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For Paperwork Reduction Act Notice, see the separate instructions. DAA

# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

om 330	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue C	ode (except b	lack lung	2012
Department of the Treasury	benefit trust or private foundation)  The organization may have to use a copy of this return to satisfy state			Open to Public
nternal Revenue Service		re rehorning tec	qui ements.	Inspection
	ndar year, or tax year beginning , and ending lame of organization MIDWEST AQUATIC PLANT MANAGEMENT	<del></del>	D Employer	Identification number
Cricco ii applicatie.	SOCIETY INCORPORATED			
Address change			25.4	97022E
I Name change 1——	toling Business As tumber and street (or P.O box filmail is not delivered to street address)	Room/suite	E Telephone	870325
Initial return	·	ROUTESCHO	L reseptions	TILITIDE!
i L	1811 4 MILE ROAD			
5	City, town or post office, state, and ZIP code			
	GRAND RAPIDS MI 49525-2442	<del></del>	G Gross receipts	\$ 64,745
Application pending	lame and address of principal officer:	H(a) is this a	group return for affi	liates? Yes X No
	PAUL		•	☐ Yes ☐ No
	HAUSLER	1 ' '	ffiliates Included?	
	GRAND RAPIDS MI 49525-2442	_  "`	lo," attach a list (s	ee instructions;
Tax-exempt status:	501(c)(3) X 501(c) ( 5 ) ◀ (Insert no ) 4947(a)(1) or 527	4		
	APMS.ORG		xemption number	
Form of organization.		Year of formation: $oldsymbol{1}$	<u>.980 м</u>	State of legal domicile: II
Part I Sum				
	ibe the organization's mission or most significant activities:	JOEIN'S	<u>L.</u> 01.	
SEE SC	HEDULE O			
			42 101	
	lol M	NY 1 8 ZU	13 /01	
2 Check this b	ox ▶ if the organization discontinued its operations or disposed of proper that	n 25% of its ne	t assets(X	
3 Number of v	oting members of the governing body (Part VI, line 1a)			5
· I	ndependent voting members of the governing body (Part VI, line 1b)	GDEN	4-4-	5
5 Total number	r of individuals employed in calendar year 2012 (Part V, line 2a)		5 (	)
6 Total number	or of volunteers (estimate if necessary)		6 (	0
7a Total unrela	ted business revenue from Part VIII, column (C), line 12		7a	(
E .	d business taxable income from Form 990-T, line 34		7b	······
	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Prior Ye		Current Year
8 Contribution 9 Program sei	s and grants (Part VIII, line 1h)		0	64,593
9 Program sei	vice revenue (Part VIII, line 2g)		0	
10 Investment i	ncome (Part VIII, column (A), lines 3, 4, and 7d)	· · · · · · · · · · · · · · · · · · ·	0	152
· I	ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0	
	e – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		0	64,745
	similar amounts paid (Part IX, column (A), lines 1–3)		0	(
	to or for members (Part IX, column (A), line 4)		0	
	er compensation, employee benefits (Part IX, column (A), lines 5–10)		0	
15 Salaries, ou		<del></del>	0	
h Tatal familia	fundraising fees (Part IX, column (A), line 11e)	amusika dinama 4		Z STRUMENTE STRUMENT
i l	ising expenses (Part IX, column (D), line 25)   0	1 5 mm 3 mm 3 mm		
	ses (Part IX, column (A), lines 11a-11d, 11f-24e)		0	62,179
	ses Add lines 13–17 (must equal Part IX, column (A), line 25)		0	62,179
19 Revenue les	s expenses. Subtract line 18 from line 12		0	2,56
	(D. 1.V. II. 40)	Beginning of Cu		End of Year
20 lotal assets	(Part X, line 16)	10	2,762	98,211
•	es (Part X, line 26)		0	(
22 Net assets of	r fund balances. Subtract line 21 from line 20	10	2,762	98,211
	ature Block			•
Under penalties of per	jury, I declare that I trave examined this return, including accompanying schedules and stolete. Declaration of pregrater (other than officer) is based on all information of which preg	tatements, and to	o the best of my	knowledge and belief,
rue, correct, and com	Hete Declaration of pregarer (other than officer) is based on all information of which prep	parer has any kn		
	The state of the s		5-7	2-13
י ן ייפי	nd of officer		Date	
	AÖL HAUSLER TREAS	URER		
Туре	or print name and title			
Print/Type pri	parer's name Preparer's signature	Date	Check	if PTIN
JAMES P.	WINSTON, II JAMES P. WINSTON, II	04/23	3/13 self-emplo	yed   P00416979
eparer Firm's name	WINSTON WILLIAMS CREECH EVANS & CO		Firm's EIN	56-1872557
e Only	PO BOX 1366			
Firm's addres	0777077 777 07777 0407		Phone no 9	19-693-519
	his return with the preparer shown above? (see instructions)	L		Yes No
	on Act Notice, see the separate instructions.	<del>· · · · · · · · · · · · · · · · · · · </del>		Form <b>990</b> (201)
				· will <b>~~~~ (2</b> 01



