Form

Department of the Treasury Internal Revenue Service

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

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

Do not enter Social Security numbers on this form as it may be made public.

For the 2013 calendar year, or tax year beginning 10/01/13, and ending 09/30/14

2013 Open to Public Inspection

OMB No. 1545-0047

<u>~</u> _			C Name of organization				, and ending			<u> </u>	<del></del>		nune !-!	fination :	
B	Check if a	pplicable:	C Name or organization		akes Aqua	tic	: Habitat	Ne	twork		'	) Empl	oyer identii	fication numb	er
	Address c	change			d, Inc.						_				
	Name cha	ange	Doing Business As		ter Futur								<u>-569</u>		
$\equiv$	Initial retur	m	Number and street (or	P.O. box if mail is not o	delivered to street add	dress)	1			Room/suite	E		hone numb		
닠	imilai retui	111	P.O. Box 2									23	1-34	<u>8-8200</u>	)
	Terminate	ed	City or town, state or p	rovince, country, and Z	IP or foreign postal c	ode								-	
	Amended	return	Petoskey		MI 4	497	70					Gross re	ceipts\$	1,180	6,139
一	Application	n nendina	F Name and address of p	principal officer:										. 🗆	₩.
	, ibbacario	ii pending	Jill Rya	n						H(a) Is this	s a group	p return for	subordinate	s? Yes	X No
			P.O. Box	2479						H(b) Are a	all subor	dinates in	cluded?	Yes	No
			Petoskey		M	I 4	19770			l l	f "No," a	ittach a lis	t. (see instru	uctions)	
	Tay-eyen	npt status:	X 501(c)(3)	501(c) (	)		4947(a)(1) or		527	_					
	Website		ww.freshwa		<del></del>	l				H(c) Grou	n evem	ntion num	her 🕨		
		organization:	77	Trust Associat	<u> </u>	-			lı v	ear of formation				of legal domic	ila. MT
-	art l		ımmary	Trust Associa	tion   Other					real of formation	1. 20		IM State	or legal domic	ile. III
<u>₩.</u>				nlo mission or mo	et cignificant act	elis aleli oc									
	' '		scribe the organization	on's mission or mo	ist significant act	uviue	s:								
Se		see	schedule O												
Governance								· · · · · ·							
/eri															
6			is box ▶ ☐ if the or	_	-		or disposed of	more	than 25%	of its net as	sets.	ı	م ا		
త			of voting members of										6		
Activities	4 1	Number o	of independent voting	members of the g	joverning body (F	Part \	√l, line 1b)		· • • • • • • • • • • • • • • • • • • •			4	6		
₹	5	Total nun	nber of individuals em	iployed in calenda	r year 2013 (Par	t V, I	ine 2a)					5	12		
Act			nber of volunteers (es										15		
	7a -	7a Total unrelated business revenue from Part VIII, column (C), line 12										7a			0
	b!	Net unrel	ated business taxable	e income from For	m 990-T, line 34	<u> </u>									0
		8 Contributions and grants (Part VIII, line 1h)									or Year			Current Year	
ē												,694		1,171	<del></del>
Revenue		9 Program service revenue (Part VIII, line 2g) 0 Investment income (Part VIII, column (A), lines 3, 4, and 7d)									, 658			<u>,663</u>	
Ş												,120			<u>,241</u>
_			enue (Part VIII, colun									,258			<u>,909</u>
			enue – add lines 8 thr									,730		1,185	
			nd similar amounts pa								<u> 284</u>	,547	<u> </u>	397	,262
			paid to or for member												0
S	15	Salaries,	other compensation,	employee benefits	(Part IX, colum	n (A)	, lines 5–10)		<i></i>		383	,839		390	,055
Expenses	16a l	Profession	onal fundraising fees (	(Part IX, column (A	A), line 11e)										0
db	b.		draising expenses (Pa		U 05\ N		69,	30	4						
ω	17	Other exp	penses (Part IX, colur	mn (A), lines 11a-							263	,750	)	251	,118
	18	Total exp	enses. Add lines 13-	-17 (must equal Pa	art IX, column (A						932	,136	5	1,038	
	19		less expenses. Subtr									,406			,297
Net Assets or	S .									Beginning				End of Year	
sets	20	Total ass	sets (Part X, line 16)								527	,040	)	628	,708
Ass	21	Total liab	oilities (Part X, line 26)								127	,82	L	82	,192
S.	22	Net asse	ets or fund balances. S								399	,219	9	546	,516
	art II	Si	ignature Block												
U	Inder pe	nalties of	perjury, I declare that I complete. Declaration of									t of my k	nowledge	and belief, i	t is
	ue, com	T k	Omplete. Decidiation of	, propared (outer tha	an omoer) is based	J UI C	an imormation of	***********	, bishaisi II	any KIIOW	ieuye.			<del></del>	
٠.			py	you										2-15	
Sig	-		Signature of officer	•					_			Da •			
He	ere		Jill Ryan						Execu	tive I	Jire	ecto	r		
			Type or print name and title				,								
		Print/Typ	oe preparer's name		Preparer's s	7/				) Da	ite	Che	ck if	PTIN	
Pai		Velda	K. Kammermann		) We		anines			02	2/21/	15 self-	employed	P010568	
	parer	Firm's n			ERMANN &	Ŕ	OHRBACK	, E	?. C.		Fir	m's EIN	38	8-2763	3936
Us	e Only			PARK AVI											
		Firm's a	ddress > CHA	RLEVOIX,	MI 497	20					Pr	none no.	23:	1-547-	-4911
Ма	y the IR	RS discus	ss this return with the	preparer shown a	bove? (see instr	uctio	ns)							Yes	No

