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CLEANGALV, Form

Department of the Treasury Internal Revenue Service

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)

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

OMB No 1545-0047 2009 Open to Public Inspection

	For the 200	9 calendar v	ear, or tax year beginning , and ending		<u> </u>
В	Check if applica		C Name of organization	D Emplo	oyer identification number
X	Address change	e use IRS	Clean Galveston Inc		
Π	Name change	label or print or	Doing Business As	76-	-0035175
\vdash	•	type	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Teleph	none number
Ц	Initial return	See	714 25th Street	409	762-3363
	Termination	Specific Instruc-	City or town, state or country, and ZIP + 4	G Gross rece	eipts \$ 17,522
	Amended return		Galveston TX 77550		
$\overline{\Box}$	Application pen	ding F Nam	e and address of principal officer	H(a) Is this	a group return for
	,,	Ĭ		affiliate	
				H(b) Are all include	ed? Yes No
				If "No,"	" attach a list (see instructions)
	Tax-exempt		501(c) (3) 4 (insert no) 4947(a)(1) or 527	_	
	Website [.]				exemption number .
*****		zation X Co			M State of legal domicile
	art I	Summa			
		-	the organization's mission or most significant activities		
e	L.	itter a	batement		
auc					
ern					
Š	2 Che	ck this box	If the organization discontinued its operations or disposed of more than 25% of its net as	sets	
Activities & Governance	3 Num	ber of voting	g members of the governing body (Part VI, line 1a)	3	
ies	4 Num	ber of indep	endent voting members of the governing body (Part VI, line 1b)	4	
Ϊ	5 Tota	I number of	employees (Part V, line 2a)	5	
Act	6 Tota	ıl number of	volunteers (estimate if necessary)	6	
	7a Tota	ıl gross unre	lated business revenue from Part VIII, column (C), line 12	7a	
	b Net	unrelated bu	siness taxable income from Form 990-T, line 34	7b	0
			Prior Y	ear	Current Year
ne	8 Con		d grants (Part VIII, line 1h)		460 4,638
Revenue	9 Prog		revenue (Part VIII, line 2g)	·	<u>4,636</u> 587
Re	10 Inve		me (Part VIII, column (A), lines 3, 4, and 7d)		
	1	-	Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		11,837
	_		add lines 8 through 11 (must equal Part VIII, column (A), line 12)		17,522
	1		ar amounts paid (Part IX, column (A), lines 1–3)		
			or for members (Part IX, column (A), line 4)		
enses	15 Sala	ines, other c	ompensatron employee benefits (Part IX, column (A), lines 5–10) draising fees (Part IX, column (A)) line 11e)		
eü	h Tota	d fundraioin	Covernose (Part IX, column (D)) line 11e)	-	· 7
Exp	47 045	ii iunaraising	Part IX, column (b) line 25) ► (Part IX, column (A) lines 11a-11d, 11f-24f)		8,851
	17 Othe	d expenses	Add lines 13–17 (must equal Part IX, column (A), line 25)		8,851
			penses) Subtraction 18 from line 12		8,671
58	13 1760	citue less ()	penses) Supriación le la from line 12 Beginning of C	urrent Year	End of Year
ets	20 Tota	ıl assets (Pa		2,943	131,955
ASS	21 Tota	ıl lıabılıtıes (I	Part X, line 26)		
Z .	22 Net	assets or fu	nd balances Subtract line 21 from line 20	2,943	131,955
F	?art II	Signatu	re Block		
Sign	<u>ج</u>		ties of perjury, I declare that I have examined this return, including accompanying schedules and statements,		
4	₹	and belief, i	t is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which	preparer has	any knowledge
Sį	gn		Rugh Len 8		
Нę	ere	_	ure of officer	Date	~ ! !