Form 990 (2012)	MIDWEST AQUATI	C PLANT MANAGEMEN	T 35-1870325	Page <b>2</b>
		Service Accomplishments		
		ntains a response to any ques	stion in this Part III	X
1 Briefly described SEE SCH	nbe the organization's missi	on		
	· · · · · · · · · · · · · · · · · · ·	ificant program services during the y	ear which were not listed on the	
	990 or 990-EZ?			Yes X No
	scribe these new services or		<b>.</b>	
3 Did the orga	anization cease conducting,	or make significant changes in how i	t conducts, any program	Yes X No
	scпbe these changes on Sch	nedule O		les A No
			three largest program services, as m	easured by
			ort the amount of grants and allocation	
the total exp	penses, and revenue, if any,	for each program service reported.		
		40.050		
4a (Code	) (Expenses \$	48,050 including grants o		
		CIETY SHALL BE TO		G THE MANAGEMENT
			THE SCIENTIFIC AND CIENTIFIC RESEARCH,	
			AND TO EXTEND AND	
	T IN THE DISC		THE TO ENTERIO MILE	PEVELOT TOPHIC
4b (Code	) (Expenses \$			
4b (Code	) (Expenses \$	including grants o	f\$ ) (Rever	iue \$
				,
4c (Code	) (Expenses \$	including grants o	f\$ ) (Rever	nue \$
			-	
	ram services (Describe in S			
(Expenses	sram service expenses ►	including grants of\$ 48,050	) (Revenue \$	)
TE I Utal PIOG	rem service expenses	<u> </u>		

		_	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 (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to		$\neg$	
	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, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C,-Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,	l		
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		72
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"	ا ؞		v
^	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	-	1	
	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 temporarily restricted	-		
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			Ë
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	X	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 167 If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more		ĺ	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			••
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	·	11f	Ì	X
122	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X  Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	- 111		
124	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if			
-	the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a		14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	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, Parts II and IV	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, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			7.7
40	Part IX, column (A), lines 6 and 11e <sup>2</sup> If "Yes," complete Schedule G, Part I (see instructions)	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	10		X
19	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II  Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18	$\vdash$	
. 3	If "Yes," complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
			, 990	(204

# Form 990 (2012) MIDWEST AQUATIC PLANT MANAGEMENT 35-1870325 Part V Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
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 2º 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			1
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than	1		
	\$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
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	<del>                                     </del>	<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	١.,		
	to defease any tax-exempt bonds?	24c	<u> </u>	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<del>                                     </del>
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	05-		
	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a	<del>                                     </del>	
þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	25b		}
26	If "Yes," complete Schedule L, Part I Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or	230		
26	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	120		-
21	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? 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
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)		ļ	
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	ļ	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	L	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			l
	conservation contributions? If "Yes," complete Schedule M	30	-	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	1		
	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	$\vdash$	X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33		x
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	┼	<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1	34		x
35a	The state of the s	35a	1	X
ooa b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	1000		<del> </del> -
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35t	.	ì
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable		1	1
55	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
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,			1
	Part VI	37	<u>L</u>	X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>
		Fo	m <b>99</b>	0 (2012

