2	\$0	\$0	\$0
Alice Thompson 1514 Menomonee Avenue South Milwaukee, WI 5317	Board member 2 2	\$0	\$0	\$0
Bruce Moore 721 Oneida Place Madison, WI 53711	Board Member 2	\$0	\$0	\$0
Eugene Roark 16 Grand Avenue Madison, WI 53705	Board Member 2	\$0	\$0	\$0
Rebecca Abel 222 South Hamilton Street Suite 1 Madison, WI 53703	Exec Director/CEO 40	\$65,508	\$3,930	\$0
Mary Linton 1009 Monroe Street Fort Atkinson, WI 53538	President 4	\$0	\$0	\$0
Kım Genich 2020 West University Avenue Madison, WI 53726	Vice-President 2	\$0	\$0	\$0
Tod Highsmith 702 Schiller Court Madison, WI 53704	Board Member 2	\$0	\$0	\$0
John Ebsen 1 Courtland Circle Madison, WI 53711	Treasurer 2	\$0	\$0	\$0
Scott Froehlke W3172 County Road E Montello, WI 53949	Board Member 2	\$0	\$0	\$0
Paul Zedler 550 N Park Street Madison, WI 53706	Board Member 2	\$0	\$0	\$0
Penny Shackelford 222 South Hamilton Street Suite 1 Madison, WI 53703	Board member 2	\$0	\$0	\$(
John Wetzel 222 South Hamilton Street Suite 1 Madison, WI 53703	Board member 2	\$0	\$0	\$(
Total:	······	\$65,508	\$3,930	\$(

WISCONSIN WETLANDS ASSOCIATION INC 39-1852601

Statement 6 Form: Schedule C

Page: 3

Line Number: Part IV
Form990ScheduleCPartIV

Supplemental Information

		Explanation:
Reference:	Schedule C, Part II-B, Line 1	The Association advocates for policy measures that are beneficial to conservation of wetland areas in Wisconsin
Identifier:	SchC_P2B_S00_L01	