If "Yes," describe these new services on Schedule O.  3 Did the organization cease conducting, or make significant changes in how it conducts, any program	X
1 Briefly describe the organization's mission:  See Schedule O  2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O.  3 Did the organization cease conducting, or make significant changes in how it conducts, any program	
2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O.  3 Did the organization cease conducting, or make significant changes in how it conducts, any program	
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3 Did the organization cease conducting, or make significant changes in how it conducts, any program	es 🗓 No
	es X No
If "Yes," describe these changes on Schedule O.	
4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.	
The grants program provided financial support to activities that active promot river, lake, wetland and groundwater protection, climate adapticativities and preparator expenses for applying for federal great lake restoration initiative grant funding. Five different funding programs supported 55 projects. Sample project activities include implementing infrastructure solutions to reduce storm water runoff and the restoration of the Maxwell Creek watershed.	on s green
4b (Code: ) (Expenses \$ 226,782 including grants of \$ ) (Revenue \$ Provided coordination, leadership and education on public policy issue regional importance to the Great Lakes. Education and opportunities for citizens to educate their elected officials regarding preventing Asian from establishing in the Great Lakes. Coordination and assistance to e local groups working on regional issues such as the environmental impa of hydraulic fracturing for natural gas, algae blooms related to nutrity pollution and sulfide mining have the information, connections and resources needed to work toward their water protection goals.	r carp nsure cts
4c (Code: )(Expenses \$ 121,932 including grants of \$ ) (Revenue \$ 1 Provided workshops and one-on-one assistance to local groups through professional support from Freshwater Future. This assistance helped to build fundraising and other organizational skills to run the organizat as well as strategy assistance that helped groups utilize their resour effectively. Several groups were assisted in developing strategic plan help direct their activities over the coming years. Fundraising plans developed for several groups to help them diversify funding sources an build membership programs with strong support from within their communities. Groups were made more effective in their mission work thr sessions devoted to creating strategies for moving their mission forwal Two Climate Adaptation Symposia were held in Ithaca and Buffalo, New Y	ces s to were d ough rd.
4d Other program services. (Describe in Schedule O.)	
(Expenses \$ including grants of \$ ) (Revenue \$ )  4e Total program service expenses ▶ 921,623	

_	In the experimetion departised in specime E04(a)(2) or 4047(a)(4) (athor) there are a size of a large of the control of the co		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)?		X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
,	condidates for public office? If "Ves." complete Cohedula C. Dart I			v
4	***************************************	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)		7.	
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	X	
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		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,			
	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		X
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		X
0	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
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10	***	
	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,"	3.2000000	S. 100-100000	2000000
_		44-	x	
b	complete Schedule D, Part VI  Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more	. 11a		
	of the total asserts asserted in Doub V. time 460 M Was II asserted to Calculate D. Doub VIII	445		X
_	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more	. 11b		
С				v
_	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
ď	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		_ <u>X</u>
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	. 11e	X	
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	11f		X
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	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
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	1		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		х
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			
•		15	X	
6	tor any foreign organization? If "Yes," complete Schedule F, Parts II and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	15		
u				7.7
7	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	. 16		X
7	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		X
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	. 18		X
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?		l	
19	Did the digunization report more than \$10,000 or \$1000 means and garding activities of that \$111, line 5a:	l		
9	If "Yes," complete Schedule G, Part III	19		X
19 20a	If IIVan II appoint to Calculus C. Bort III	20a		X