Form	990 (2012) MIDWEST AQUATIC PLANT MANAGEMENT 35-187	0325		Pa	age <b>5</b>
	Statements Regarding Other IRS Filings and Tax Compliance				
	Check if Schedule O contains a response to any question in this Part	V			
				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors a	nd			
	reportable gaming (gambling) winnings to prize winners?		1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax				
	Statements, filed for the calendar year ending with or within the year covered by this return	2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax	returns?	2b		L
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction)	ctions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or or				
	over, a financial account in a foreign country (such as a bank account, securities account, or other	er financial			
	account)?		4a		X
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Final				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax ye		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tr	ansaction?	5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		<u> </u>
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and	did the			
_	organization solicit any contributions that were not tax deductible as charitable contributions?		<u>6a</u>		X
b	If "Yes," did the organization include with every solicitation an express statement that such conti	ributions or	l		
_	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	y 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		<del></del>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which	n it was			
d	required to file Form 8282?  If "Yes," indicate the number of Forms 8282 filed during the year	7d	7c		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal ber		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit		7f		<del></del>
g	If the organization received a contribution of qualified intellectual property, did the organization f		7g		$\vdash$
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	· ·	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) suppor				
-	organizations. Did the supporting organization, or a donor advised fund maintained by a spons	_			
	organization, have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.			***	
а	Did the organization make any taxable distributions under section 4966?		9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter				
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	- 17		
11	Section 501(c)(12) organizations. Enter				
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources	1 1			
	against amounts due or received from them )	11b			
12a		1 1	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	-	, i	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			1 - 1	
а	Is the organization licensed to issue qualified health plans in more than one state?	_	13a	diam'r.	<u> </u>
_	Note. See the instructions for additional information the organization must report on Schedule C	)		141	
b	Enter the amount of reserves the organization is required to maintain by the states in which	11			
	the organization is licensed to issue qualified health plans	13b	3		
C	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a	<b></b>	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Sci	neaule U	<u>  14b</u>	004	L
DAA			For	m 331	0 (2012)

State the name, physical address, and telephone number of the person who possesses the books and records of the

1811 4 MILE ROAD

800-382-4434

organization: > PAUL HAUSLER

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Form 990 (20	12) MIDWEST	AQUATIC	PLANT	MANAGEMENT	35-1870325	Page 7
<b>ESTÉRVII</b>		_		rs, Trustees, Key I	Employees, Highest Compe	nsated Employees, and
	Independent Check if Sche			onse to any questic	on in this Part VII	

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

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

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

(A) Name and Title	(B) Average hours per week (list any	box	, unle cer ar	ss pe nd a d	ition more rson i irecto	than on is both a ir/trustee	an e)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) PAUL HAUSLER	0.00		 							
TREASURER	0.00			X				0	<u> </u>	0
(2)										
(3)										
(4)			-							
(5)										
(6)										
(7)			i							
(8)										
(9)										
(10)	1									
(11)	1									
DAA									L	Form <b>990</b> (2012

Statement of Revenue Check if Schedule O contains a response to any question in this Part VIII. (C) Unrelated (D) Revenue excluded from tax (A) Total revenue business revenue exempt under sections 512, 513, or 514 function revenue 1a Federated campaigns 1a 10,950 b Membership dues 1b c Fundraising events 1c 1d d Related organizations e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 53,643 1f g Noncash contributions included in lines 1a-1f \$ h Total. Add lines 1a-1f Program Service Revenue Busn Code 2a b f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, 152 152 and other similar amounts) Income from investment of tax-exempt bond proceed Royalties 5 (ı) Real (II) Personal 6a Gross rents b Less rental exps c Rental inc or (loss Net rental income or (loss) Gross amount from (II) Other sales of assets other than inventor Less cost or other basis & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 **b** Less direct expenses c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 **b** Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn. Code 11a b d All other revenue e Total. Add lines 11a-11d 64,745 152 Total revenue. See instructions

