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EXTENSION ATTACHED

Form **990-EZ**

Short Form

Return of Organization Exempt From Income Tax

OMB No 1545-1150

2008Department of the Treasury
Internal Revenue Service

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 org- anizations 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

Open to Public
Inspection

A For the 2008 calendar year, or tax year beginning Oct 1, 2008, and ending Sep 30, 2009

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Termination
☐ Amended return
☐ Application pending

C Name of organization
Georgia River Network, Inc.
 Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
126 South Milledge Avenue Suite E3
 City or town, state or country, and ZIP + 4
Athens GA 30605-5666

D Employer identification number
58-2404112

E Telephone number
(706) 549-4508

F Group Exemption Number ☐

G Accounting method: ☒ Cash ☐ Accrual
 Other (specify) ▶

H Check ☐ if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).

I Website: ▶ N/A

J Organization type (check only one) — ☒ 501(c) (3) (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$1,000,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 513,610.

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

1	Contributions, gifts, grants, and similar amounts received	1	300,322.
2	Program service revenue including government fees and contracts	2	9.
3	Membership dues and assessments	3	34,988.
4	Investment income	4	1,592.
5a	Gross amount from sale of assets other than inventory	5a	
5b	Less: cost or other basis and sales expenses	5b	
5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) (att sch)	5c	
6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here ☐		
6a	Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	174,973.
6b	Less: direct expenses other than fundraising expenses	6b	126,636.
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	48,337.
7a	Gross sales of inventory, less returns and allowances	7a	
7b	Less: cost of goods sold	7b	
7c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
8	Other revenue (describe ▶ <u>Miscellaneous Income</u>)	8	1,726.
9	Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8)	9	386,974.
10	Grants and similar amounts paid (attach schedule)	10	117,600.
11	Benefits paid to or for members	11	
12	Salaries, other compensation, and employee benefits	12	202,054.
13	Professional fees and other payments to independent contractors	13	10,635.
14	Occupancy, rent, utilities, and maintenance	14	22,672.
15	Printing, publications, postage, and shipping	15	7,727.
16	Other expenses (describe ▶ <u>See Other Expenses Statement</u>)	16	117,743.
17	Total expenses (add lines 10 through 16)	17	478,431.
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	-91,457.
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	376,540.
20	Other changes in net assets or fund balances (attach explanation)	20	
21	Net assets or fund balances at end of year (Combine lines 18 through 20)	21	285,083.

Part II Balance Sheets. If total assets on line 25, column (B) are \$2,500,000 or more, file Form 990 instead of Form 990-EZ (See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	371,132.	280,631.
23 Land and buildings	0.	0.
24 Other assets (describe ▶ <u>See L-24 Stmt</u>)	6,849.	5,388.
25 Total assets	377,981.	286,019.
26 Total liabilities (describe ▶ <u>See L-26 Stmt</u>)	1,441.	936.
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	376,540.	285,083.

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

Form 990-EZ (2008)

9-9 18

Part III Statement of Program Service Accomplishments (See the instructions.)**Expenses**

What is the organization's primary exempt purpose? Promote the conservation of Georgia rivers and watersheds
 Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, or other relevant information for each program title.

(Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts; optional for others)

28	<u>To perform statewide policy analysis and campaign implementation in order to serve as a voice for local watershed groups, by annually polling to determine pressing issues and need for a statewide plan (Advocate)</u> (Grants \$ 0.) If this amount includes foreign grants, check here ☐	28a	46,653.
29	<u>To provide educational materials and training opportunities in order to promote an informed network of clean water advocates, by providing needed information and skills through expert led workshops. (Engage)</u> (Grants \$ 0.) If this amount includes foreign grants, check here ☐	29a	144,352.
30	<u>To build local watershed group capacity and to sustain an effective network of watershed associations, by offering assistance in group formation, planning, development, and support. (Empower)</u> (Grants \$ 117,600.) If this amount includes foreign grants, check here ☐	30a	181,415.
31	Other program services (attach schedule) ☐ If this amount includes foreign grants, check here ☐	31a	
32	Total program service expenses (add lines 28a through 31a) ☐	32	372,420.

Part IV List of Officers, Directors, Trustees, and Key Employees. (List each one even if not compensated. See the instrs.)