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		Yes	No
£ 1	government on Part IV, column (A), line 12 If "Vos." complete Schodulo I, Parts I, and II	21	х	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States		A	-
	on Port IV, column (A) line 22 if "Vee " complete Schodule I. Porte I and III	20		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	22		
23				
	organization's current and former officers, directors, trustees, key employees, and highest compensated			37
04-	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			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			l
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			ļ
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) 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		X
b	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		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If so, complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	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 "Ves." complete Schedule I. 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	F + 900 (00000)	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	208		-
-	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)	<u>Zon</u>		
•	was an officer director trustee or direct or indirect owner? If "Vec." complete Schedule I. Bort IV	20-		x
29	Did the ergonization receive more than \$25,000 in non-each contributions 2 If #Ver # according Colored to 1.1		Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	29	Λ	-
30	conservation contributions? If "Yes," complete Schedule M			
24		30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			l
20	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		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			ļ
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
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	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
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		X
	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			T
37				
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R.			
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	27		Y
37 38		37		х

SPORTS	Check if Schedule O contains a response or note to any line in this Pa	art V	· · · · · · · · · · · · · · · · · · ·			
		1	1	(20,000000	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	10	<del></del>		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b				
С	Did the organization comply with backup withholding rules for reportable payments to vendors and					
20	reportable gaming (gambling) winnings to prize winners?			1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1	12			
h	Statements, filed for the calendar year ending with or within the year covered by this return  If at least one is reported on line 2a, did the organization file all required federal employment tax return	2a	12		•	
b				2b	X	
3a	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	,				v
b	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		X
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other at			3b		
<del></del> a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	-				
	account)?	anciai		4a		x
b	16 "Vos" materials of the ferring south to		• • • • • • • • • • • • • • • • • • • •	4d		
-	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	£33888888	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		• • • • • • • • • • • • • • • • • • • •	5b		X
C	If "Vee" to line 5a or 5h, did the organization file Form 8886 T2		• • • • • • • • • • • • • • • • • • • •	5c		1
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the					<del> </del>
	organization solicit any contributions that were not toy deductible as charitable contributions?			6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contribution		• • • • • • • • • • • • • • • • • • • •			<del></del> -
	gifts were not tax deductible?			6ь		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for go	oods				
	and services provided to the payor?			7a		
b	If "Voe " did the organization notify the denot of the value of the goods are an income and all			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s				
	required to file Form 8282?		ş	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year					
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co			7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form			7g	<u> </u>	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		orm 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting	I				
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring					
_	organization, have excess business holdings at any time during the year?			8	*************	
9	Sponsoring organizations maintaining donor advised funds.					
a	Did the organization make any taxable distributions under section 4966?			9a	<u> </u>	<del> </del>
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:	م ا	I			
a h	Initiation fees and capital contributions included on Part VIII, line 12  Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a	<del> </del>		[	1 🐃
b 11		10b	<u> </u>			
	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders	1445	1			
a b	Gross income from other sources (Do not net amounts due or paid to other sources	11a		<del> </del>		
b	against amounts due or received from them.)	11b				
I2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	· · · <u> </u>			<b>*******</b>	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	,	1	12a	 	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	12b	<u> </u>			
a	to the appropriate formed to be an excellent beauty does to see the second to the			12-	<b>*****</b>	******
a	Note. See the instructions for additional information the organization must report on Schedule O.		•••••	13a	<u> </u>	
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	13b	1			
С	Enter the amount of reserves on hand		<del></del>	<del> </del>		
I4a	Did the organization receive any payments for indoor tanning services during the tax year?			14a	300000	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule	· · · · · · · · · · · · · · · · · · ·		14b	†	+**

Form 990 (2013) Great Lakes Aquatic Habitat Network 20-5693503 Page 6 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 in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management Yes No 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 of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent h 6 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 X 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Did the organization have members or stockholders? 6 6 7a 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? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members. stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: ..... The governing body? 8a Each committee with authority to act on behalf of the governing body? X 8b 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 in Schedule O. X q Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a 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? 10b Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a X 11a b Describe in Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done X 12c Did the organization have a written whistleblower policy? 13 X 13 Did the organization have a written document retention and destruction policy? 14 X 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? The organization's CEO, Executive Director, or top management official ..... X 15a Other officers or key employees of the organization

#### organization's exempt status with respect to such arrangements? Section C. Disclosure

List the states with which a copy of this Form 990 is required to be filed ▶ MI

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).

Section 6104 requires an organization to make its Forms 1023 (or 1024 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.

with a taxable entity during the year?

X Own website X Another's website X Upon request Other (explain in Schedule O)

Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement

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

- Describe in 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.
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization: 🕨 Jill Ryan 325 East Lake Street

Petoskey

MI 49770

231-348-8200

16a

X

X

15b

Form 990 (201	O13) Great Lakes Aquatic Habitat Network 20-5693503	Page
Part VII		
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees	
a Complete organization's	e this table for all persons required to be listed. Report compensation for the calendar year ending with or within the s tax year.	
-	of the organization's <b>current</b> officers, directors, trustees (whether individuals or organizations), regardless of amount of	

- 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.