Panel Statement of Functional Expenses

Secti	Check if Schodulo O contains a rec	nanca to any question in	thic Part IV		
	Check if Schedule O contains a res	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b.	Total expenses	Program service	Management and	Fundraising
	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,	<u> </u>			
	trustees, and key employees				
6	Compensation not included above, to disqualified				
_	persons (as defined under section 4958(f)(1)) and			İ	
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages				
8	Pension plan accruals and contributions (include				
v	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees).	<del></del>			
	Management				
	· ·				
	Legal	1,875		1,875	<del></del>
	Accounting	1,873			<del></del>
d	, ,	7			
e	•	/			
f	Investment management fees				
g	, -				
	(A) amount, list line 11g expenses on Schedule O)				
	Advertising and promotion	4 004	1 211	2 603	<del></del>
13	Office expenses	4,004	1,311	2,693	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expense	es .			
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	42,498	. 20 <i>6</i> 0/1		
	Commence of the commence of th	42,430	39,604	2,894	
20	Interest	42,490	39,604	2,894	
20 21	· · · · · · · · · · · · · · · · · · ·		39,604		
	Interest Payments to affiliates	217		217	
21	Interest Payments to affiliates				
21 22	Interest Payments to affiliates Depreciation, depletion, and amortization Insurance	217		217	9;
21 22 23	Interest Payments to affiliates Depreciation, depletion, and amortization Insurance	217		217	
21 22 23	Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses Itemize expenses not covered	217		217	
21 22 23	Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If	217		217	
21 22 23	Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)	217 1,153		217	
21 22 23 24	Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) MAPMS RESEARCH GRANT	217 1,153	5,000	217 1,153 2,372	
21 22 23 24	Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) MAPMS RESEARCH GRANT 2010 AND 2011 INCOME TAX	217 1,153 5,000 2,372	5,000	217 1,153 2,372 1,640	
21 22 23 24 a b	Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) MAPMS RESEARCH GRANT 2010 AND 2011 INCOME TAX 2010 LATE FILING PENALTY	217 1,153 5,000 2,372	5,000	217 1,153 2,372 1,640 1,215	
21 22 23 24 a b	Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) MAPMS RESEARCH GRANT 2010 AND 2011 INCOME TAX 2010 LATE FILING PENALTY BANK FEES	217 1,153 5,000 2,372 1,640	5,000	217 1,153 2,372 1,640 1,215 70	
21 22 23 24 a b c d e	Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) MAPMS RESEARCH GRANT 2010 AND 2011 INCOME TAX 2010 LATE FILING PENALTY BANK FEES All other expenses	217 1,153 5,000 2,372 1,640 1,215 2,205	5,000	217 1,153 2,372 1,640 1,215	
21 22 23 24 a b c	Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) MAPMS RESEARCH GRANT 2010 AND 2011 INCOME TAX 2010 LATE FILING PENALTY BANK FEES All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	217 1,153 5,000 2,372 1,640 1,215	5,000	217 1,153 2,372 1,640 1,215	
21 22 23 24 a b c d e 25	Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) MAPMS RESEARCH GRANT 2010 AND 2011 INCOME TAX 2010 LATE FILING PENALTY BANK FEES All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs	217 1,153 5,000 2,372 1,640 1,215 2,205	5,000	217 1,153 2,372 1,640 1,215	
21 22 23 24 a b c d e 25	Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) MAPMS RESEARCH GRANT 2010 AND 2011 INCOME TAX 2010 LATE FILING PENALTY BANK FEES All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the	217 1,153 5,000 2,372 1,640 1,215 2,205	5,000	217 1,153 2,372 1,640 1,215	

Form 990 (2012) MIDWEST AQUATIC PLANT MANAGEMENT 35-1870325
Page X Balance Sheet

		Balance Sheet						
		Check if Schedule O contains a response to any	ques	tion in this Part	X			
						(A)		(B)
						Beginning of year		End of year
	1	Cash—non-interest bearing				102,682	1	96,985
	2	Savings and temporary cash investments					2	
	3	Pledges and grants receivable, net					3	
	4	Accounts receivable, net					4	
	5	Loans and other receivables from current and former	officer	s, directors,			360	
		trustees, key employees, and highest compensated e	mploy	ees				
		Complete Part II of Schedule L					5	
	6	Loans and other receivables from other disqualified po	ersons	s (as defined un	der section			
		4958(f)(1)), persons described in section 4958(c)(3)(E	3), and	contributing er	nployers a			
		sponsoring organizations of section 501(c)(9) volunta	ry emp	oloyees' benefic	ary			
ţ		organizations (see instructions) Complete Part II of S	chedu	ile L			6	
Assets	7	Notes and loans receivable, net					7	
Ä	8	Inventones for sale or use					8	
	9	Prepaid expenses and deferred charges					9	
	10a	Land, buildings, and equipment cost or						
		other basis. Complete Part VI of Schedule D	10a		3,154			
	b	Less accumulated depreciation	10b		3,154 1,928	80	10c	1,226
	11	Investments—publicly traded securities					11	
	12	Investments—other securities See Part IV, line 11					12	
	13	Investments—program-related See Part IV, line 11					13	
	14	Intangible assets					14	
	15	Other assets See Part IV, line 11		•			15	
	16	Total assets. Add lines 1 through 15 (must equal line	34)			102,762	16	98,211
	17	Accounts payable and accrued expenses					17	<u> </u>
	18	Grants payable					18	
	19	Deferred revenue					19	
	20	Tax-exempt bond liabilities					20	
	21	Escrow or custodial account liability Complete Part IV	of So	chedule D		-,,	21	
es	22	Loans and other payables to current and former office	ers, dır	rectors,				
Liabilities		trustees, key employees, highest compensated employees	oyees,	and				
jab		disqualified persons Complete Part II of Schedule L					22	
_	23	. ,	-				23	
	24	Unsecured notes and loans payable to unrelated third					24	
	25	Other liabilities (including federal income tax, payable					1	
		parties, and other liabilities not included on lines 17-2	4). Co	mplete Part X				
		of Schedule D					25	
_	26			<u> </u>		0	26	0
es		Organizations that follow SFAS 117 (ASC 958), ch		ere ► 🔼 and				
JUC.	_	complete lines 27 through 29, and lines 33 and 34				100 700		00 011
Net Assets or Fund Balances	27	Unrestricted net assets				102,762	1	98,211
ă	28	Temporarily restricted net assets					28	-
Ę	29	•	)EO! -	haak basa 🏲	]		29	
٥	1	Organizations that do not follow SFAS 117 (ASC 9	, (oo	neck nere 🚩	and		21	
şţs	20	Control stock or trust propingly or current funds					20	
SS	30	Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipm	ont fo	nd			30	·
Ϋ́	31					<del></del>	32	1
ž	33	Total net assets or fund balances	, UI UL	iner iurius		102,762		
	34	Total liabilities and net assets/fund balances			•	102,762		
_	, , , ,						, 54	Form <b>990</b> (2012

