(Rev January 2020)

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2019

,	•	•	- 1	Under section 501	1(c), 527, c	or 4947(a)(1) of th	e Intern	al Revenue Co	de (except p	private four	idations)		0-0-6	te De Che	
Depa Interi	rtment of th	ne Treasury e Service		► Dor ► Go to w	not enter so ww.irs.go	ocial security num ov/Form990 for	bers on instru	ctions and t	he latest	informati	on IPI2		Open to P Inspect	uplic on	
À	For the 2	2019 calend		ear, or tax year b	eginning			, 2019, a	nd endin	9			<u> </u>		
В	Check if ap	plicable	С						-				fication numbe	r	
>	Addres			west Aquat:			ment				35-1				
,	Name	change		iety Incor						j	E Telephon				
1	Initial	return		.4 N. Sagina lland, MI 4		G #100					(800) 3	82-4434		
a	Final ref	turn/terminated	MIG	.Idiid, HI 4	0040										
ā	Amen	ded return									G Gross re		· · · · · · · · · · · · · · · · · · ·	88,56	
=	Applic	ation pending		lame and address of pr	•	er Stephen	M. 2	Zulinski		• •	a group return		<u> </u>		No
NAN PART			٠,	ne As C Abor					1125	If "No,"	subordinates i attach a list	include: (see in:	structions)	es	No
15		mpt status:		01(c)(3) X 501(c) ◀ (insert no)		1947(a)(1) or	125						
_	Websi					019					exemption nur				
K		organization		orporation Trust	Ass	ociation Other	<u> </u>	L Ye	ar of formation	on 1980) Mist	ate of I	egal domicile	IN_	
Pa	rtll	Summar	<u>у</u>												
	1 <u>B</u> r	riefly descri	be th	e organization's i	mission o	or most significa	ant acti	vities" See	Sched	lule_0					
9	_				 -	- 									· – –
폡	-					 -							- -		· - -
Activities & Governance	2 CH	neck this bo		If the organi	zation dis	scontinued its o	peration	ons or dispos	sed of mo	re than 2	5% of its r	et as	 sets		· -
පි	3 Nu	umber of vo	oting	members of the	governing	body (Part VI,	line 1	a)			1	3			5
•ઇ જ	4 Nu			ndent voting mer		-			1b)		. [4			5
Ę.	5 To		_	ndividuals employ								5			0
੶⋛	6 IO	otal number	r ot vo	olunteers (estima isiness revenue fi iness taxable inci	ite it neci	essary)	\\Line	BECF	IVED		٠ .	6 7a		2,7	<u> </u>
ď		otai unrelated	ea bu	isiness revenue i iness taxable inc	ome from	Form 990-T) IIIIe	PALCE		78 1	ŀ	7b		$\frac{2,7}{1,7}$	
	D IVE	et universitet	- Dusi	ileas taxable ille	offic from	11 0/11/ 550-1, 1			0 2020	O P	rior Year		Curren		
	8 C	ontributions	and	grants (Part VIII,	. line 1h)		108	NON I	0 202-	12	47,2	<u> </u>		45,9	
ine in	E			evenue (Part VIII			 @				35,0			39,8	
Revenue	1	•		e (Part VIII, colur			d)	OGDE	EN.U		2,2			2,7	
2	11 0	ther revenu	ie (Pa	art VIII, column (/	A), lines	5, 6d, 8c, 9c, 1	Oc, la ne	11e)							
	12 To	otal revenue	e — a	add lines 8 throug	<u>jh 11 (mι</u>	ist equal Part V	'III, col	umn (A), lın	e 12)		84,5	40.		88,5	63.
				r amounts paid (F			-								
	1	·-		r for members (P											
s	15 Sa			mpensation, emp	-	•		n (A), lines !	5-10)						
Expenses	16a Pr	rofessional	fundi	raising fees (Part	IX, colu	mn (A), line 11	e)								
e e	. b To	otal fundrai	sing (expenses (Part I)	X, columi	n (D), line 25) •	•								
ú	17 0	ther expens	ses (F	Part IX, column (A), lines	11a-11d, 11f-24	1e)			[73,9	22.	1	01,0	60.
	18 To	otal expens	ses A	Add lines 13-17 (n	nust equ	al Part IX, colu	mn (A)	, line 25)			73,9	22.	1	01,0	60.
	19 R	evenue les	s exp	enses Subtract I	line 18 fr	om line 12					10,6	18.	_	12,4	97.
8	69									Beginni	ng of Curren			f Year	
994			-	X, line 16)					•	<u> </u>	151,9		1	39,4	
t Ass	21 To	otal liabilitie	es (Pa	art X, line 26)	•						_	0.			0.
ž.				d balances Subtr	ract line 2	21 from line 20					151,9	68.	1	39,4	71.
P.	artili 📰	Signatu	re B	lock			•								
Unc	der penalties	s of perjury, I d	leclare	that I have examined ther than officer) is bas	this return, i	neluding accompany formation of which o	ing schee	dules and staten	nents, and to	the best of	my knowledge	and be	elief, it is true, c	orrect, a	nd
-	III Deci	The Control of prop		2	SCG OIT GII III	Torrida or Willer		- Institution							
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Ma	av the IR	S discuss the	his re	eturn with the pre			e instr	uctions)			rnone no	(58	X Yes		No
_				ction Act Notice,				•	TE	EA0101L 01	/21/20			1 990 (
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Form 990 (2019)	Midwest Aquatic Plan	t Management	35-18	70325 Page 2
	ment of Program Service	•		
		se or note to any line in this Part III		X
	be the organization's mission:			
See_Sched	<u>lule_0</u>			
				-
	- -			
2 Did the organia	zation undertake any significant pro-	gram services during the year which were n	at listed on the prior	
Form 990 or 9		grant services during the year which were h	ot listed on the prior	□ Vos [V] No
	be these new services on Schedule	0		Yes X No
		e significant changes in how it conducts	any program services?	Yes X No
	be these changes on Schedule O.	e significant changes in now it conducts	, any program services:	I les V Mo
	-	complishments for each of its three larg	nest program services, as m	leasured by expenses
Section 501(c	c)(3) and 501(c)(4) organizations if any, for each program service	are required to report the amount of gra	nts and allocations to other	s, the total expenses,
4 a (Code·) (Expenses \$	including grants of \$) (Revenue	\$)
The Soci		he promoting the management		
providin	g for the scientific	and educational advancement	ent of members, en	couraged
		l_an_exchange of informati		
	loped public interest			
			- 	
				_ _ _ _ _ _
				