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	bo of	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)			is both an r/trustee)		(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	related organizations below dotted line)	hours for related organizations below dotted		Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Deborah Dorsey										
	1.00				Ì			_		
Director	0.00	Х	<u> </u>		ļ	<b>  </b>	_{	0	0	0
(2) Chris Grubb	7 00									
	1.00	3,			ļ			•		
Director	0.00	X					-	0	0	0
(3) Jill Ryan	40.00	ļ								
Executive Director	0.00			Х				79,878	0	
(4) Kristy Meyer	0.00		<del> </del>			+		19,010		0
(4) ILLIB CY LICYCL	3.00									
President	0.00			х			}	0	0	0
(5) Gary Belan								· · · · · · · · · · · · · · · · · · ·		
•	3.00									
Vice President	0.00			X		l		0	0	0
(6) Michelle Parker										
	3.00									
Treasurer	0.00			X			_	0	0	0
(7) Nancy Goucher										
	3.00							_		
Secretary	0.00	ļ	ļ	X				0	0	0
(8)										
(9)										
		ļ								
(10)		-					-			
(44)	<del> </del>	ļ		ļ	ļ	1-1	_			
(11)							Ì			
••••••										
DAA	1		٠	L	Ц.				l	000

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Form 990 (2013) Great Lakes Aquatic Habitat Network 20-5693503

Pa	art VII Section A. Officers	, Directors, Trus	tees	s, Ke	y Er	nplo	yees	s, ar	nd Highest Compensated E	Employees (continued)	
	(A) Name and title	(B) Average hours per week (list any	bo	x, unle	Pos check ess pe	erson	than of the thick that the thick tha	an	(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
(12)											
(13)					_		ļ				
(14)											
(15)	15)										
(16)											
(17)											
(18)											
(19)											
	Sub-total				·			<u> </u>	79,878		
С	Total from continuation shee	ts to Part VII, Se	ctio	n A				<b>•</b>			
d 2	Total (add lines 1b and 1c) Total number of individuals (incl							ve) v	79,878	) 000 in	
	reportable compensation from the			0					The reserved more than \$100		IVIN-
3	Did the organization list any for	mer officer, direc	tor, o	or tru	stee	, key	emp	loye	ee, or highest compensated		Yes No
4	employee on line 1a? If "Yes," c For any individual listed on line	1a, is the sum of	геро	rtab!	e cor	mper	nsatio	on a	nd other compensation from	the	3 X
	organization and related organiz								· · · · · · · · · · · · · · · · · · · ·		4 X
5	Did any person listed on line 1a for services rendered to the organization	receive or accrue	e cor	nper	ısatıc	on tro	om ai	าง นเ	nrelated organization or indiv	ridual	
	ion B. Independent Contractor	s									
1	Complete this table for your five compensation from the organization	ation. Report com	sated pens	d ind satio	epen n for	the	t con calen	tract dar	ors that received more than year ending with or within the	\$100,000 of e organization's tax year.	
	Name and	(A) business address					<u> </u>		Descrip	(B) tion of services	(C) Compensation
								İ			
								<u> </u>			
		-									
2	Total number of independent co	ontractors (includi	ng h	ut no	ot lim	ited	to the	L_ose	listed above) who		
	received more than \$100,000 of									0	

P	ırt V	III Stater Check	<b>nent of Reve</b> if Schedule (	e <b>nue</b> O contai	ns a response	or note to any line	in this Part VIII		П
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts	1a	Federated carr	paigns	1a					
ran L	b	Membership d		1b	26,377				
Contributions, Gifts, Grants and Other Similar Amounts	c	Fundraising ev		1c					
ifts	٦	Related organi	zotiono	1d					
O E	٦	Government grants		1e	· <del></del>				
Sis	f	All other contribution		''   -	·				
真	'		s not included above	   1f	1,145,542				
물탕	_								
200	9		ns included in lines 1a-						
	h	lotal. Add line	es 1a–1f			1,171,919			
ne	_				Busn. Code	10 660	10 660		
š	2a	Program	Service Rev	enue		10,663	10,663		
Program Service Revenue	b								
ξ̈	С								
Sel	d								
am	е								
Бō	f	All other progra	am service revent	ле					
<u>~</u>	g	Total. Add line	s 2a–2f			10,663			
	3	Investment inc	ome (including di	vidends, ir	nterest,				
		and other simil	ar amounts)		<b></b>	1,241			1,241
	4		vestment of tax-e						
	5	Royalties							
		·	(i) Real		(ii) Personal				
	6a	Gross rents				1			
	b	Less: rental exps.							
	C	Rental inc. or (loss)							
	d	7 7	me or (loss)	I					
		Gross amount from		······	(ii) Other				
		sales of assets			(II) Other	1			
		other than inventory				1			
	a	Less: cost or other							
		basis & sales exps.			•	1			
		Gain or (loss)							
			ss)		<b></b>				
₫	8a		om fundraising ever						
enr									
ě			reported on line 1c)						
F.		See Part IV, line	18	a	2,316				
Other Revenue	b	Less: direct ex	penses	b	407				
0			(loss) from fundr		nts ▶	1,909			1,909
			om gaming activities						
			19						
	h	Less: direct ev	penses	b		1			
			(loss) from gamir		s <b>b</b>				1
				ig activities	······				
	ıva	Gross sales of		_					
	١.		owances			1			
	1		oods sold		<u> </u>	-			
	C		(loss) from sales	of invento					
	<u> </u>	Mis	cellaneous Revenue		Busn. Code				
	11a								
	b								
	С								
	d		ue						
	е	Total. Add line	s 11a–11d		▶				
	12		. See instruction			1,185,732	10,663	0	3,150

Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A), Check if Schedule O contains a response or note to any line in this Part IX (A) (D) Do not include amounts reported on lines 6b, (B) (C) Total expenses Program service Management and Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and 383,262 383,262 organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the 14,000 U.S. See Part IV, lines 15 and 16 14,000 Benefits paid to or for members ..... Compensation of current officers, directors, 79,878 56,160 9,883 trustees, and key employees 13,835 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 226,069 194,012 9,080 22,977 Pension plan accruals and contributions (include 7,436 5,726 1,041 section 401(k) and 403(b) employer contributions) 669 Other employee benefits ..... 49,321 38,509 4,616 6,196 27,351 21,083 2,469 3,799 Payroll taxes 10 Fees for services (non-employees): Management ..... 152 152 Legal 9,513 5,457 2,342 1,714 Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees ..... g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) 956 12 916 25 Advertising and promotion \_\_\_\_\_ 37,379 27,208 Office expenses 3,406 6,765 Information technology ..... 14 Royalties 15 18,292 1,957 14,545 16 Occupancy 1,790 49,264 46,392 1,611 17 Travel 1,261 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Interest Payments to affiliates ..... 21 Depreciation, depletion, and amortization ..... 173 173 1,482 1,138 202 142 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.) Contracted Services 71,582 55,084 8,347 8,151 57,763 Consulting 57,763 4,562 Miscellaneous 368 2,576 1,618 e All other expenses ..... 1,038,435 921,623 47,508 25 Total functional expenses. Add lines 1 through 24e 69,304 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 F 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 (A) (B) Beginning of year End of year Cash—non-interest bearing 519,604 411,419 Savings and temporary cash investments 2 Pledges and grants receivable, net 205,191 3 3,301 Accounts receivable, net 7,221 4 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 3,963 9 4,877 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D \_\_\_\_\_\_\_\_10a 3,937 b Less: accumulated depreciation 10b 172 10c Investments—publicly traded securities 11 11 Investments—other securities. See Part IV, line 11 12 12 Investments—program-related. See Part IV, line 11 13 13 14 Intangible assets 14 Other assets. See Part IV, line 11 15 15 Total assets. Add lines 1 through 15 (must equal line 34) 527,040 628,708 16 16 Accounts payable and accrued expenses ...... 27,524 35,131 17 17 21,994 8,570 18 Grants payable ..... 18 70,003 Deferred revenue 19 19 30,191 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 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 8,300 of Schedule D 25 8,300 Total liabilities. Add lines 17 through 25 127,821 82,192 26 Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 336,132 225,016 Temporarily restricted net assets \_\_\_\_\_ 63,087 28 321,500 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 399,219 Total net assets or fund balances 33 546,516 527,040 Total liabilities and net assets/fund balances ...... 628,708

Form 990 (2013)