Form	990 (2012) MIDWEST AQUATIC PLANT MANAGEMENT 35-1870325			Page <b>12</b>
Pa	Reconciliation of Net Assets			
	Check if Schedule O contains a response to any question in this Part XI			
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,745
2	Total expenses (must equal Part IX, column (A), line 25)	2	62	,179
3	Revenue less expenses Subtract line 2 from line 1	3	2	,566
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	102	,762
5	Net unrealized gains (losses) on investments	_5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		,117
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))	10	98	,211
Pa	Financial Statements and Reporting			
	Check if Schedule O contains a response to any question in this Part XII			
				es No
1	Accounting method used to prepare the Form 990			
	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
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
р	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			
	separate basis, consolidated basis, or both			
	Separate basis Donsolidated basis Both consolidated and separate basis			
С	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			
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		1	
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	
			Form \$	990 (2012)

### 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, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2012

Open to Public

Inspection \*\*

Name of the organization Employer identification number MIDWEST AQUATIC PLANT MANAGEMENT 35-1870325 INCORPORATED SOCIETY Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year Aggregate contributions to (during year) 2 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 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 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 2a a Total number of conservation easements **b** Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the penodic monitoring, inspection, handling of Yes 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) Yes (i) and section 170(h)(4)(B)(ii)? In Part XIII, 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 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 (ASC 958), 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 XIII, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116 (ASC 958), 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 (ASC 958) relating to these items Revenues included in Form 990, Part VIII, line 1 \$ Assets included in Form 990. Part X