S	-		PHARIES GARCIA TO PHAIRMAN	5	5-11-10
20		▼ Type o	print name and title		
Pa		Preparer's	Date Chec	< if	Preparer's identifying number (see instructions)
1/3		signature	Steve Matijevich 05/06/10 self-emple	oyed 🕨 🗌	P00365244
_	eparer's	Eirm's so	Steve Matijevich, P.C.	EIN ▶	76-0550542
ંઇS	se Only	Firm's name if self-emplo	A 4 5 B B B B B B B B B B B B B B B B B B	Phone	
	,	address, an		•	409-765-5274
Ma	y the IRS d	iscuss this r	eturn with the preparer shown above? (see instructions)		Yes No
Fo	r Privacy A		rwork Reduction Act Notice, see the separate instructions		Form 990 (2009)
DAZ	A				

Part III Statement of Program Service Accomplishments

 Briefly describe the organ 	nization's mission
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т.	٦.	+	+	_	~	а	n	2	*	ום	m	_	m	+

2	the prior For	m 990 or 990-EZ?	program services during the year whi	ch were not listed on	Yes X No
3	Did the organiservices? If "Yes," design Describe the	scribe these changes on Schedule (e exempt purpose achievements for	e significant changes in how it condu O each of the organization's three larg	est program services by expenses	Yes X No
			and section 4947(a)(1) trusts are requiverence, if any, for each program serv	ured to report the amount of grants and uce reported	
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	(Code) (Expenses \$	including grants of \$) (Revenue \$	
4d		am services (Describe in Schedule			
4e	(Expenses Total progr	\$ 7,319 inclu am service expenses ►	ding grants of \$ 7,319) (Revenue \$)

Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
•	candidates for public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete			
•	Schedule C, Part II	4		X
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			
•	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5	1	
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
0	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
		6		X
7	complete Schedule D, Part I			22
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	,		х
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Λ
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			v
_	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			**
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
	quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u> </u>
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI			
•	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII			
•	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII			
•	Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			
•	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12		X
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Part III	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
		F	aan	(2000

£.£	11 to Checkist of Required Schedules (Continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations	21		X
22	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		21
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
23	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		x
242	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	23	-	
2 4 a	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	2.45		
•	to defease any tax-exempt bonds?	24c	i [
d		24d		
25a		2.70	-	
200	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	and the second s	100		
~	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	1200		
20	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	1		
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	-		
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		x
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
_	Schedule L, Part IV	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a	1-05		-
·	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,	i		
	Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
-	III, IV, and V, line 1	34		x
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38		х
			~~~	

1.5	art y Statements Regarding Other IRS Fillings and Tax Compliance		Т		
12	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1 1		Yes	Νo
ıa	U.S. Information Returns. Enter -0- if not applicable	1a			
h	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	1 1		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and re		1 1		
٠	gaming (gambling) winnings to prize winners?	portable	1c		x
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		'0		
Lu	Statements, filed for the calendar year ending with or within the year covered by this return	2a			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retu	·			
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see		1		
	instructions)				
3a		d by			
	this return?	j	3a		х
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		
4a	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 fir	ancial			
	account)?		4a		X
b	If "Yes," enter the name of the foreign country			.,,,,	
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign	Bank			
	and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?	5b		X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Reg	arding			
	Prohibited Tax Shelter Transaction?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e			
	organization solicit any contributions that were not tax deductible?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or			
	gifts were not tax deductible?		6b	,	
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for	goods			
	and services provided to the payor?		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	is			
	required to file Form 8282?	t i	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	4 1		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersonal			
	benefit contract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		7f		
9	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7g		<del></del>
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0	2 as			
	required?		7h		,
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting				
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring				
9	organization, have excess business holdings at any time during the year?  Sponsoring organizations maintaining donor advised funds.		8		
a	Did the organization make any taxable distributions under section 4966?				