4 b (Code.) (Expenses \$	including grants of \$) (Revenue	\$
				
				
				
				
4 c (Code) (Expenses \$	including grants of \$) (Revenue	\$)
	-	·		
				
			-	
				-
	- 			
				-
				-
				
Ad Other erecre	m services (Describe on Schedule	.0)		 -
(Expenses		•) (Payorus É	
	n service expenses	ding grants of \$ 0.) (Revenue \$)
BAA	co. rice experieus	U . TEEA0102L 07/31/19		Form 990 (2019)

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 candidates for public office? If 'Yes,' complete Schedule C, Part I	3		Х
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, Part III	5		Х
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, 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,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, 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		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	(5) V.S.		4.
i	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>	11 a	Х	
1	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 16? If 'Yes,' complete Schedule D, Part VII	11 Ь		Х
(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	11 c		Х
(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.	11 d		Х
(e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
1	f 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 (ASC 740)? If 'Yes,' complete Schedule D, Part X.	11 f		Х
12:	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
J	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		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Х
14:	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	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		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		х
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 (see instructions).	17		х
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		х
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		Х
20	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
ı	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20ь		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21		х
			L	

Form 990 (2019) Midwest Aquatic Plant Management Part.IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23		Х
24 8	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$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 25a	24a		Х
1	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 to defease any tax-exempt bonds?	24c		
•	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
ı	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? If 'Yes,' complete Schedule L, Part I	25b	*	
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
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)			
;	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If 'Yes,' complete Schedule L, Part IV	28a		Х
ı	A family member of any individual described in line 28a? If 'Yes,' complete Schedule L, Part IV	28b		Х
(A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If Yes, 'complete Schedule L, Part IV , .	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part L	31		Х
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, Part II, III, or IV, and Part V, line 1	34		x
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
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		
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 11b and 197 Note: All Form 990 filers are required to complete Schedule O	38	Х	,
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		V	
1	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1 a 0		Yes	No
	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 and reportable gaming		<u> </u>	
BAA	(gambling) winnings to prize winners? TEEA0104L 07/31/19	1 c	<u> </u>	 (2019)
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Form 990 (2019) Midwest Aquatic Plant Management