Sche	edule D (Form 990) 2012 MIDWEST	<u>AQUATIC PI</u>	ANT	<u>MANAGEI</u>	<u>MENT</u>	<u>35-18</u>	<u> 870325                                    </u>	Page <b>2</b>
p,	Organizations Maintaini							
3	Using the organization's acquisition, acce collection items (check all that apply)	ssion, and other reco	ords, che	eck any of the	following that	at are a s	gnificant use of	ıts
а	Public exhibition	d 🗌	Loan or	exchange pro	grams			
b	Scholarly research		Other	0.	·			
C	Preservation for future generations							
4	Provide a description of the organization's	collections and exp	laın how	they further t	he organizat	ion's exe	mpt purpose in l	Part
	XIII	·		•	•			
5	During the year, did the organization solid	it or receive donation	ns of art	, historical trea	asures, or ot	her sımıla	r	
	assets to be sold to raise funds rather tha	n to be maintained a	s part o	f the organizat	tion's collect	ion?		Yes No
Pε	Escrow and Custodial A				ganization	answe	red "Yes" to l	Form 990, Part IV,
	line 9, or reported an amo							
1a	Is the organization an agent, trustee, cust	odian or other interm	nediary f	or contribution	ns or other a	ssets not		n. n.
	included on Form 990, Part X?							∐ Yes ∐ No
þ	If "Yes," explain the arrangement in Part	(III and complete the	following	ng table			<u> </u>	At
								Amount
	Beginning balance						1c	
	Additions during the year						1d	·
_	Distributions during the year						1e   1f	
t J-	Ending balance	n Form 000 Bort V	lina 212				1111	Yes No
	Did the organization include an amount of "Yes," explain the arrangement in Part 2			ation has hee	n provided i	n Part XII	1	l les   No
	Endowment Funds. Con							ine 10
	Lindowinone i dindoi oo	(a) Current year	T-	b) Pnor year	(c) Two year		(d) Three years b	
1a	Beginning of year balance			_				,,,,,,
	Contributions							
C	Net investment earnings, gains, and							
	losses							
d	Grants or scholarships							
е	Other expenditures for facilities and							
	programs							
f	Administrative expenses		ļ					
g	End of year balance	_	<u> </u>					
2	Provide the estimated percentage of the	•	ance (lın	e 1g, column	(a)) held as			
а	Board designated or quasi-endowment							
þ	Permanent endowment ▶ %							
С	Temporarily restricted endowment	%						
•	The percentages in lines 2a, 2b, and 2c s						<b>L</b> _	
3a	Are there endowment funds not in the po	ssession of the orga	nization	that are neid	and adminis	terea for t	ne	Yes No
	organization by (i) unrelated organizations							3a(i)
	(ii) related organizations							3a(ii)
h	If "Yes" to 3a(ii), are the related organization	tions listed as require	ed on So	hedule R?				3b
4	Describe in Part XIII the intended uses of							<del></del>
_	Land, Buildings, and Ed				line 10.			
	Description of property	(a) Cost or other		(b) Cost or o		(c) /	Accumulated	(d) Book value
		(investment	:)	(oth	er)		epreciation	
1a	Land							
b	Buildings			L				
c	Leasehold improvements							
d	I Equipment				1,363		137	1,226
	Other			<u> </u>	1,791		1,791	
Tota	al. Add lines 1a through 1e (Column (d) m	ust equal Form 990,	Part X,	column (B), lır	ne 10(c) )		<u> </u>	1,226