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
April Ingle 126 S. Milledge Avenue Athens, GA 30605	Executive Director 40.00	50,928.	0.	
David Wenner 2941 Flat Rock Rd. Watkinsville GA 30677	Secretary 2.00	0.	0.	
Dana Skelton 126 S. Milledge Avenue Athens, GA 30605	Director of Admin. 40.00	43,200.	0.	
William Perry 955 Delaware Ave. SE Atlanta GA 30316	Director 2.00	0.	0.	
John Branch 2501 Asbury Ct. Decatur GA 30033	Director 2.00	0.	0.	
Dorinda Dallmeyer 3246 Booger Hill Rd. Danielsville GA 30633	Treasuer 2.00	0.	0.	
Mickey Desai 3240 Lost Valley Dr. Jonesboro GA 30236	Director 2.00	0.	0.	
Bruno Giri 112 Whitehead Rd. Athens GA 30606	Director 2.00	0.	0.	
Kimberly Cofer Harris, J.D. 119 Parkersburg Rd. Savannah GA 31406	Director 2.00	0.	0.	
Duncan Hughes 301 Wildwood Circle Clarkesville GA 30523	Director 2.00	0.	0.	
Cynthia McEwen 507 Cheiftan Ct. Woodstock GA 30188	Director 2.00	0.	0.	
See List of Officers, Directors, Trustees, & Key Employees Stmt				

Part V Other Information (Note the statement requirement in General Instruction V.)

	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		X
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		X
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		
a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting, and proxy tax requirements?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?		
36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If 'Yes,' complete applicable parts of Schedule N		X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions 37a 13,435.		
b Did the organization file Form 1120-POL for this year?		X
38a 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?		X
b If 'Yes,' complete Schedule L, Part II and enter the total amount involved 38b		
39 501(c)(7) organizations Enter:		
a Initiation fees and capital contributions included on line 9 39a		
b Gross receipts, included on line 9, for public use of club facilities 39b		
40a 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶		
b 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		X
c 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 ▶		
e 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		X
41 List the states with which a copy of this return is filed ▶ Georgia		

42a The books are in care of ▶ Georgia River Network, Inc. Telephone no. ▶ (706) 549-4508
 Located at ▶ 126 S. Milledge Avenue Athens GA ZIP + 4 ▶ 30605-5666

b 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, securities account, or other financial account)?
 If 'Yes,' enter the name of the foreign country ▶

	Yes	No
42b		X
42c		X

See the instructions for exceptions and filing requirements for **Form TD F 90-22.1, Report of a Foreign Bank and Financial Accounts.**

c At any time during the calendar year, did the organization maintain an office outside of the U.S. ?
 If 'Yes,' enter the name of the foreign country: ▶

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**

44 Did the organization maintain any donor advised funds? If 'Yes,' Form 990 must be completed instead of Form 990-EZ

	Yes	No
44		X
45		X

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

Part VI Section 501(c)(3) organizations only. All section 501(c)(3) organizations must answer questions 46-49 and complete the tables for lines 50 and 51.

	Yes	No
46 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		X
47 Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	X	
48 Is the organization operating a school as described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E		X
49a Did the organization make any transfers to an exempt non-charitable related organization?		X
b If 'Yes,' was the related organization(s) a section 527 organization?		

50 Complete this table for the five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name 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 and deferred compensation	(e) Expense account and other allowances
None				
Total number of other employees paid over \$100,000				

51 Complete this table for the five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter 'None.'

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		
Total number of other independent contractors receiving over \$100,000		

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.			
	Signature of officer	Date		
	April Ingle Executive Director			
Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed	Preparer's Identifying Number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4			

May the IRS discuss this return with the preparer shown above? See instructions

BAA

Yes ☒ No ☐

Form 990-EZ (2008)

Department of the Treasury
Internal Revenue Service

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

Name of the organization

Georgia River Network, Inc.

Employer identification number

58-2404112

Part I	Reason for Public Charity Status (All organizations must complete this part.) (see instructions)
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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).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)
- 3 ☐ A hospital or cooperative hospital service organization described in **section 170(b)(1)(A)(iii).** (Attach Schedule H.)
- 4 ☐ 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: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☐ 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)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II)
- 9 ☒ An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions – subject to certain exceptions, and (2) no more than 33-1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)
- 10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).** (see instructions)
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or 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 d ☐ Type III– Other
- e ☐ 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).
- f ☐ If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization, check this box _____
- g 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) and (iii) below, the governing body of the supported organization?

(ii) a family member of a person described in (i) above?