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

)	res	No
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?	2 b		
Note: If the sum of lines 1'a and 2a is greater than 250, you may be required to e-file (see instructions)	13.00		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	Х	
b If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation on Schedule O	3 Ь	X	
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over financial account in a foreign country (such as a bank account, securities account, or other financial account.)	r, a int)? 4a		X
b If 'Yes,' enter the name of the foreign country▶			
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBA	(R)		
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		<u>X</u>
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	├		X
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?	. 5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization state were not tax deductible as charitable contributions?	ganization 6 a		_X
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts we not tax deductible?	ere 6 b		
7 Organizations that may receive deductible contributions under section 170(c).	337		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for good	s and	11.3	\$ 25.4°
services provided to the payor?	7a		
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to Form 8282?	file 7c	}	
d If 'Yes,' indicate the number of Forms 8282 filed during the year	2/3	\$-1841.ps	1000 in
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contra			SE T TA
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	 +		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization Form 1098-C?	file a 7 h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsor	-	(F)	CAG II
organization have excess business holdings at any time during the year?	8	×27 (28 P	mat Milita
9 Sponsoring organizations maintaining donor advised funds.	Zai VI	位 克德	42.73
a Did the sponsoring organization make any taxable distributions under section 4966?	9 a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b	V. 3099	8
10 Section 501(c)(7) organizations. Enter			13 A 23
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b		N. SATE	1. \$ 1 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
11 Section 501(c)(12) organizations. Enter. a Gross income from members or shareholders 11a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year		27.70	数域
13 Section 501(c)(29) qualified nonprofit health insurance issuers.	7.7		Šię d
a is the organization licensed to issue qualified health plans in more than one state?	13a		
Note: See the instructions for additional information the organization must report on Schedule O	- 1975 - Pedia		5111
b Enter the amount of reserves the organization is required to maintain by the states in			
which the organization is licensed to issue qualified health plans			
		\$ 21 B	44
c Enter the amount of reserves on hand . 13c		1,00 0 010	
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
14a Did the organization receive any payments for indoor tanning services during the tax year? b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O	14a 14b	-	X
 14a Did the organization receive any payments for indoor tanning services during the tax year? b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration. 	14a 14b on or		,
 14a Did the organization receive any payments for indoor tanning services during the tax year? b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration excess parachute payment(s) during the year? 	14a 14b on or 15		X
 14a Did the organization receive any payments for indoor tanning services during the tax year? b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration excess parachute payment(s) during the year? If 'Yes,' see instructions and file Form 4720, Schedule N 	14a 14b on or 15		X
 14a Did the organization receive any payments for indoor tanning services during the tax year? b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation on Schedule O 15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration excess parachute payment(s) during the year? 	14a 14b on or 15		,

Form 990 (2019) Midwest Aquatic Plant Management 35-1870325 Page 6 Part VIB Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members 1 a of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. b Enter the number of voting members included on line 1a, above, who are independent 1 b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 X 5 X Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 X 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7 a X **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7 h Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following \overline{X} a The governing body? 8 a X **b** Each committee with authority to act on behalf of the governing body? 8ь 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses on Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10 a Did the organization have local chapters, branches, or affiliates? 10 a X b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a X b Describe in Schedule O the process, if any, used by the organization to review this Form 990 See Schedule O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 Х 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12_b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done 120 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15 a X X **b** Other officers or key employees of the organization 15_b If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take 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 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records ▶

Stephen Zulinski 10154 Torrey Road

Fenton MI 48430-9794 (800)

Form 990 (2019)	Midwest	Aquatic	Plant I	Management			35-1870	0325	Page
Part VIII Com	pensation pendent Co	of Officers	, Directo	rs, Trustees,	Key Employees,	Highest Con	npensated I	Employees	, and

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1 a 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

See instructions for the order in which to list the persons above

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

				(C)						
(A) Name and title		thar	one both dir	box, an o ector	p not check more bx, unless person n officer and a tor/trustee)			(D) Reportable compensation from the organization	(E) Reportable compensation from	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Stephen M. Zulinski Treasurer	0	Х		Х				0.	0.	0.
(2) Paul Hausler President	0	х		х				0.	0.	0.
(3) Nate Long President-Elect	0 -	х		х				0.	0.	0.
									-	
(5)										
							-			
<u>(7)</u>										
							-			
								^		
(10)										
<u>(11)</u>							-			
(12)										
<u>(13)</u>									-	
(14)	 									
	_ `	1	1					<u> </u>	1	·