Scheanie D (L	Form 990) 2012 MIDWEST AQUATIC PLAN	I PHIMAGENEILI	35-1870325	Page 3
	Investments—Other Securities. See Form 9			
•	(a) Description of security or category	(b) Book value	(c) Method of	valuation
	(including name of security)		Cost or end-of-year	ar market value
(1) Financial	denvatives			
(2) Closely-he	eld equity interests			
(3) Other				
(A)				
(B)				
(C)			-	
(D)				
:_:				
(E)			<del></del>	
(F)			+	<del></del>
(G)			<del></del>	
(H)				
(l) <b>7</b> .441.(0.1	(h)	<del> </del>		
	nn (b) must equal Form 990, Part X, col. (B) line 12 )	000 Dart V line 42		
	Investments—Program Related. See Form		1	
	(a) Description of investment type	(b) Book value	(c) Method of Cost or end-of-yea	
(1)			1	
(2)				
(3)				
(4)				
(5)	···-			
(6)			<del> </del>	
			+	
(7)			1	
(8)		+		
(9)		<del> </del>	+	
<u>(10)</u>		<del></del>		
T-4-1 /0-1				
	Other Access See Form 900, Part X, inc 15	<u> </u>		
Total. (Colum Part IX	Other Assets. See Form 990, Part X, line 15.	·		(h) Book volus
				(b) Book value
(1)	Other Assets. See Form 990, Part X, line 15.	1		(b) Book value
(1) (2)	Other Assets. See Form 990, Part X, line 15.	1		(b) Book value
(1) (2) (3)	Other Assets. See Form 990, Part X, line 15.			(b) Book value
(1) (2) (3) (4)	Other Assets. See Form 990, Part X, line 15.			(b) Book value
(1) (2) (3) (4) (5)	Other Assets. See Form 990, Part X, line 15.			(b) Book value
(1) (2) (3) (4) (5) (6)	Other Assets. See Form 990, Part X, line 15.			(b) Book value
(1) (2) (3) (4) (5) (6) (7)	Other Assets. See Form 990, Part X, line 15.			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8)	Other Assets. See Form 990, Part X, line 15.			(b) Book value
(1) (2) (3) (4) (5) (6) (7)	Other Assets. See Form 990, Part X, line 15.			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Assets. See Form 990, Part X, line 15.  (a) Description			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column	Other Assets. See Form 990, Part X, line 15.  (a) Description  (b) must equal Form 990, Part X, col (B) line 15)			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Assets. See Form 990, Part X, line 15.  (a) Description			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column	Other Assets. See Form 990, Part X, line 15.  (a) Description  (b) must equal Form 990, Part X, col (B) line 15)			(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colum	Other Assets. See Form 990, Part X, line 15.  (a) Description  (a) Description  (b) must equal Form 990, Part X, col (B) line 15.)  Other Liabilities. See Form 990, Part X, line	25.		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column Part X  1. (1) Federal	Other Assets. See Form 990, Part X, line 15.  (a) Description  In (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, line  (a) Description of liability	25.		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column Part X  1. (1) Federal (2)	Other Assets. See Form 990, Part X, line 15.  (a) Description  In (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, line  (a) Description of liability	25.		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column Part X  1. (1) Federal (2) (3)	Other Assets. See Form 990, Part X, line 15.  (a) Description  In (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, line  (a) Description of liability	25.		(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column  Part X  1. (1) Federal (2) (3) (4)	Other Assets. See Form 990, Part X, line 15.  (a) Description  In (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, line  (a) Description of liability	25.		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column  1. (1) Federal (2) (3) (4) (5)	Other Assets. See Form 990, Part X, line 15.  (a) Description  In (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, line  (a) Description of liability	25.		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column  1. (1) Federal (2) (3) (4) (5) (6)	Other Assets. See Form 990, Part X, line 15.  (a) Description  In (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, line  (a) Description of liability	25.		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column  Part X  1. (1) Federal (2) (3) (4) (5) (6) (7)	Other Assets. See Form 990, Part X, line 15.  (a) Description  In (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, line  (a) Description of liability	25.		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column  Part X  1. (1) Federal (2) (3) (4) (5) (6) (7) (8)	Other Assets. See Form 990, Part X, line 15.  (a) Description  In (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, line  (a) Description of liability	25.		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column  Part X  1. (1) Federal (2) (3) (4) (5) (6) (7) (8) (9)	Other Assets. See Form 990, Part X, line 15.  (a) Description  In (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, line  (a) Description of liability	25.		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column  Part X  1. (1) Federal (2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Assets. See Form 990, Part X, line 15.  (a) Description  In (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, line  (a) Description of liability	25.		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column  Fact X  1. (1) Federal (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)	Other Assets. See Form 990, Part X, line 15.  (a) Description  In (b) must equal Form 990, Part X, col (B) line 15.)  Other Liabilities. See Form 990, Part X, line (a) Description of liability  I income taxes	25.		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column  1. (1) Federal (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)  Total. (Column  Total. (Column  Total. (Column  Total. (Column  Total. (Column	Other Assets. See Form 990, Part X, line 15.  (a) Description  In (b) must equal Form 990, Part X, col (B) line 15)  Other Liabilities. See Form 990, Part X, line  (a) Description of liability	25. (b) Book value		

Sche	dule D (Form 990) 2012 MIDWEST AQUATIC PLANT MANAGE				Page 4					
Reconciliation of Revenue per Audited Financial Statements With Revenue per Return										
1	Total revenue, gains, and other support per audited financial statements									
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12									
а	Net unrealized gains on investments	2a	<u>.</u>							
b	Donated services and use of facilities	2b								
C	Recoveries of prior year grants	2c	<u></u>							
d	Other (Describe in Part XIII )	2d								
е	Add lines 2a through 2d			2e						
3	Subtract line 2e from line 1			3						
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			E 170	l					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			l					
b	Other (Describe in Part XIII )	4b			l					
С	Add lines 4a and 4b			4c	<u> </u>					
_ 5_	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5						
	Reconciliation of Expenses per Audited Financial State	emen	ts With Expenses <b>j</b>	per R	eturn					
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								
С	Other losses	2c								
d	Other (Describe in Part XIII )	2d								
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								
b	Other (Describe in Part XIII )	4b								
C	Add lines 4a and 4b			4c						
_5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5						
	Supplemental Information									

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Schedule D (Form 990) 2012 MIDWEST AQUATIC PLANT MANAGEMENT

Page XIII Supplemental Information (continued) 35-1870325

Page 5

# SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization

MIDWEST AQUATIC PLANT MANAGEMENT SOCIETY INCORPORATED

Employer identification number 35–1870325

FORM 990 - ORGANIZATION'S MISSION OR MOST SIGNIFICANT ACTIVITIES

THE PURPOSE OF THE SOCIETY SHALL BE TO ASSIST IN PROMOTING THE MANAGEMENT

OF AQUATIC VEGETATION, TO PROVIDE FOR THE SCIENTIFIC AND EDUCATIONAL

ADVANCEMENT OF MEMBERS, TO ENCOURAGE SCIENTIFIC RESEARCH, TO PROMOTE AN

EXCHANGE OF INFORMATION AMONG MEMBERS, AND TO EXTEND AND DEVELOP PUBLIC

INTEREST IN THE DISCIPLINE.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 THE 990 IS REVIEWED BY THE BOARD PRIOR TO BEING FILED.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART XI, LINE 9 - OTHER CHANGES IN NET ASSETS EXPLANATION