Reconciliation of Net Assets 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) 2 Total expenses (must equal Part IVII, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 3 1.47,297 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 6 Donated services and use of facilities 7 Investment expenses 7 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 7 Net unit of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 7 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 8 Part 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:	orm	990 (2013) Great Lakes Aquatic Habitat Network 20-5693503			Pag	ge <b>12</b>
1 Total revenue (must equal Part VIII, column (A), line 12) 2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 3 1 1, 185, 732 2 10, 38, 435 8 Revenue less expenses. Subtract line 2 from line 1 3 1 47, 297 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 399, 219 5 Net unrealized gains (losses) on investments 5	Pa	rt XI Reconciliation of Net Assets				
2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 3 147, 297 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 6 Donated services and use of facilities 7 Investment expenses 7 Prior period adjustments 8 Prior period adjustments 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 Other changes in net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 11 Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII 12 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. 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 or both: X Separate basis Consolidated basis or both:		Check if Schedule O contains a response or note to any line in this Part XI				
2 Total expenses (must equal Part IX, column (A), line 25) 3 Revenue less expenses. Subtract line 2 from line 1 3 147,297 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 6 Donated services and use of facilities 7 Investment expenses 7 Prior period adjustments 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 Part 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:	1		1	1,18	35,	732
3 147,297  Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  Net unrealized gains (losses) on investments  Donated services and use of facilities  Prior period adjustments  Other changes in net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Net unrealized gains (losses) on investments  Other changes in net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting  Check if Schedule O contains a response or note to any line in this Part XII  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.  We were the organization's financial statements compiled or reviewed by an independent accountant?  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  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:  X Separate basis Consolidated basis, or both:  X Separate basis Consolidated basis Both consolidated and separate basis  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:  X Separate basis Consolidated basis Both consolidated and separate basis  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:  X Separate basis Consolidated basis, or both:  X	2	Total expenses (must equal Part IX, column (A), line 25)	2	1,03	38,4	435
A Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  Net unrealized gains (losses) on investments  Donated services and use of facilities  Investment expenses  Prior period adjustments  Net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting  Check if Schedule O contains a response or note to any line in this Part XII  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.  Were the organization's financial statements compiled or reviewed by an independent accountant?  Part XII Fyes, "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  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis Both consolidated and separate basis  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis Both consolidated and separate basis  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, or oth:  Separate basis Consolidated basis Both consolidated and separate basis  If "Yes," check a box below to indicate and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  As a	3	December 1 and 1 a	3	14	17,2	297
5 Net unrealized gains (losses) on investments 6 Donated services and use of facilities 7 Investment expenses 7 To Investment expenses 7 To Investment expenses 7 To Investment expenses 8 Prior period adjustments 8 Prior period adjustments 8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 9 To Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 7 Financial Statements and Reporting 7 Check if Schedule O contains a response or note to any line in this Part XII 8 Financial Statements and Reporting 9 Check if Schedule O contains a response or note to any line in this Part XII 9 Accounting method used to prepare the Form 990: Cash X Accrual Other 1 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. 2 Were the organization's financial statements compiled or reviewed by an independent accountant? 1 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: 1 Separate basis Consolidated basis and independent accountant? 2 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: 2 Separate basis Consolidated basis and independent accountant? 2 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis and independent accountant? 2 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis Consolidated basis and independent accountant? 2 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis Consolidated basis and independent accountant? 2 If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis Consoli	4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	39	9,2	219
6 Donated services and use of facilities 7 Investment expenses 7   Service prior dadjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10   S46, 516  Part 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:	5		5			
7   Investment expenses   7   8   Prior period adjustments   8   9   9   Other changes in net assets or fund balances (explain in Schedule O)   9   10   Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))   10   546, 516    Part XII   Financial Statements and Reporting   Check if Schedule O contains a response or note to any line in this Part XII	6		6			
8 Prior period adjustments 9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33. column (B))  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII  For 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.  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 b Were the organization's financial statements audited by an independent accountant? 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 Both consolidated and separate basis b Were the organization's financial statements audited by an independent accountant?  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: X Separate basis, Consolidated basis, or both: X Separate basis Consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis Consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis Consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis Consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis Consolidated basis, or both: X Separate basis Consolidated basis Consoli	7		7			
9 Other changes in net assets or fund balances (explain in Schedule O) 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) 10 546, 516  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	8		8			
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII.    Yes   No	9		9			
Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII    Accounting method used to prepare the Form 990:   Cash   X   Accrual   Other	10					
Check if Schedule O contains a response or note to any line in this Part XII  Check if Schedule O contains a response or note to any line in this Part XII  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.  2a Were the organization's financial statements compiled or reviewed by an independent accountant? 2a Were the organization's 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  b Were the organization's financial statements audited by an independent accountant? 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: X Separate basis Consolidated basis, or both: X Separate basis Consolidated basis Both consolidated and separate basis 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? 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?			10	54	16 1	516
Check if Schedule O contains a response or note to any line in this Part XII    Accounting method used to prepare the Form 990:	Pa	ort XII Financial Statements and Reporting			, .	
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Accounting method used to prepare the Form 990:		Check in Contours & Contains a response of note to any line in this fact Art			$\overline{}$	
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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  b 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:  X Separate basis Consolidated basis Both consolidated and separate basis  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  2c X  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?	•			-		
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Example 2 Separate basis Consolidated basis Both consolidated and separate basis 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?  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 X						
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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 X						
the Single Audit Act and OMB Circular A-133?	3-				W. 17.000	
	Jd	the Single Audit Act and OMD Circular A 1222		30		v
b ii 163, did the diganization and go the required addit of addits: If the diganization did not undergo the	h	• • • • • • • • • • • • • • • • • • • •		Ja		
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. 3b	U			25		

Form 990 (2013)

8868 Form

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

## Application for Extension of Time To File an **Exempt Organization Return**

File a separate application for each return.