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9a		
10	Section 501(c)(7) organizations. Enter		9b		
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	1 1		
11	Section 501(c)(12) organizations. Enter	100			
· . а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against		1 1		
	amounts due or received from them )	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a	ļ	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			

76-0035175 Form 990 (2009) Clean Galveston Inc Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and Part VI for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Section A. Governing Body and Management Yes No Enter the number of voting members of the governing body 1a 1b b Enter the number of voting members that are independent 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 X supervision of officers, directors or trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? X 5 Did the organization become aware during the year of a material diversion of the organization's assets? 5 6 Does the organization have members or stockholders? Does the organization have members, stockholders, or other persons who may elect one or more members X 7a of the governing body? Are any decisions of the governing body subject to approval by members, stockholders, or other persons? 7b b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following X The governing body? 8a X 8b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached X at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Νo 10a X 10a Does the organization have local chapters, branches, or affiliates? b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with those of the organization? Has the organization provided a copy of this Form 990 to all members of its governing body before filing the 11 X 11 Describe in Schedule O the process, if any, used by the organization to review this Form 990 X 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 12a Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this is done 13 X Does the organization have a written whistleblower policy? 13 14 Does the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by 15 independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a X If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16b

#### Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed None
- Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply

Own website Another's website X Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ Charles Pate 714 25th Street

Galveston

TX 77550

409-771-1894

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A) Name and Title	(B) Average	Pos	ition (	(Chec	C) k all 1	hat a	(vlaa	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director		Officer		Highest compensated employee		compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
See attached								Q	0	
	-									
	1									
	-									
	-									-
							-			
		+								

Pa	rt VII Section A. Officers	, Directors, Trus	stees	s, Ke	y Er	nplo	yees	s, an	d Highest Compensated	Employees (continued)	<del></del>		
	`(A) Name and Title	(B) Average hours per		_	chec	_	hat a		(D) Reportable compensation	(E) Reportable compensation	(F Estim amou	ated	
	· ·	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	oth comper from organiz and re organiz	sation the ation lated	
		-	_	_									
				_									
		1											-
							ļ						
1b	Total		ı					<b></b>					-
2	Total number of individuals (ir reportable compensation from	•		_	thos	e lis	ted a	bov	e) who received more than	\$100,000 in			
	Dalilla annonchar bat access		4_			1.		1-		d		Yes	No
3 4	Did the organization list any for employee on line 1a? If "Yes," For any individual listed on lin	complete Sche	dule	J for	suc	h inc	lividu	ıal			3	ļ	x
•	the organization and related of individual										4		х
5	Did any person listed on line services rendered to the organ	nization? If "Yes								or	5		х
1	ction B. Independent Contract  Complete this table for your fi compensation from the organ	ve highest comp	ensa	ited	ınde	pend	lent o	conti	ractors that received more	than \$100,000 of			
		(A) I business address							Descrip	(B) otion of services	С	(C) ompensa	ation
							_						
	Total number of redesert	nontra eta e (t	المر	- Jac. 4	n = 1	- معرا	عد ام		on listed above.	· od			
2	Total number of independent more than \$100,000 in compe						eu 10	1110	se listed above) who recel	veu	0		

Pa	rt V	III Statement of	of Reve	nue						
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
SS	4	Foderated compagns		40	••••			TOVERIGE		1
		Federated campaigns	5	1a						
g5		Membership dues		1b						
r ts		Fundraising events		1c						
<u> 25</u>		Related organizations		1d						
Sis		Government grants (contribution	•	1e						
Program Service Revenue Contributions, gifts, grants	f	All other contributions, gifts, gi and similar amounts not include		1f		460				
E E	_			-1f	\$					
0.0	<u>h</u>	Total. Add lines 1a-1	<u>f</u>			<b>P</b>	460	,	. 11	
ᆲ						Busn. Code				
evel	2a	Member Dues					4,535	4,535		
ož o	b	Recycling					103	103		
ķ	С									
Sel	d					ļ				
Щe	е									
go	f	All other program ser	vice reve	nue						
٦	g	Total. Add lines 2a-2	2f			<b>•</b>	4,638		41.3.3144	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	3	Investment income (i	ncluding	dıvıder	nds, intere	est, and				
		other similar amounts	s)			▶ [	587	587		
	4	Income from investm	ent of tax	-exem	pt bond p	roceeds ▶				
	5	Royalties				▶ [				