ADJUSTMENT FOR DIFFERENCE IN CASH

\$ 7,117

Department of the Treasury (99)

# **Depreciation and Amortization**

(Including Information on Listed Property)

OMB No 1545-0172

Internal Revenue Service

► See separate instructions.

► Attach to your tax return.

Name(s		AQUATIC :		NAGEM	ENT		Identify 35-	-	nber 0325
	ss or activity to which this form relates								
	DIRECT DEPRECIAT								
P.a	Election To Exper								
	Note: If you have a		ty, complete I	Part V b	etore yo	u complete F	art I.		F00 000
	Maximum amount (see instruction	•						1	500,000
	Total cost of section 179 property	•	•					2	2 000 000
	•	perty before reduction in limitation (see instructions)						<u>3</u>	2,000,000
		ne 3 from line 2. If zero or less, enter -0-							
5	•	ne 4 from line 1_If zero or less, enter -0- If marned filing separately, see instructions						_5	
<u>6</u>	(a) Description	on of property (b) Cost (business use only) (c) Elected cost							
7	Listed property Enter the amoun	t from line 20		l		7			
8	· · ·		nte in column (c)	lines 6 ai	nd 7	<del></del>		8	
9		ital elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 intative deduction. Enter the smaller of line 5 or line 8.							
10									
11	-	yover of disallowed deduction from line 13 of your 2011 Form 4562 ness income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)						10 11	
12	Section 179 expense deduction		•		•	ie o (see mande	,uons,	12	
13	Carryover of disallowed deduction					13		12	
	: Do not use Part II or Part III belo					13.1			
_			· · · · · · · · · · · · · · · · · · ·		tion (Do	not include	isted p	ropei	rty.) (See instructions)
14	Special depreciation allowance for						iotou p	Opo.	, ty 17 (000 moa 00a0110)
	during the tax year (see instruction		(00.00.00.000	-	p			14	
15	Property subject to section 168(f)(1) election							15	
16	Other depreciation (including AC							16	137
	MACRS Deprecia		lude listed pro	operty.)	(See ins	tructions.)			
				tion A					
17	MACRS deductions for assets pl	aced in service in ta	x years beginning	g before 2	012			17	80
18	If you are electing to group any assets place	ed in service during the tax	year into one or more	general asse	t accounts, ch	eck here	ightharpoons		
	Section B—As	sets Placed in Serv	rice During 2012	2 Tax Yea	r Using th	e General Depi	eciation	Syste	em
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depre (business/investme only-see instruc	ntuse '	d) Recovery period	(e) Convention	(f) Meth	od	(g) Depreciation deduction
<u>19a</u>	3-year property								
<u>_b</u>	5-year property								
c	7-year property								
<u>d</u>	10-year property								
<u>e</u>	15-year property								
<u>f</u>	20-year property								
<u>g</u>					25 yrs		S/L		
h	Residential rental				27.5 yrs.	MM	S/L		_
	property	ļ. <u></u>			27 5 yrs	MM	S/L		
i	Nonresidential real property				39 yrs	MM	S/L		ļ
	· · · ·	to Discord in Some	Di 2042 :	TouVoo		MM	S/L		<u></u>
		ets Placed in Servi	ce During 2012	lax rear	Using the	Alternative De			stem T
	Class life			-	12		S/L		<del></del>
<u>b</u>	12-year				12 yrs	1414	S/L		
C	40-year Summary (See in	etructions \	<u> </u>		40 yrs	MM	S/L		<u> </u>
21	Listed property Enter amount from							21	<del></del>
22			7 lines 10 and 20	) in colum	n (a)   22d	line 21 Enter he	ro		
~~	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here							22	217
23	and on the appropriate lines of your return Partnerships and S corporations—see instructions  For assets shown above and placed in service during the current year, enter the						1 22	£ 1 /	
	•	portion of the basis attributable to section 263A costs							
	paration and addition desired and a contraction of		<del>-</del>						