Part VII Section A. Officers, Directors, Ti	ustees,	Key	Em	ıplo	oye	es, a	and	Highest Com	pensated Emp	oyees (continued)
	(B)			((-				<u> </u>	_
(A) Name and title	Average hours						h an	(D) Reportable	(E) Reportable	(F) Estimated amount
	per week (list any				<u> </u>	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	of other compensation from		
	hours for	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest co	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	the organization and related
	related organiza	cor	una	4	mplo	t cor	35			organizations
	tions below dotted	l list	탏		yee	nper				
	line)	ee	tee			Highest compensated employee				
(15)	-				ļ		_			
(16)										
(17)										
	7	1								
<u>(18)</u>	-									
(19)	<u> </u>								-	
(00)							_			
<u>(20)</u>	 									
(21)	1									
(22)	 	-								
(22)		-								
(23)										
(24)										
(25)										
1 b Subtotal			L		<u> </u>	l	•	0.	0.	0.
c Total from continuation sheets to Part VII, Sec	tion A						•	0.	0.	0.
d Total (add lines 1b and 1c)							-	0.	0.	0.
2 Total number of individuals (including but not limite	ed to those	listed	abo	ve) v	who	recei	ved	more than \$100,00	00 of reportable com	pensation
from the organization 0										Yes No
3 Did the organization list any former officer, dire	ector truste	e ke	ov e	mnl	ove	or	hial	hest compensated	l employee	Tes No
on line 1a? If 'Yes,' complete Schedule J for si	ıch ındıvıdı	ual	., .	,	٠, ٠,	, O.	g.	nost compensator	. ompleyee	3 X
4 For any individual listed on line 1a, is the sum the organization and related organizations great	of reportat	le co	mpe	ensa If '	ation	and	oth	ner compensation	from	
such individual	iter triair ψ	100,0	00.	"	, 63,	CON	ipic	te ochedare s for		4 X
5 Did any person listed on line 1a receive or accifor services rendered to the organization? If 'Y	rue compei es.' comple	nsatio	on fr	om dule	any J fo	unre	elate	ed organization or person	ındıvıdual	5 X
Section B. Independent Contractors										
1 Complete this table for your five highest compensation from the organization. Report compensation.	ensated inc ensation for	lepen the c	den alen	t co dar	ntra year	ctors endi	tha ing v	at received more to with or within the oi	han \$100,000 of ganization's tax yea	r
(A) Name and business ac	dress							(B) Description) of services	(C) Compensation
				-						
						·				
2 Total number of independent contractors (including	but not lim	iited to	o the	ose	liste	d abo	ve)	who received more	than	
\$100,000 of compensation from the organization										
BAA		TEEAC	0108L	07/	31/19	,				Form 990 (2019)