(iii) a 35% controlled entity of a person described in (i) or (ii) above?

h Provide the following information about the organizations the organization supports

	Yes	No
11 g (i)		
11 g (ii)		
11 g (iii)		

[illegible]

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

Schedule A (Form 990 or 990-EZ) 2008

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar 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 'unusual grants'.)						
2 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3 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.						
4 Total. Add lines 1-3						
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						

Section B. Total Support

Calendar 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						
12 Gross receipts from related activities, etc. (see instructions)					12	

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2008 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage for 2007 Schedule A, Part IV-A, line 26f	15	%

16a 33-1/3 support test – 2008. If the organization did not check the box on line 13, and the line 14 is 33-1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ ☐

b 33-1/3 support test – 2007. If the organization did not check a box on line 13, or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization. ▶ ☐

17a 10%-facts-and-circumstances test – 2008. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ▶ ☐

b 10%-facts-and-circumstances test – 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part IV how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization. ▶ ☐

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

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.)

Section A. Public Support

Calendar year (or fiscal yr 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 "unusual grants.") ..	186,480.	158,997.	302,378.	350,506.	335,310.	1,333,671.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose ..	34,471.	26,985.	26,442.	34,428.	48,346.	170,672.
3 Gross receipts from activities that are not an unrelated trade or business under section 513 ..						
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 1-5 ..	220,951.	185,982.	328,820.	384,934.	383,656.	1,504,343.
7a Amounts included on lines 1, 2, 3 received from disqualified persons ..						
b 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 ..						
c Add lines 7a and 7b ..						
8 Public support. (Subtract line 7c from line 6) ..						1,504,343.

Section B. Total Support

Calendar year (or fiscal yr beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6 ..	220,951.	185,982.	328,820.	384,934.	383,656.	1,504,343.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ..	524.	2,516.	3,645.	5,174.	1,592.	13,451.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 ..						
c Add lines 10a and 10b ..	524.	2,516.	3,645.	5,174.	1,592.	13,451.
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) ..	45.	309.	223.	147.	1,726.	2,450.
13 Total support. (add lns 9, 10c, 11, and 12) ..						1,520,244.
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here .. ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2008 (line 8, column (f) divided by line 13, column (f)) ..	15	98.95 %
16 Public support percentage from 2007 Schedule A, Part IV-A, line 27g ..	16	98.86 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2008 (line 10c, column (f) divided by line 13, column (f)) ..	17	0.88 %
18 Investment income percentage from 2007 Schedule A, Part IV-A, line 27h ..	18	0.77 %

19a 33-1/3 support tests – 2008. If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization .. ☒

b 33-1/3 support tests – 2007. If the organization did not check a box on line 14 or 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization .. ☐

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

Part IV **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. Provide any other additional information. (see instructions)Other Income Part III, Line 12Description: Other income2004: 0.2006: 223.2007: 147.2008: 1726.Description: Rebates and refunds2004: 45.2005: 309.

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

► **To be completed by organizations described below.**

► **Attach to Form 990 or Form 990-EZ.**

OMB No 1545-0047

2008

**Open to Public
Inspection**

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

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax), then

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

Name of organization

Georgia River Network, Inc.

Employer identification number

58-2404112

Part I-A To be completed by all organizations exempt under section 501(c) and section 527 organizations.

See the instructions for Schedule C for details.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures

► \$

3 Volunteer hours

Part I-B To be completed by all organizations exempt under section 501(c)(3).

See the instructions for Schedule C for details.

1 Enter the amount of any excise tax incurred by the organization under section 4955

► \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955

► \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?

☐ Yes ☐ No

4a Was a correction made?

☐ Yes ☐ No

b If 'Yes,' describe in Part IV.

Part I-C To be completed by all organizations exempt under section 501(c), except section 501(c)(3).

See the instructions for Schedule C for details.

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities

► \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities

► \$

3 Total of direct and indirect exempt function expenditures. Add lines 1 and 2 and enter here and on Form 1120-POL, line 17b

► \$

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

☐ Yes ☐ No

5 State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. Enter the amount paid and indicate if the amount was paid from the filing organization's funds or were political contributions received and promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's own internal 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-

Part II-A To be completed by organizations exempt under section 501(c)(3) that filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

- A** Check ☐ if the filing organization belongs to an affiliated group.
- B** Check ☐ if the filing organization checked box A and 'limited control' provisions apply.