			(ı) Real		(II) P	ersonal				
	6a	Gross Rents	•							
	b	Less rental exps								
	c	Rental inc or (loss)								
	d	Net rental income or	(loss)					į		
l		Casas amount from	) Securities	<u> </u>	(u)	Other		, ,		
		sales of assets	,		(,					
	b	other than inventory  Less cost or other								
	b	1								
	_	basis & sales exps Gain or (loss)			<del> </del>					
			<u> </u>		1	•	•			
		Net gain or (loss)	roloina ollo	oto			<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>			
re	oa	Gross income from fundi	raising eve	iiis						
/en		(not including \$								
Ř		of contributions reported	on line ic							
Other Revenue		See Part IV, line 18		a						
₹		Less direct expenses		. b	L					
		Net income or (loss)			events			,		
	9a	Gross income from gami	ing activitie							
		See Part IV, line 19		a						
		Less direct expenses		b						
		Net income or (loss)		ning ac	tivities	<b>•</b>				
	10a	Gross sales of invent	-			İ				
		returns and allowance		а						
		Less cost of goods s		b						
	<u> </u>	Net income or (loss)	-	_	ventory	<u> </u>				<del>777'11 111 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1</del>
		Miscellaneou	ıs Revenue	<b>.</b>		Busn. Code				
	11a	Back Garden To	ur				8,894	8,894		
	b	Walk-About					5,143	5,143		
	С	Beach Clean Up					-2,200	-2,200		
	d	All other revenue				<u></u>				
	е	Total. Add lines 11a-	-11d			<b>▶</b> [	11,837			
	12	Total Revenue. See	ınstructio	ns		<b>&gt;</b>	17,522	17,062	0	0

#### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must be				
Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	( <b>D</b> ) Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in		,		
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				-,
8	Pension plan contributions (include section 401(k)				
J	and section 403(b) employer contributions)				
۵	Other employee benefits				
9	Payroll taxes				
10 11					
11	Fees for services (non-employees)				
a	Management		,	<del></del>	
b	Legal	356		356	
С.	Accounting	336		336	
d	Lobbying				
	Professional fundraising services See Part IV, line 17				
f	Investment management fees				<u> </u>
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties	4 4 6 6	000	0.40	
16	Occupancy	1,122	280	842	
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		. , ,		
20	Interest	_			
21	Payments to affiliates		_		
22	Depreciation, depletion, and amortization	221	221		
23	Insurance	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
				•	
24	Other expenses Itemize expenses not				
	covered above (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below)				
а	Insurance	3,659	3,659		
b	Donations	2,200	2,200		
С	Public awareness expense	415	415		
d	Postage and delivery	252	202	50	
е	Dues and subscriptions	250		250	
f	All other expenses	376	342	34	
25	Total functional expenses. Add lines 1 through 24f	8,851	7,319	1,532	
26	Joint costs. Check here ▶ If following				
	SOP 98-2 Complete this line only if the	-			
	organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation				l

717117		(2009) Clean Galveston Inc		76-0035175		Page 11
P	art X	Balance Sheet			<del>                                     </del>	
		•		(A)		(B)
	Т.			Beginning of year	-	End of year
	1	Cash—non-interest bearing		11,466		18,685
	2	Savings and temporary cash investments		111,477	1	112,280
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Receivables from current and former officers, directors,	=			
		employees, and highest compensated employees Com	plete Part II of		_	
		Schedule L		, , , , , , , , , , , , , , , , , , ,	5	<del></del>
	6	Receivables from other disqualified persons (as defined				
		4958(f)(1)) and persons described in section 4958(c)(3)	B) Complete			
S	l _	Part II of Schedule L			6	
Assets	7	Notes and loans receivable, net		7		
As	8	Inventories for sale or use			8	
-	9	Prepaid expenses and deferred charges	1 1	, ,	9	
	10a	Land, buildings, and equipment cost or	1 2	1 1		
		other basis Complete Part VI of Schedule D	10a 1,23 10b 22	21	100	990
	I	Less accumulated depreciation	10b 22	<u> </u>	10c	990
	11	Investments—publicly traded securities		<del>1 1</del>	· · · · · ·	
	12	Investments—other securities See Part IV, line 11		12		
	13	Investments—program-related See Part IV, line 11 Intangible assets		14	-	
	14	Other assets See Part IV, line 11		15	<u> </u>	
	15 16	Total assets. Add lines 1 through 15 (must equal line 3-	122,943		131,955	
	17	Accounts payable and accrued expenses	122,545	17	131,333	
	18	Grants payable		18		
	19	Deferred revenue			19	,
	20	Tax-exempt bond liabilities			20	
S	21	Escrow or custodial account liability Complete Part IV of	of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, truste			-	
Ξ		employees, highest compensated employees, and disqu				
<u>.e</u>		persons Complete Part II of Schedule L	Jamica		22	
_	23	Secured mortgages and notes payable to unrelated third	narties		23	
	24	Unsecured notes and loans payable to unrelated third p			24	
	25	Other liabilities Complete Part X of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25			26	
S		Organizations that follow SFAS 117, check here ▶ 🄀	and			
ည		complete lines 27 through 29, and lines 33 and 34.	<b>-</b>			
<u> </u>	27	Unrestricted net assets		122,943	27	131,955
B	28	Temporarily restricted net assets			28	· · · · · ·
Б	29	Permanently restricted net assets			29	
⋽		Organizations that do not follow SFAS 117, check he	re ▶ 🗍			<del>~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del>
Ĕ		and complete lines 30 through 34.				