1.00		No. of Con-	_	e 0	contains a	a resp	onse or note to an	y line in this Part V	III		
		-				•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts +	2	1 a	Federated campaig	ns		1 a					
ran	3	b	Membership dues			1 b	8,865				
် (၁) (၃)			Fundraising events.		. –	1 c					
E E	₫		Related organizatio		,	1 d	٠			and the state of the state of	
S.			Government grants (cont			1 e					
Tion to	5	T	All other contributions, g similar amounts not incli			1f	37,123.				
흔	\$	g	Noncash contributions in				37,123.	and the control of th	a disensi dang paganggan		omer 10 Table
Contributions, Gifts, Grants	2	L	lines 1a-1f Total: Add lines 1a-	14	٠ ٠٠ ا	1 g		45.000			
			TO(AL ACIT INTES TO	- 11		.	Business Code	45,988.			
Ē	-	2 a	Program Inco	me	•	<u></u>	110000	39,817.	39,817.	IN ASK CHARLE THE TAXABLE AND	(37.4.7.1.466.460 (40.2.7.1.88.40.400.400.400.400.400.400.400.400.4
Re	Ì	_ b	110910111100	<u>,</u>			110000	33,017.	33,017.		
Program Service Revenue		Ċ		<u> </u>			-				
<u>\$</u>		d								_	
Ĕ	1	e									
<u>8</u>	>		All other program s		ce revenu	e [
<u> </u>			Total. Add lines 2a				,	39,817.			
-		3	Investment income (other similar amount	ınclu	dıng dıvıde	ends, ir	nterest, and	2 750		2 750	
	۱	4	Income from invest		t of tax-e	xemnt	hond proceeds ▶	2,758.		2,758.	
	Ì	5	Royalties		it or tax o	, compt	boria process.	····			
		•	,		(ı)·R	اب	(II) Personal	Michigan Awar Say Landan Alice Sa			
	١	6 a	Gross rents	6a				om and and an and an	Andrews and the second	alanda maninistra area area maninistra	
		b	Less rental expenses	6ь		_					
	1		Rental income or (loss)								
	1	[′] d	Net rental income of	or (lo	 		•	- 4 th Woodeling Readless of Control in Williams Jr., See the	Tay or the Talanta Annual Tay Tax	Managadanist Vilas de	UUR AAARUUSSUunguu AZAN IA. JONUUSSI
		7 a	Gross amount from		(i) Gecu	ndes	(II) Other		Section 1		
	1		sales of assets other than inventory	7a							
		Ь	Less cost or other basis and sales expenses	7b			1				
	-	c	Gain or (loss)	7c							1 (a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c
			Net gain or (loss)		I		•	SEASONAMA COMPANIA AND CONTRACTOR CONSTRUCTOR	STOREST CONTRACTOR SHARE SANS	THE PERSONAL PROPERTY SAME	THE COMPANIES AND ASSESSED AND ASSESSED.
ď	,	8a	Gross income from fund	raisin	a events				en e		
Ē	1		(not including \$					Electric Market			10.5
٥	:		of contributions reported	d on li	ne 1c).	-					1000000
Other Revenue			See Part IV, line 18			8	-				
ş			Less direct expension Net income or (los		om fundra	8		10 mg	20042540		
C	'					iisiiig 6	vents	188622 CCW-6865		i Contractorio	
		Уa	Gross income from gam See Part IV, line 19	ing ac	TIVITIES	9	a				
			Less direct expens			9			10		
		c	Net income or (los	s) fro	om gamın	g activ	/ities ►	Annual Land Annual Control of the Co	Line and a decrease and a submer see		a man and all some one rate between an
	-	10a	Gross sales of inventory returns and allowances	, less							
						10					
			Less cost of goods			10	·	A 11 (10 ft)			
	+		Net income or (los	s) ir	om sales	oi iuve	entory • Business Code		the market and the second of t		
ă	ام	11 a					Susmess Soute	Windstern State Control of the Contr	A TOOLER HOW MY LAND THE SHOW		
Ā	푈	b	· -		-						
읗	Revenue	c						-			
Miscellaneous	ž	d	All other revenue				. =	-			
Σ		е	Total. Add lines 11	a-11	d		-		Marie Carrier	I KAR PAKK	
		12	Total revenue. See	ıns	tructions		•	88,563.	39,817.	2,758.	0.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

Do 1	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	and the state of t	expenses	general expenses	expenses
2	Grants and other assistance to domesticindividuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	•			
, 4 5	Benefits paid to or for members Compensation of current officers, directors,		-		
6	trustees, and key employees. Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described	0.	0.	, <u>0.</u>	. 0.
7	in section 4958(c)(3)(B) Other salaries and wages	0.	· 0.	0.	0.
′- 8 '				,	٠
9	Other employee benefits		,		
10	Payroll taxes				
• 11	Fees for services (nonemployees) a Management 1	1 w 2 13	s. *		<u>.</u> -
	b Legal	1,432.	•	1,432.	
	c Accounting	2,000.	,	2,000.	
•	d Lobbying	2,000.		2,000.	
•	e Professional fundraising services See Part IV, line 17	•		SAVE COMMO	
1	Investment management fees				
	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)	• •			-
	Advertising and promotion	1,822.		1,822.	
13	Office expenses	1,166.		1,166.	
14	Information technology	1,500.		1,500.	
15 16	Royalties. Occupancy	<u>.</u> -			
17	Travel	<u> </u>	•	'	
•	Payments of travel or entertainment expenses for any federal, state, or local public officials				•
19	Conferences, conventions, and meetings	75,825.	75,825.		,
20	Interest	*			
21	Payments to affiliates		,		
22	Depreciation, depletion, and amortization	277.		277.	
23 24	Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses on line 24e if line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
•	a RL Johnson Student Grant	10,000.	10,000.	1 x consequently, months, may 5 persons, 1 https://	And Committee was a committee of the com
	b Donations	2,500:	2,500.		
	c Bank_fees_'	2,006.		2,006.	,
	d <u>Insurance</u>	1,882.		1,882.	
	e All other expenses	101 060	00.005	650.	
	Total functional expenses. Add lines 1 through 24e	101,060.	88,325.	12,735.	0.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) End of year (A) Beginning of year Cash — non-interest-bearing. 13,123 3,394. 2 Savings and temporary cash investments 2 82,030 77,629. 3 Pledges and grants receivable, net 3 4 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis. Complete Part VI of Schedule D 10a 3,939 10b 10 c b Less. accumulated depreciation 3.143 1.073. 796. 55,742 Investments - publicly traded securities. 11 57,652 11 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets Other assets See Part IV, line 11 15 15 16 Total assets. Add lines 1 through 15 (must equal line 33) 151,968 16 139,471. Accounts payable and accrued expenses 17 17 18 Grants payable 18 Deferred revenue 19 19 20 Tax-exempt bond liabilities. 20 Escrow or custodial account liability Complete Part IV of Schedule D. 21 21 Liabilitie Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 Total liabilities. Add lines 17 through 25 0 26 Λ Organizations that follow FASB ASC 958, check here > Assets or Fund Balances and complete lines 27, 28, 32, and 33. 27 Net assets without donor restrictions 27 28 Net assets with donor restrictions 28 Organizations that do not follow FASB ASC 958, check here X

Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 31 Total net assets or fund balances 32

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

and complete lines 29 through 33.

29 30 31 139,471 151,968 32 139,47 151,968 151,968. 139,471

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Net/

29

33

E	n 990 (2019) Midwest Aquatic Plant Management	25 1070205	D 10
	m 990 (2019) Midwest Aquatic Plant Management REPLYMBING Reconciliation of Net Assets	35-1870325	Page 12
rea	Check if Schedule O contains a response or note to any line in this Part XI		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	88,563.
2	Total expenses (must equal Part IX, column (A), line 25)	2	101,060.
3	Revenue less expenses Subtract line 2 from line 1	3	-12,497.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)).	4	151,968.
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 on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	139,471.
Pa	rt∤XII∎ Financial Statements and Reporting		
	Check if Schedule O contains a response or note to any line in this Part XII		
1	Accounting method used to prepare the Form 990 Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O		Yes No
2	a 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 separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis	reviewed on a	
	b Were the organization's financial statements audited by an independent accountant?	. 3	2b X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	ı separate	

2 c

3 a

3ь

Form 990 (2019)

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?

b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit

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If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.

3 a 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?

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

BAA

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

Complete if the organization answered 'Yes' on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 2019 Open to Public Inspection

Midwest Aquatic Plant Management

	Society Incorporated	Jement		35-1870325
Par				
ı,uı	Complete if the organization answ	wered 'Yes' on Form 990, Pa	rt IV, line	e 6.
_		(a) Donor advised funds	· · · · · · · · · · · · · · · · · · ·	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			-
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and dorare the organization's property, subject to the	nor advisors in writing that the asse organization's exclusive legal contr	ts held in d	onor advised funds Yes No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefit impermissible private benefit?	rs, and donor advisors in writing the	at grant fun	ds can be used only
Par	till Conservation Easements.			
	Complete if the organization ans			e 7.
1	Purpose(s) of conservation easements held by		ply)	
	Preservation of land for public use (for examp	ole, recreation or education)	Preservat	ion of a historically important land area
	Protection of natural habitat		Preservat	ion of a certified historic structure
	Preservation of open space		_	
2	Complete lines 2a through 2d if the organization hast day of the tax year.	neld a qualified conservation contribution	on in the for	
	Takal mumahas af assassasiahas assassasiah			Held at the End of the Tax Year
	a Total number of conservation easements			2a
	 Total acreage restricted by conservation ease Number of conservation easements on a certi 			2 b
		, ,		2c
	Number of conservation easements included in structure listed in the National Register			2 d
3	Number of conservation easements modified, trar tax year ►	sferred, released, extinguished, or ter	minated by t	the organization during the
4	Number of states where property subject to conse	rvation easement is located >		
5	Does the organization have a written policy re and enforcement of the conservation easemer		pection, ha	ndling of violations, Yes No
6	Staff and volunteer hours devoted to monitoring,	nspecting, handling of violations, and	enforcing co	onservation easements during the year
7	Amount of expenses incurred in monitoring, insper ▶\$	ecting, handling of violations, and enfo	rcing conser	vation easements during the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the require	ments of se	ection 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization rep include, if applicable, the text of the footnote conservation easements	orts conservation easements in its to the organization's financial stater	revenue an nents that	nd expense statement and balance sheet, and describes the organization's accounting for
Pai	Organizations Maintaining Colle Complete if the organization ans	ctions of Art, Historical Trea wered 'Yes' on Form 990, Pa	isures, o	r Other Similar Assets.
1:	a If the organization elected, as permitted unde historical treasures, or other similar assets he Part XIII the text of the footnote to its financial	ld for public exhibition, education, o	r research	tatement and balance sheet works of art, in furtherance of public service, provide in
I	b If the organization elected, as permitted unde historical treasures, or other similar assets held for following amounts relating to these items	r FASB ASC 958, to report in its rev or public exhibition, education, or rese	venue state arch in furth	ment and balance sheet works of art, erance of public service, provide the
	(i) Revenue included on Form 990, Part VIII,	fine 1		► \$
	(ii) Assets included in Form 990, Part X			▶\$
	If the organization received or held works of art, hamounts required to be reported under FASB	ASC 958 relating to these items	sets for final	ncial gain, provide the following
i	a Revenue included on Form 990, Part VIII, line	1		► \$
	b Assets included in Form 990, Part X			► \$