Limits on Lobbying Expenditures —
(The term 'expenditures' means amounts paid or incurred.)
(a) Filing
organization's totals(b) Affiliated
group totals

- 1 a** Total lobbying expenditures to influence public opinion (grass roots lobbying)
- b** Total lobbying expenditures to influence a legislative body (direct lobbying)
- c** Total lobbying expenditures (add lines 1a and 1b)
- d** Other exempt purpose expenditures
- e** Total exempt purpose expenditures (add lines 1c and 1d)

- f** Lobbying nontaxable amount. Enter the amount from the following table in both columns.

If the amount on line 1e, column (a) or (b) is:

The lobbying nontaxable amount is:

Not over \$500,000

20% of the amount on line 1e.

Over \$500,000 but not over \$1,000,000

\$100,000 plus 15% of the excess over \$500,000.

Over \$1,000,000 but not over \$1,500,000

\$175,000 plus 10% of the excess over \$1,000,000

Over \$1,500,000 but not over \$17,000,000

\$225,000 plus 5% of the excess over \$1,500,000

Over \$17,000,000

\$1,000,000.

- g** Grassroots nontaxable amount (enter 25% of line 1f)
- h** Subtract line 1g from line 1a. Enter -0- if line g is more than line a
- i** Subtract line 1f from line 1c. Enter -0- if line f is more than line c

- 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?

☐ Yes ☐ No**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) Total
2 a Lobbying non-taxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

BAA

Schedule C (Form 990 or 990-EZ) 2008

Part II-B To be completed by organizations exempt under section 501(c)(3) that have NOT filed Form 5768 (election under section 501(h)). See the instructions for Schedule C for details.

	(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:			
a Volunteers?	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X		
c Media advertisements?	X		12,193.
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?	X		595.
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		648.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means?	X		0.
i Other activities? If 'Yes,' describe in Part IV		X	
j Total lines 1c through 1i			13,436.
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
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?			

Part III-A To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). See the instructions for Schedule C for details.

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

Part III-B To be completed by all organizations exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, question 3 is answered 'Yes.' See Schedule C Instructions for details.

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).		
a 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 (line 2c total minus 3 and 4)	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.

Pt II-B Line 1i Georgia River Network's expenditures were for staff time spent preparing and disseminating information about proposed legislation that was important to the health of Georgia's waterways. Staff time was also spent preparing media to educate the public about proposed legislation that was important to the health of Georgia's waterways. Staff time and travel expenditures were

Part IV Supplemental Information (continued)

made for direct contact with legislators, their staffs, government officials,
or a legislative body to educate and inform legislators/staff/officaials,
via e-mail, phone, or in person, about proposed legislation that was important
to the health of Georgia's waterways.

Georgia River network coordinated and paid for television ads and constituent
phone calls on proposed legislation that was important to the
health of Georgia's waterways.

Part II Fundraising Events. Complete if the organization answered 'Yes' to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1 <u>Paddle Georgia</u> (event type)	(b) Event #2 <u>Auction</u> (event type)	(c) Other Events <u>NONE</u> (total number)	(d) Total Events (Add col. (a) through col. (c))
REVENUE	1 Gross receipts	165,498.	5,030.		170,528.
	2 Less: Charitable contributions				
	3 Gross revenue (line 1 minus line 2)	165,498.	5,030.		170,528.
DIRECT EXPENSES	4 Cash prizes				
	5 Non-cash prizes				
	6 Rent/facility costs				
	7 Other direct expenses	123,778.	0.		123,778.
	8 Direct expense summary. Add lines 4- through 7 in column (d)				123,778.
	9 Net income summary. Combine lines 3 and 8 in column (d)				46,750.

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col. (a) through col. (c))
REVENUE	1 Gross revenue				
DIRECT EXPENSES	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	☐ Yes _____ % ☐ No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Combine lines 1 and 7 in column (d)				

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

a Is the organization licensed to operate gaming activities in each of these states?

b If 'No,' Explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

b If 'Yes,' Explain: _____

11 Does the organization operate gaming activities with nonmembers?

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

	YES	NO
9a		
10a		
11		
12		

13 Indicate the percentage of gaming activity operated in:

13a	The organization's facility	%
13b	An outside facility	%

14 Provide the name and address of the person who prepares the organization's gaming/special events books and records:

Name: ▶ _____

Address: ▶ _____

15a Does the organization have a contact with a third party from whom the organization receives gaming revenue?**15a****b** If 'Yes,' enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____**c** If 'Yes,' enter name and address:

Name: ▶ _____

Address: ▶ _____

16 Gaming manager information

Name: ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided: ▶ _____

☐ Director/officer☐ Employee☐ Independent contractor**17** Mandatory distributions**a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?**17a****b** Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year: ▶ \$ _____

Form **4562**Department of the Treasury
Internal Revenue Service (99)**Depreciation and Amortization**
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No 1545-0172

2008Attachment
Sequence No **67**

Name(s) shown on return

Georgia River Network, Inc.