Ş	30	Capital stock or trust principal, or current funds		30		
set	31	Paid-in or capital surplus, or land, building, or equipmen		31		
AS	32	Retained earnings, endowment, accumulated income, of	r other funds		32	
Net Assets or Fund Balances	33	Total net assets or fund balances		122,943		131,955
Z	34	Total liabilities and net assets/fund balances		122,943	34	131,955

Form **990** (2009)

Form 990 (200	9) Clean Galveston Inc	76-0035175	Page <b>12</b>
Part XI	Financial Statements and Reporting		

Pa	rt XI Financial Statements and Reporting			
			Yes	No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other		Ì	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		_X_
b	Were the organization's financial statements audited by an independent accountant?	2b		X
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

#### **SCHEDULE A** (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

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

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Clean Galveston Inc

Employer identification number

76-0035175 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 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). 3 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public 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) 9 X 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). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type II c Type III–Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes Nο and (iii) below, the governing body of the supported organization? 11g(ı) (ii) A family member of a person described in (i) above? 11g(II) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(III) Provide the following information about the supported organization(s) (I) Name of supported (ii) EIN (III) Type of organization (iv) is the organization (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your the organization in organization in col col (I) of your (i) organized in the above or IRC section governing document? support? US? (see instructions)) Yes Yes

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

Schedule A (Form 990 or 990-EZ) 2009

Total

Schedule A (Form 990 or 990-EZ) 2009 Clean Galveston Inc Page 2 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) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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) Public support. Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total 7 Amounts from line 4 Gross income from interest, dividends. payments received on securities loans, rents, royalties and income from similar sources 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 12 Gross receipts from related activities, etc. (see instructions) 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 2009 (line 6, column (f) divided by line 11, column (f)) 14 15 Public support percentage from 2008 Schedule A, Part II, line 14 15 16a 33 1/3 % support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3 % support test—2008. 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 10%-facts-and-circumstances test—2009. 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 10%-facts-and-circumstances test—2008. 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

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

Schedule A (Form 990 or 990-EZ) 2009

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### 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						
	endar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	4,515	1,234	2,575	9,985	460	18,769
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	26,454	17,478	22,560	5,221	34,335	106,048
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 through 5	30,969	18,712	25,135	15,206	34,795	124,817
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year	21,454	12,478	17,560	221		51,713
С	Add lines 7a and 7b	21,454	12,478	17,560	221		51,713
8	Public support (Subtract line 7c from line 6)						73,104
	tion B. Total Support						
	lendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	Amounts from line 6	30,969	18,712	25,135	15,206	34,795	124,817
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	773	2,005	997	2,435		6,210
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	773	2,005	997	2,435		6,210
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					0	
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12 )	31,742	20,717	26,132	17,641	34,795	131,027
14	First five years. If the Form 990 is for the	•	, second, third, fou	irth, or fifth tax yea	ir as a section 501	(c)(3)	. □
Sec	organization, check this box and stop here tion C. Computation of Public St		200				
15	Public support percentage for 2009 (line 8	<del></del>		n (fl)		15	55.79%
16	Public support percentage from 2008 Sch		•	11 (1))		16	40.28%
	tion D. Computation of Investme					10	40,20/6
17	Investment income percentage for 2009 (I			column (f))	<u>.</u>	17	5 %
18	Investment income percentage from 2008		•	( ///		18	7 %
19a	33 1/3 % support tests—2009. If the orga			: 14, and line 15 is	more than 33 1/3		
b	17 is not more than 33 1/3 %, check this b 33 1/3 % support tests—2008. If the orga	oox and stop here.	The organization of	qualifies as a publi	cly supported orga	anization	► <u>X</u>
	line 18 is not more than 33 1/3 %, check t	his box and <b>stop h</b>	<b>ere.</b> The organizat	ion qualifies as a p	oublicly supported	organization	<b>&gt;</b>
20	Private foundation. If the organization did	l not check a box o	n line 14 19a or 1	19b, check this how	candisee instruction	ons	

76-0035175

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Schedule A (Form 990 or 990-EZ) 2009 Clean Galveston Inc 76-0035175

Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line 10, Part II, line 17a or 17b; and Part III, line 12. Provide any other additional information. See instructions.