Schedule D (Form 990) 2019 Midwe Part III Organizations Mainta				35-1870 Other Similar Ass	
3 Using the organization's acquisition					
items (check all that apply).				.	
a Public exhibition		H	r exchange program		
b Scholarly research		e [] Other			
c Preservation for future gener 4 Provide a description of the organiz		and explain how they	further the organization's	s exempt purpose in	
Part XIII. 5 During the year, did the organiza	ition solicit or rece	ive donations of art	historical treasures o	r other similar assets	_
to be sold to raise funds rather the	nan to be maintair	ed as part of the or	ganization's collection?)	Yes No
Part IV Escrow and Custodia line 9, or reported an	I Arrangement amount on For	s. Complete if thm 990, Part X, I	ne organization ans ine 21.	swered 'Yes' on Fo	rm 990, Part IV,
1 a Is the organization an agent, trus	stee, custodian or	other intermediary f	or contributions or othe	er assets not included	¬v ¬u-
on Form 990, Part X? b If 'Yes,' explain the arrangement	un Part XIII and c	omplete the followin	in table:	Į.	Yes No
un res, explain the arrangement	. III r alt Alli allu C	omplete the followin	ig table.		Amount
c Beginning balance				1c	Amount
d Additions during the year				1 d	
e Distributions during the year			•	1 e	 -
f Ending balance	•			16	
2a Did the organization include an a	amount on Form 9	90 Part X line 21	for escrow or custodial		Yes No
b If 'Yes,' explain the arrangement				- 1	
pro 100, explain the all angement	an ran consu	A note in the explain	attorn has been provide	a on rait Am	
Part V Endowment Funds. C	Complete if the	organization and	swered 'Yes' on Fo	orm 990 Part IV Jir	ne 10
	(a) Current year	(b) Prior year	(c) Two years back		(e) Four years back
1 a Beginning of year balance	(4)	(4)	(6) 1.110) 5.110 2.110	(2) 111100 /00100 1010111	(0) 100 0000
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities	<u> </u>				
and programs					
f Administrative expenses					
g End of year balance					
Provide the estimated percentag	e of the current ye	ear end balance (line	e 1g, column (a)) held	as:	
a Board designated or quasi-endown	nent ►	%			
b Permanent endowment ▶	8				
c Term endowment ►	%				
The percentages on lines 2a, 2b, a	nd 2c should equal	100%			
3a Are there endowment funds not in	the possession of th	e organization that a	re held and administered	for the	
organization by	,				Yes No
(i) Unrelated organizations	•				3a(i)
(ii) Related organizations					3a(ii)
b If 'Yes' on line 3a(ii), are the rela	_	•			3b
4 Describe in Part XIII the intende		nization's endowme	nt funds		
Part VI Land, Buildings, and					
Complete if the organ	ıızatıon answer	ed 'Yes' on Forn	n 990, Part IV, line	: 11a. See Form 99	0, Part X, line 10.
Description of property	(a) (Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1 a Land					
b Buildings					
c Leasehold improvements					
d Equipment					
e Other			3,939.	3,143.	796.
Total. Add lines 1a through 1e (Colum	nn (d) must equal	Form 990, Part X, c		- / >	796.
BAA				Sched	lule D (Form 990) 2019

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Complete if the organization answered (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or end-of	
(1) Financial derivatives			-
(2) Closely held equity interests			
(3) Other			
(A)			
(B)	-		± -
(C)			
(D)			
(E)			
(F)			
 			