Identifying number

58-2404112

Business or activity to which this form relates

Form 990 / Form 990EZ

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount See the instructions for a higher limit for certain businesses	1	\$250,000.
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	\$800,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2007 Form 4562	10	
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instrs)	11	
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2009. Add lines 9 and 10, less line 12 ▶	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II 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	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	2,240.

Part III MACRS Depreciation (Do not include listed property.) (See instructions)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2008	17	
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 2008 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only — see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27.5 yrs	MM	S/L	
i Nonresidential real property			27.5 yrs	MM	S/L	
			39 yrs	MM	S/L	
				MM	S/L	

Section C – Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System

20a Class life				S/L	
b 12-year			12 yrs	S/L	
c 40-year			40 yrs	MM	S/L

Part IV Summary (See instructions)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations — see instructions	22	2,240.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

Form 990-EZ
Part II

Other Assets and Liabilities

2008

Name as Shown on Return
Georgia River Network, Inc.

Employer Identification No.
58-2404112

Line 24 - Other Assets:	Beginning of Year	End of Year
Computer Equipment	14,160.	14,960.
Accumulated Depreciation	-8,542.	-10,782.
Deposits	1,210.	1,210.
Accounts receivable	21.	0.
Totals to Form 990-EZ, Part II, line 24	6,849.	5,388.
Line 26 - Total Liabilities:	Beginning of Year	End of Year
Credit Card Liability	1,441.	936.
Totals to Form 990-EZ, Part II, line 26	1,441.	936.

Form 990-EZ, Part I, Line 16

Other Expenses Statement

Other expenses (describe)

Bank Charges	635.
Conferences	2,449.
Depreciation	2,240.
Dues and Subscriptions	3,627.
Gifts and Flowers	62.
Insurance	3,235.
Licenses and permits	30.
Miscellaneous	1,409.
Payroll Taxes	14,539.
Project Costs	79,072.
Supplies	2,425.
Travel	7,716.
Website Development	274.
Workshops	30.
Total	117,743.

Form 990-EZ, Page 2, Part IV

List of Officers, Directors, Trustees, & Key Employees Stmt

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account and other allowances
Business ☐ Person ☐ Christine Rodick 150 Rock and Shoals Drive Athens GA 30605 Foreign city _____ Foreign country _____	Title Director Hours/Week 2.00	0.	0.	
Business ☐ Person ☐ Dee Stone 912 W. Wesley Rd. NW Atlanta GA 30327 Foreign city .. _____ Foreign country .. _____	Title Director Hours/Week 2.00	0.	0.	
Business ☐ Person ☐ Julie Stuart 585 Lakeshore Drive Berkeley Lake GA 30096 Foreign city _____ Foreign country . _____	Title President Hours/Week 2.00	0.	0.	

Supporting Statement of:

Form 990-EZ/Line 1

Description	Amount
Contributions	20,194.
Foundation and Corporate Grants	279,328.
Inkind Gifts	800.
Total	<u>300,322.</u>

Supporting Statement of:

Form 990-EZ/Line 2

Description	Amount
Confrence Revenue	11,933.
Confrence Expenses	-11,924.
Total	<u>9.</u>

Supporting Statement of:

Form 990-EZ/Line 4

Description	Amount
Interest	131.
Dividends	1,461.
Total	<u>1,592.</u>

Supporting Statement of:

Form 990-EZ/Line 6a

Description	Amount
Paddle Georgia	165,498.
Other Events	9,475.
Total	<u>174,973.</u>

Supporting Statement of:

Form 990-EZ/Line 6b

Description	Amount
Paddle Georgia direct expenses	123,778.
Other event expenses	2,858.
Total	<u>126,636.</u>

Supporting Statement of:

Form 990-EZ/Line 12

Description	Amount
Personnel - Salaries	179,053.
Personnel - Intern Wages	7,168.
Personnel - Benefits	15,833.
Total	<u>202,054.</u>

Supporting Statement of:

Form 990-EZ/Line 13

Description	Amount
Consulting	4,600.
Contract Labor	190.
Accounting Fees	5,845.
Total	<u>10,635.</u>