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

2009

Open to Public Inspection
Employer identification number

Clean Galveston Inc 76-0035175 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. Part I (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, Part II Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year Number of states where property subject to conservation easement is located ▶ _ _ _ _ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

Sche	dule D (Form 990) 2009 Clean Galv	reston Inc		/6-	<u>-003517</u>	5		Page 2
Pa	irt III Organizations Maintaining	Collections of Art, Hi	storical Trea	sures, or Ot	her Simila	r Assets (	continue	ed)
3	Using the organization's acquisition, accession collection items (check all that apply)	, and other records, check	any of the followi	ng that are a sig	nificant use o	of its		
а	Public exhibition	d Loan or e	exchange progran	ns				
b	Scholarly research	e Other	program					
c	Preservation for future generations	о <u>—</u> оше	<del>-</del>	. – – – –				
4	Provide a description of the organization's colle	ections and explain how the	y further the orga	nization's exem	pt purpose in			
5	Part XIV  During the year, did the organization solicit or r	eceive donations of art, his	torical treasures,	or other similar				П.,
	assets to be sold to raise funds rather than to b					- F 0	Yes	No
Ра	ert IV Escrow and Custodial Arrar			ation answe	red res	lo Form 9	90, Part	
4-	IV, line 9, or reported an amo							
та	Is the organization an agent, trustee, custodian	or other intermediary for c	ontributions or ot	ner assets not			□ vaa	□ No
	included on Form 990, Part X?	ad assembles the following to	- bl -				Yes	∐ No
b	If "Yes," explain the arrangement in Part XIV as	na complete the following to	able				Amount	<del></del>
					$\vdash$	_	Amount	
	Beginning balance					1c		
	Additions during the year				<del> </del>	1d		
е	Distributions during the year				<b>—</b>	1e		
f	Ending balance				L	1f		<del></del>
	Did the organization include an amount on Fore	m 990, Part X, line 21?					Yes	∐ No
*******	If "Yes," explain the arrangement in Part XIV				5 . 0 . 1			
Pa	ert V Endowment Funds. Comple	_						
		(a) Current year	(b) Pпог year	(c) Two years b	ack (d) Thre	e years back	(e) Four ye	ears back
1a	Beginning of year balance							······
b	Contributions					,.,.,		
С	Net investment earnings, gains,							
	and losses							
d	Grants or scholarships						~~	
е	Other expenditures for facilities							
	and programs							
f	Administrative expenses							
g	End of year balance							•
2	Provide the estimated percentage of the year e	end balance held as						
а	Board designated or quasi-endowment	%						
b	Permanent endowment ▶ %							
С	Term endowment ▶ %							
3a	Are there endowment funds not in the possess	ion of the organization that	are held and adr	ninistered for the	9			
	organization by						_ Y	es No
	(i) unrelated organizations						3a(i)	
	(ii) related organizations						3a(ii)	
ь	If "Yes" to 3a(ii), are the related organizations I	isted as required on Sched	ule R?				3b	
4							<b></b>	
	rt VI Investments—Land, Buildir	-		0. Part X. lin	ne 10.			·
52	Description of investment	(a) Cost or other basis	(b) Cost or ot	<del></del>	c) Accumulated		(d) Book va	ılue
		(investment)	basis (othe		depreciation		. ,	
1a	Land		- <u></u>			1		
	Buildings			-				
	Leasehold improvements					<del>-  </del>		
	Equipment			941		74		867
	Other			270		147		123
	I. Add lines 1a through 1e (Column (d) must eq	ual Form 990 Part X colur	nn (B) line 10(c)			<b>D</b>		990
		JULY, OULT	(5), 1110 10(0)	,			D (Form 9	

1	Pa	a	۵	3

Part VII	investments—Other Securities. See Form	n 990, Part X, line 12	<u> </u>
	(a) Description of security or category	(b) Book value	(c) Method of valuation
•	(including name of security)		Cost or end-of-year market value
Financial deriv	ratives		
Closely-held e	quity interests		
Other			
	<b></b>		
			· · · · · · · · · · · · · · · · · · ·
Total (Column	(h) must equal Form 990. Part V. col. (P) line 12.)		
Part VIII	n (b) must equal Form 990, Part X, col (B) line 12) Investments—Program Related. See For	m 000 Part Y line 13	
- Catt VIII	(a) Description of investment type	(b) Book value	(c) Method of valuation
	(a) bescription of investment type	(b) Book value	Cost or end-of-year market value
			_··
-			
· · · · · · · · · · · · · · · · · · ·	·		
	·		
	n (b) must equal Form 990, Part X, col (B) line 13)	<b>&gt;</b>	
Part IX	Other Assets. See Form 990, Part X, line	15	
	(a) Descripti	on	(b) Book value
			······································
		<del>,</del>	<del></del> .