(l)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12)			nonotominaminadoradorado Arra critical
Part VIII Investments – Program Related.	d !Vas! an Farm 00	N/A	
Complete if the organization answered (a) Description of investment	(b) Book value	(c) Method of valuation Cost or end	
	(b) Book value	(c) Method of Valdation Cost of Cha	or year market value
(1)	_		
(2)			
(3)			
(4)			
(5)			
(6)			
(7)	<u> </u>		
(8)			
(10)		<u> </u>	
Total. (Column (b) must equal Form 990, Part X, column (B) line 13)	·		11. 14. 15. 14. 15. 15. 15. 15. 15. 15. 15. 15. 15. 15
Complete if the organization answere (a) Do	d 'Yes' on Form 99 escription	90, Part IV, line 11d. See Form 9	90, Part X, line 15 (b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
			
(8)			
(8) (9)			•
(8) (9) (10)	(R) line 15)		
(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on	Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part: X Other Liabilities. Complete if the organization answered 'Yes' on 1. (a) Description			
(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on 1. (1) Federal income taxes	Form 990, Part IV, line		
(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on 1. (1) Federal income taxes (2)	Form 990, Part IV, line		
(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on 1. (a) Desc (1) Federal income taxes (2) (3)	Form 990, Part IV, line		
(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on 1. (a) Desc (1) Federal income taxes (2) (3) (4)	Form 990, Part IV, line		
(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on 1. (a) Desc (1) Federal income taxes (2) (3) (4) (5)	Form 990, Part IV, line		
(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on 1. (a) Desc (1) Federal income taxes (2) (3) (4) (5) (6)	Form 990, Part IV, line		
(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on 1. (a) Desc (1) Federal income taxes (2) (3) (4) (5) (6) (7)	Form 990, Part IV, line		
(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on 1. (a) Desc (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	Form 990, Part IV, line		
(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on 1. (a) Desc (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9)	Form 990, Part IV, line		
(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on 1. (a) Desc (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8)	Form 990, Part IV, line		
(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on 1. (a) Desc (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)	Form 990, Part IV, line		
(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part; X: Other Liabilities. Complete if the organization answered 'Yes' on 1. (a) Desc (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) Total (Column (b) must equal Form 990, Part X, column (B) line 25)	Form 990, Part IV, line ription of liability	11e or 11f. See Form 990, Part X, line 25.	(b) Book value
(8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column Part X Other Liabilities. Complete if the organization answered 'Yes' on 1. (a) Desc (1) Federal income taxes (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)	Form 990, Part IV, line ription of liability	11e or 11f. See Form 990, Part X, line 25.	(b) Book value

Schedule D (Form 990) 2019	Midwest	Aquatic	Plant	Management
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35-1870325

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Part XI Reconciliation of Revenue per Audited Financial State	ements With Revenue pe	r Return. N/A	
Complete if the organization answered 'Yes' on Form 9	90, Part IV, line 12a.		
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			
a Net unrealized gains (losses) on investments	2a		
b Donated services and use of facilities	2 b		
c Recoveries of prior year grants	2 c		
d Other (Describe in Part XIII)	. 2d		
e Add lines 2a through 2d	····	2 e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	1 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	4 a		
b Other (Describe in Part XIII)	4 b		
c Add lines 4a and 4b	4 c		
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line	5		
Part XII Reconciliation of Expenses per Audited Financial Sta	tements With Expenses	per Return. N/A	
Complete if the organization answered 'Yes' on Form 9		•	
1 Total expenses and losses per audited financial statements .	•••	1	<u> </u>
2 Amounts included on line 1 but not on Form 990, Part IX, line 25			
a Donated services and use of facilities	2a		
b Prior year adjustments	. 2ь		
c Other losses	. 2c		
d Other (Describe in Part XIII.)	. 2d		
e Add lines 2a through 2d		2 e	
3 Subtract line 2e from line 1	•	3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1	1 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	. 4a		
b Other (Describe in Part XIII)	4 b		
c Add lines 4a and 4b		4 c	
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, Iir	ne 18)	5	

Part XIII | Supplemental Information.

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

BAA

SCHEDULE O (Form 990 or 990-EZ)

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.

► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization Midwest Aquatic Plant Management Society Incorporated

Employer identification number 35–1870325

Form 990, Part I, Line 1 - Organization Mission or 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 III, Line 1 - Organization Mission

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 - Form 990 Review Process

No review was or will be conducted.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

No other documents available to the public.