Supporting Statement of:

Form 990-EZ/Line 14

Description	Amount
Rent	19,620.
Repairs and maintenance	113.
Telephone	2,939.
Total	<u>22,672.</u>

Supporting Statement of:

Form 990-EZ/Line 15

Description	Amount
Literature and Publications	258.
Postage and Delivery	3,554.
Printing and Publications	3,915.
Total	<u>7,727.</u>

Supporting Statement of:

Form 990-EZ/Line 22, Column (A)

Description	Amount
Cash	85,228.
Investments	285,904.
Total	<u>371,132.</u>

Supporting Statement of:

Form 990-EZ/Line 22, Column (B)

Description	Amount
Cash	63,265.
Investments	217,366.
Total	<u>280,631.</u>

Supporting Statement of:

Sch. A, page 3/Gross Receipts-1

Description	Amount
Paddle Georgia	26,091.
Conference	8,031.
Merchandise sold	349.
Total	<u>34,471.</u>

Summary of Purpose of All Grants:

Thanks to a grant from the Turner Foundation, Georgia River Network offers grants for watershed work by grassroots river groups in Georgia that address water efficiency needs or documented water quality degradation from non-point source pollution through advocacy, campaigns, on the ground project implementation, or legal work.

2008 Grant Recipients

1. Altamaha Riverkeeper – Darien, GA (10,000)

To establish recognition and enforcement of adequate buffers for coastal salt marsh and fresh water systems by assessing legal and legislative options for addressing the problem; and developing legal, legislative, education & advocacy strategies based on the assessment. ARK will challenge Glynn County's lack of buffer enforcement and/ or work with citizens to change the law to ensure buffer protection for salt marsh and fresh water streams.

2. Chattooga Conservancy – Clayton, GA (\$10,000)

To organize a campaign that will result in a joint resolution by Clayton and Rabun County to implement a Water Leak Detection and Repair Program that would aim to reduce water loss from water supply lines in Clayton by 10% within one year. The joint resolution will pledge to follow a specific plan to fund and implement the leak detection and repair program with revenue savings placed in a dedicated fund for future sewer infrastructure repair.

3. Coosa River Basin Initiative – Rome, GA (\$10,000)

To address land development and associated non-point source pollution in the Upper Coosa River Basin by facilitating Get the Dirt Out Trainings, monitoring active construction sites and addressing stream buffer variance applications.

4. Ogeechee Canoochee Riverkeeper – Statesboro, GA (\$10,000)

To educate communities, respond to citizen complaints, and advocate for meaningful solutions to prevent nonpoint source pollution. This will be accomplished by conducting Get the Dirt Out Trainings, continuing staff monitoring of the watershed, responding to hotline calls and maintaining a matrix to track effectiveness of complaint responses, advocating for stronger local and state regulation of nonpoint source pollution, reviewing and commenting on the Coastal Supplement to the Georgia Stormwater Management Manual, advocating for good local ordinances promoting post-construction stormwater reduction, retention and treatment; advocating for state regulations/statutory changes that reduce the impact of post-construction stormwater on the sensitive marsh ecosystem; and advocating for state regulations/statutory changes to the buffer language to ensure protections for small flatwoods streams.

5. Satilla Riverkeeper –Waynesville, GA (\$10,000)

To position Brantley County to pass local ordinances to protect wetlands and riparian floodplains and to manage stormwater flows in the watershed and to move forward the riverine habitat acquisition of the Hog Pen Bluff tract by providing technical input and building relationships to foster the purchase of this tract for public use.

6. Savannah Riverkeeper – Augusta, GA (\$7,600)

To create, update and maintain the interactive, statewide, Get the Dirt Out database for LIA contacts and make changes to the website to support the database; (\$2,000), to create a

database for Get the Dirt Out reports and follow up (\$3,500), to update the Get the Dirt Out website to reflect changes in the general permit and DNR rules. (\$2,100), and to continue to make progress on completing work funded in 2007 to train and provide manuals to 200 Get the Dirt Out Volunteers.

2009 Turner Mini-Grant Recipients

1. Altamaha Riverkeeper (\$10,000)

To work with volunteers to investigate, monitor, and report on development sites to ensure proper storm water management and buffers to reduce sedimentation and non-point source pollution on problem sites.

2. Altamaha Riverkeeper - Oconee (\$8,000)

To encourage the Athens-Clarke County government to assist local restaurant owners in improving water efficiency within their business.