·			
Total (Colum	n (b) must equal Form 990, Part X, col (B) line 15)		<b>&gt;</b>
Part X	Other Liabilities. See Form 990, Part X, I	ine 25	
1	(a) Description of liability	(b) Amount	
Federal incom	e taxes		
	n (b) must equal Form 990, Part X, col. (B) line 25.)	<b>&gt;</b>	
	otnote In Part XIV, provide the text of the footnote to the	e organization's financial statements	that reports the
organization's	liability for uncertain tax positions under FIN 48		

Sche	edule D (Form 990) 2009 Clean Galveston Inc		76-003517	75	Page <b>4</b>
Pa	Reconciliation of Change in Net Assets from Form 990 to	Audi	ted Financial Stater	nents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	
4	Net unrealized gains (losses) on investments			4	
5	Donated services and use of facilities			5	
6	Investment expenses			6	
7	Prior period adjustments			7	
8	Other (Describe in Part XIV )			8	
9	Total adjustments (net) Add lines 4 through 8			9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9			10	
	at XII Reconciliation of Revenue per Audited Financial Statemen		ith Revenue per Re	turn	· · · · · · · · · · · · · · · · · · ·
1	Total revenue, gains, and other support per audited financial statements	•	•	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				,
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b		1	
С	Recoveries of prior year grants	2c		1	
d		2d		1	
е	Add lines 2a through 2d		<del></del>	1 2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
	Other (Describe in Part XIV )	4b		1	
	Add lines 4a and 4b	1.0		4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	
	Reconciliation of Expenses per Audited Financial Stateme	ents \	With Expenses per	Return	)
1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b		1	
С	Other losses	2c		1	
d	Other (Describe in Part XIV )	2d		1	
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
_	Other (Describe in Part XIV )	4b		1	
	Add lines 4a and 4b			4c	
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	
	art XIV Supplemental Information				
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lin	es 1a	and 4, Part IV, lines 1b		
and 2	2b, Part V, line 4, Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lin	es 2d	and 4b Also complete		
his p	part to provide any additional information		·		
			· <b>-</b>		<b></b> _
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_		_		_	
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			<b>-</b>		- <b>- -</b>

Schedule D (F	orm 990) 2009	Clean Galve	eston Inc	76-0035175	Page 5
Part XIV	Supplemer	ntal Information (c	ontinued)		
		<b>-</b>			
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#### SCHEDULE O

(Form 990)

Department of the Treasury Internal Revenue Service

### Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

2009 Open to Public Inspection

OMB No 1545-0047

Name of the organization

Clean Galveston Inc

Employer identification number 76-0035175

Form 990, Part III, Line 4d - All Other Achievements

Litter abatement - reduce litter through educational

means and community involvement.

Form 990, Part VI, Line 11A - Organization's Process to Review Form 990 Board compares form 990 to its financial statements prior to filing.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

Form **4562** 

Department of the Treasury Internal Revenue Service (99)

## **Depreciation and Amortization**

(Including Information on Listed Property)

OMB No 1545-0172

► See separate instructions.

► Attach to your tax return.