OMB No. 1545-1709

Information about Form 8868 and its instructions is at www.irs.gov/form8868. If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box X If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868. Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits. Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Type or Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or Great Lakes Aquatic Habitat Network print and Fund, Inc. 20-5693503 Number, street, and room or suite no. If a P.O. box, see instructions. Social security number (SSN) File by the due date for P.O. Box 2479 filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions. return. See MI 49770 Petoskey instructions 01 Enter the Return code for the return that this application is for (file a separate application for each return) Application Application Return Return Is For Code Is For Code Form 990 or Form 990-EZ Form 990-T (corporation) 01 07 Form 990-BL Form 1041-A 80 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 6069 Form 990-T (sec. 401(a) or 408(a) trust) 05 11 Form 990-T (trust other than above) 06 Form 8870 12 Jill Ryan 325 East Lake Street The books are in the care of ▶ Petoskey Telephone No. ▶ 231-348-8200 FAX No. ▶ If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) for the whole group, check this box ..... 

If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 05/15/15, to file the exempt organization return for the organization named above. The extension is for the organization's return for: calendar year \_\_\_\_\_ or  $\blacktriangleright$  X tax year beginning 10/01/13, and ending 09/30/14 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 0 3a b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

EFTPS (Electronic Federal Tax Payment System). See instructions.

estimated tax payments made. Include any prior year overpayment allowed as a credit.

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using

\$

3b

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#### **SCHEDULE A**

(Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Employer identification number

Open to Public Inspection

Internal Revenue Service

Name of the organization

Department of the Treasury

Great Lakes Aquatic Habitat Network

and Fund, Inc. 20-5693503

P	art I	Reas	on for Public Charity	Status (All organizations	must c	omplete	e this p	art.) S	ee ins	tructio	ns.			
The	orgai			t is: (For lines 1 through 11, chec			· · · · · · · · · · · · · · · · · · ·							
1	Ň			ciation of churches described in			N)(i).							
2	П	A school desc	cribed in section 170(b)(1)(A	)(ii). (Attach Schedule E.)			,							
3	П	A hospital or	a cooperative hospital service	organization described in sectio	n 170(b)(1	1)(A)(iii).								
4	П	•	·	n conjunction with a hospital des			70(Ь)(1)(	A)(iii). E	nter the	hospital	l's name			
	_	city, and state									, - , , , , , , , , , , , , , , , , , ,			
5	$\Box$	•		a college or university owned or o					ribed in					
	ш		b)(1)(A)(iv). (Complete Part I		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, a gere		4555	11000 111					
6		•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ernmental unit described in sect	ion 170(h)	/4\/ <b>A</b> \/ <sub>\</sub> /\								
7	X		•	bstantial part of its support from	• •			the cono	ral publi	io				
,	••		section 170(b)(1)(A)(vi). (Co		a governin	icinai unii	01 110111	ine gene	i ai pubi	i.C				
8	$\Box$			inipiete Part II.) i0(b)(1)(A)(vi). (Complete Part II.	1									
9	H	=		more than 33 1/3% of its support	•	ributiono	mamba	obio foo						
9	Ш							•	-					
		•	·	t functions—subject to certain ex	•	٠,				5				
			=	unrelated business taxable incom 1975. See section 509(a)(2). (C	•		i (ax) iio	m busine	esses					
10			<del>-</del>	clusively to test for public safety.	•	•	\(A\)							
11	H	_	•	clusively to test for public safety. clusively for the benefit of, to perf		٠, ٠	. ,	arry out t	ha					
• • •		=		d organizations described in secti				•		on				
				e type of supporting organization						011				
		a Type		c Type III–Functiona	•		. 10 uno	<del>-</del>		n functio	onally inte	arataa		
е				nization is not controlled directly of			u ( or more d				many mie	grateu		
-				than one or more publicly suppor				-						
		or section 509		man one or more pasticly suppor	ted organia	Lations ac	Scribca	iii acciioi	11 505(a	,( · )				
f			` ' '	nination from the IRS that it is a T	vne I Tvn	ell or Tv	me III su	nnortina						
•			check this box		,po ., . ,p		po	pporting						
g		_		on accepted any gift or contribution	on from an	v of the		· · · · · · · · · ·						
9		following pers		acceptant any garage account and		,								
				trols, either alone or together with	persons	described	Lin (ii) ar	nd				Γ	Yes	No
		• •	•	upported organization?	•		` '				1	1g(i)		
			member of a person describe	Caucado (i) ai ba							١.	1g(ii)		_
			ontrolled entity of a person de								· · · · · · ·	1g(iii)		_
h			ollowing information about the	***							L	TG(III)		
	Nam	e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the o	organization	(v) Did v	ou notify	(vi) i	s the	(vii) An	nount of	menet	201
٠,	•	anization	(11/ 2.11	(described on lines 1–9	1 ' '	sted in your		ization in	organizat		(VII) AII	suppor		ary
				above or IRC section	governing	document?		of your oort?	(i) organi	zed in the				
				(see instructions))	Yes	No	Yes	No	Yes	No				
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(/-)														
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For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	880,297	813,899	814,735	835,694	1,171,919	4,516,544
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3	880,297	813,899	814,735	835,694	1,171,919	4,516,544
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount	than a r publicly tion) included on 2% of the amount					
	shown on line 11, column (f)						2,275,902
6_	Public support. Subtract line 5 from line 4.						2,240,642
	tion B. Total Support			1	<u> </u>		
	ndar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7	Amounts from line 4	880,297	813,899	814,735	835,694	1,171,919	4,516,544
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,596	2,679	1,421	1,120	1,241	9,057
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)				3,754	2,316	6,070
11	Total support. Add lines 7 through 10						4,531,671
12	Gross receipts from related activities, etc. (s	see instructions)				12	54,511
13	First five years. If the Form 990 is for the	organization's first,	second, third, fourtl	h, or fifth tax year a	s a section 501(c)(3	3)	
	organization, check this box and stop here			<u></u> ,		· · · · · · · · · · · · · · · · · · ·	▶ □
Sec	tion C. Computation of Public S						
14	Public support percentage for 2013 (line 6,	column (f) divided b	y line 11, column (	f))		14	49.44%
15	Public support percentage from 2012 Scher		4.4			1 1	47.58%
16a	33 1/3% support test—2013. If the organiz						
	box and stop here. The organization qualifi	es as a publicly sup	ported organization	١			► X
b	33 1/3% support test—2012. If the organiz	zation did not check	a box on line 13 or	16a, and line 15 is	33 1/3% or more,		
	check this box and stop here. The organiza	ation qualifies as a p	oublicly supported o	organization			▶ □
17a	10%-facts-and-circumstances test—2013						
	10% or more, and if the organization meets	the "facts-and-circu	umstances" test, ch	eck this box and st	op here. Explain in		
	Part IV how the organization meets the "fac	ts-and-circumstanc	es" test. The organ	ization qualifies as	a publicly supported	b	
	organization						▶ □
b	10%-facts-and-circumstances test-201:	2. If the organization	n did not check a bo	ox on line 13, 16a,	16b, or 17a, and line	9	
	15 is 10% or more, and if the organization n	neets the "facts-and	d-circumstances" te	est, check this box a	and stop here.		
	Explain in Part IV how the organization mee				•	/	
	supported organization						▶ □
18	Private foundation. If the organization did	not check a box on	line 13, 16a, 16b,	17a, or 17b, check	this box and see		
	instructions		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				<b>&gt;</b> \[ \]