3. Coosa River Basin Initiative (\$10,000)

To improve stream health and protect aquatic habitat by preventing non-point source pollution. Partner with the City of Rome Water & Sewer Dept. to identify homes with downspouts connected to sanitary sewer lines and encourage homeowners to disconnect their downspouts and redirect this stormwater flow to rain barrels and their home landscape.

4. Savannah Riverkeeper (\$7,000)

To train key personnel from each watershed group in the use of the Get the Dirt Out Database, complete the LIA contact database, mount a campaign to convince Richmond County that conservation pricing is needed for water conservation, and hold 3 Get the Dirt Out trainings for volunteers.

5. Satilla Riverkeeper (\$10,000)

To finalize a TMDL implementation plan for an impaired segment in the lower river and develop local zoning code in Brantley County, including stream and river buffers, floodplain ordinances, and wetland ordinances.

6. Little Tennessee Watershed Association (\$5,000)

To combat interbasin transfers between the Little Tennessee River and the Chattooga River basins through local and state advocacy that steers the development of municipal sewer and drinking water services in Rabun County away from this practice.

7. Ogeechee Canoochee Riverkeeper (\$10,000)

To identify sources of pollution and hold polluters accountable by actively responding to citizen complaints, tracking each complaint, reporting issues to government agencies, and tracking the responsiveness of government.

Form 990-EZ, Part I, Line 10

Grants and Similar Amounts PaidPurpose of Payment . . . 2008 Grant - see attached

Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
<u>Empowerment Program</u>	Business . ☐ Person . ☐		
	<u>Altamaha Riverkeeper - Darien</u>	<u>Member</u>	
	<u>PO Box 2642</u>		
	<u>Darien</u> <u>GA</u> <u>31305</u>		<u>10,000.</u>

If property other than cash was given, the following additional information needs to be provided:

Description of Property _____

Date of Gift . . . _____

Book Value	How Book Value Determined
FMV	How FMV Determined

Purpose of Payment . . . 2009 Grant - see attached

Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
<u>Empowerment Program</u>	Business ☐ Person ☐		
	<u>Altamaha Riverkeeper- Darien</u>	<u>Member</u>	
	<u>PO Box 2642</u>		
	<u>Darien</u> <u>GA</u> <u>31305</u>		<u>10,000.</u>

If property other than cash was given, the following additional information needs to be provided:

Description of Property _____

Date of Gift . . . _____

Book Value	How Book Value Determined
FMV	How FMV Determined

Purpose of Payment . . . 2009 Grant - see attached

Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
<u>Empowerment Program</u>	Business . . . ☐ Person ☐		
	<u>Altamaha Riverkeeper - Oconee</u>	<u>Member</u>	
	<u>PO Box 1223</u>		
	<u>Athens</u> <u>GA</u> <u>30603</u>		<u>8,000.</u>

If property other than cash was given, the following additional information needs to be provided:

Description of Property _____

Date of Gift _____

Book Value	How Book Value Determined
FMV	How FMV Determined

Form 990-EZ, Part I, Line 10

Continued

Grants and Similar Amounts PaidPurpose of Payment 2008 Grant - see attached

Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
<u>Empowerment Program</u>	Business ☐ Person ☐		
	<u>Chattooga Conservancy</u>	<u>Member</u>	
	<u>8 Sequoia Hills Ln</u>		
	<u>Clayton GA 30525</u>		<u>10,000.</u>

If property other than cash was given, the following additional information needs to be provided:

Description of Property _____

Date of Gift _____

Book Value	How Book Value Determined
FMV	How FMV Determined

Purpose of Payment 2008 Grant - see attached

Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
<u>Empowerment Program</u>	Business ☐ Person ☐		
	<u>Coosa River Basin Initiative</u>	<u>Member</u>	
	<u>408 Broad St.</u>		
	<u>Rome GA 30161</u>		<u>10,000.</u>

If property other than cash was given, the following additional information needs to be provided:

Description of Property _____

Date of Gift _____

Book Value	How Book Value Determined
FMV	How FMV Determined

Purpose of Payment 2009 Grant - see attached

Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
<u>Empowerment Program</u>	Business ☐ Person ☐		
	<u>Coosa River Basin Initiative</u>	<u>Member</u>	
	<u>408 Broad St.</u>		
	<u>Rome GA 30161</u>		<u>10,000.</u>

If property other than cash was given, the following additional information needs to be provided:

Description of Property _____

Date of Gift _____

Book Value	How Book Value Determined
FMV	How FMV Determined

Form 990-EZ, Part I, Line 10

Continued

Grants and Similar Amounts Paid

Purpose of Payment . . . 2009 Grant - see attached

Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
Empowerment Program	Business ☐ Person ☐ Little Tennessee Watershed Association 93 Church Street, Ste. 214 Franklin NC 28734	Member	5,000.