Attachment Sequence No **67** 

Marrie	Clean G	alveston 1	Inc				-003	5175
	ess or activity to which this form relates							
	ndirect Depreciati ort I Election To Expen		sorty Under Co.	otion 170				
F₹	ort I Election To Expen Note: If you have a	•	•		u complete	2 Part I		
1	Maximum amount See the instruc				u complete	5 I ail I	1	250,000
2	Total cost of section 179 property						2	200,000
3	Threshold cost of section 179 prop	·	•	nstructions)			3	800,000
4	Reduction in limitation Subtract lin	•	,	•			4	
5	Dollar limitation for tax year Subtract lin	e 4 from line 1 If zero o	or less, enter -0- If mar	ned filing separately,	see instructions		5	- '
6	(a) Description	of property		(b) Cost (business us	e only)	(c) Elected cos	t	
						,		
7	Listed property Enter the amount	from line 29			7	-		
8	Total elected cost of section 179 p	roperty Add amoun	ts in column (c), line	es 6 and 7			8	
9	Tentative deduction Enter the small	aller of line 5 or line	8				9	
10	Carryover of disallowed deduction	from line 13 of your	2008 Form 4562				10	
11	Business income limitation Enter	the smaller of busine	ess income (not les	s than zero) or line	5 (see instruc	ctions)	11	
12	Section 179 expense deduction A	dd lines 9 and 10, bi	ut do not enter more	e than line 11	<del></del>	_ <u></u>	12	
13	Carryover of disallowed deduction			2	13			
	: Do not use Part II or Part III below							
	rt II Special Depreciati					listed prop	erty)	(See instr)
14	Special depreciation allowance for		other than listed pro	perty) placed in sei	vice			
	during the tax year (see instruction	•					14	135
15	Property subject to section 168(f)(						15	
<u> 16</u>	Other depreciation (including ACR						16	86
Pa	irt III MACRS Depreciati	on (Do not incli			ructions)			
		<del></del>	Section				T	
17	MACRS deductions for assets place						17	0
18	If you are electing to group any assets p	aced in service during assets Placed in Se					vetom	
	Section B—A	(b) Month and year	(c) Basis for depred		T	preciation 3	ystein	
	(a) Classification of property	placed in service	(business/investme only-see instruction	nt use	(e) Conventi	on (f) Me	thod	(g) Depreciation deduction
19a	3-year property					<u> </u>		
b	5-year property							
С	7-year property							
<u>d</u>	<del> 1 - 1 - 1 </del>				<del>                                     </del>			
	15-year property							
f								
	25-year property			25 yrs		S/L		
h	Residential rental property		-	27 5 yrs	MM	S/L		
	<del></del>			27 5 yrs	MM	S/L		
i	Nonresidential real property			39 yrs	MM	S/L		
		sets Placed in Serv	uce During 2009 To	v Voor Heina the	Alternative D	S/L		
202	Class life	sets riaceu iii seiv	Tee During 2009 12	Teal Using the	Aiternative D	_		i
	12-year			12 yre		S/L		
	40-year			12 yrs	NANA	S/l		
	urt IV Summary (See ins	tructions )	L	40 yrs	MM	S/I	-	
<del></del> 21	Listed property Enter amount from					<del>-</del> -	21	
22	Total Add amounts from line 12, li		ines 19 and 20 in o	Olumn (a) and line	21 Enter her	· <b>_</b>		· · · · · · · · · · · · · · · · · · ·
_	and on the appropriate lines of you					•	22	221
23	For assets shown above and place	•	•				<del>,</del>	
-	portion of the basis attributable to				23			
					•			***************************************

			Special Event	s Schedule			
Form 99	<del>3</del> 0						2009
		For calendar year 2009, or ta	ax year beginning	, and e	ending		L
ame						Employer	dentification Number
Clean (	Galves	ston Inc				76-003	35175
		(A)	(B)	(C)	Others		Total
Gross receipt	s	<u> 15,415</u>	11,015	2,680		0	29,11
Less contril	outions	0	0	0		0	
Gross revenu		15,415	11,015	2,680		0	29,11
Less direct	-	10,272 5,143	2,121 8,894	<u>4,880</u> -2,200	<del></del>	0 -	17,27 11,83
Net income (I	033)					<u> </u>	11,00
Description	(A)	Walk-About					
	(B)	Back Garden T	our_				
	(C)	Beach Clean U	Jp				
	Others						
		<del></del>					
				<del></del>			

CLEAN GALVESTON (Note: New Address as of March 15, 2010)

714 25TH Street

Galveston, TX 77550

Subject: 2009 Income Tax

2009 Board of Directors

Jane Chapin (Chairman)

**Angela Crumment** 

Joan DiBella

Shelley DuPuy (Secretary)

Ann Elbert

Jerry Eubank

**Robert Evans** 

Charles Garcia (Chairman Elect)

Leon Kaplan

**Denny Kelly** 

Recie Kraemer

Alice Law

Barbara Lawrence

Jonathan Le

Pat McCloy (Treasurer)

Marianne Miller

John Pfeiffer

Norma Rubin

Barbara Sanderson

Gary Schero

**Kay Stine** 

John Stuart

Jim Wearmouth

#### **Contact Persons:**

1. Charles Pate

CL ·

771-1894

HM:

740-3751

2. Pat McCloy

CL:

771-5050

HM:

744-7344