If property other than cash was given, the following additional information needs to be provided:

Description of Property _____

Date of Gift _____

Book Value	How Book Value Determined
FMV	How FMV Determined

Purpose of Payment . . . 2008 Grant - see attached

Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
Empowerment Program	Business ☐ Person ☐ Ogeechee Canoochee Riverkeeper PO Box 1925 Statesboro GA 30459		10,000.

If property other than cash was given, the following additional information needs to be provided:

Description of Property _____

Date of Gift _____

Book Value	How Book Value Determined
FMV	How FMV Determined

Purpose of Payment . . . 2009 Grant - see attached

Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
Empowerment Program	Business ☐ Person ☐ Ogeechee Canoochee Riverkeeper PO Box 1925 Statesboro GA 30459		10,000.

If property other than cash was given, the following additional information needs to be provided:

Description of Property _____

Date of Gift _____

Book Value	How Book Value Determined
FMV	How FMV Determined

Form 990-EZ, Part I, Line 10

Continued

Grants and Similar Amounts Paid

Purpose of Payment 2008 Grant - see attached

Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
Empowerment Program	Business ☐ Person ☐ Satilla Riverkeeper PO Box 159 Waynesville GA 31566		10,000.

If property other than cash was given, the following additional information needs to be provided:

Description of Property _____

Date of Gift _____

Book Value	How Book Value Determined
FMV	How FMV Determined

Purpose of Payment 2009 Grant - see attached

Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
Empowerment Program	Business ☐ Person ☐ Satilla Riverkeeper PO Box 159 Waynesville GA 31566		10,000.

If property other than cash was given, the following additional information needs to be provided:

Description of Property _____

Date of Gift _____

Book Value	How Book Value Determined
FMV	How FMV Determined

Purpose of Payment 2008 Grant - see attached

Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
Empowerment Program	Business ☐ Person ☐ Savannah Riverkeeper PO Box 14908 Augusta GA 30909		7,600.

If property other than cash was given, the following additional information needs to be provided:

Description of Property _____

Date of Gift _____

Book Value	How Book Value Determined
FMV	How FMV Determined

Form 990-EZ, Part I, Line 10

Continued

Grants and Similar Amounts Paid

Purpose of Payment .. 2009 Grant - see attached

Class of Activity	Grantee's Name and Address	Grantee's Relationship	Amount Given
<u>Empowerment Activity</u>	Business ☐ Person ☐ <u>Savannah Riverkeeper</u> <u>PO Box 14908</u> <u>Augusta</u> <u>GA</u> <u>30909</u>		<u>7,000.</u>

If property other than cash was given, the following additional information needs to be provided:

Description of Property _____

Date of Gift _____

Book Value	How Book Value Determined
FMV	How FMV Determined

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part I** and check this box. ☒ **X**

Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. You must file original and one copy.

Type or print File by the extended due date for filing the return. See instructions	Name of Exempt Organization	Employer identification number
	Georgia River Network, Inc.	58-2404112
	Number, street, and room or suite number If a P.O. box, see instructions	For IRS use only
	126 South Milledge Avenue, Suite E3	
	City, town or post office, state, and ZIP code For a foreign address, see instructions.	
	Athens GA 30605-5666	

Check type of return to be filed (File a separate application for each return):

☐ Form 990	☐ Form 990-PF	☐ Form 1041-A	☐ Form 6069
☐ Form 990-BL	☐ Form 990-T (section 401(a) or 408(a) trust)	☐ Form 4720	☐ Form 8870
☒ Form 990-EZ	☐ Form 990-T (trust other than above)	☐ Form 5227	

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in care of Georgia River Network, Inc.
Telephone No. (706) 549-4508 FAX No. _____
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . _____. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until Aug 16, 20 10.

5 For calendar year _____, or other tax year beginning Oct 1, 20 08, and ending Sep 30, 20 09.

6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

7 State in detail why you need the extension. We are waiting for third party information needed to file a complete and accurate return. The return will be completed as soon as possible.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a	\$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b	\$	0.
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instrs	8c	\$	0.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Margaret E. Beck Title CPT Date 5/4/2010