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose		-				
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		3				
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						<u> </u>
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from						
500	line 6.) tion B. Total Support	]	<u> </u>				
	idar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(a) 2012	(D. T )
9	Amounts from line 6	(a) 2003	(5) 2010	(6) 2011	(a) 2012	(e) 2013	(f) Total
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for the	organization's first,	second, third, fourt	h, or fifth tax year a	s a section 501(c)(	3)	
	organization, check this box and stop here			<u></u>	· · · · · · · · · · · · · · · · · · ·	····	
Sec	tion C. Computation of Public S	upport Percer	ntage				
15	Public support percentage for 2013 (line 8,	column (f) divided b	oy line 13, column (	f))		15	%
16	Public support percentage from 2012 Sche	dule A, Part III, line	15	····	<u></u>		%
	tion D. Computation of Investment					···	
17 18	Investment income percentage for 2013 (lin	e ruc, column (†) di	iviaea by line 13, co	oiumn (†))			%
18 19a	Investment income percentage from 2012 S 33 1/3% support tests—2013. If the organ	ization did not abor	with a box on line 1	1 and line 15 is	ro than 22 4/20/		<u> </u>
ıJa	17 is not more than 33 1/3%, check this box						▶ □
b	33 1/3% support tests—2012. If the organ						<b>"</b> L
-	line 18 is not more than 33 1/3%, check this	box and stop here	e. The organization	qualifies as a publi	cly supported orga	nization	<b>&gt;</b>
	Private foundation. If the organization did	nat abaalca baccan	line 14 10e er 10	h shook this hav ar			······ [

Part IV	Supplemental Ir Part III, line 12. A	nformation. Provide Also complete this p	e the explanations re art for any additional	quired by Part II, line 10; Pa information. (See instruction	rt II, line 17a or 17b; and
Part 1	II, Line 10	- Other Inco	me Detail		,
Fundra	aising event	s	\$	6,070	
• • • • • • • • • • •					
• • • • • • • • • • • • • • • • • • • •					
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•• 1: ( 1: • • • • • • •	-,, .,,				
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#### SCHEDULE C (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

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

Complete if the organization is described below.

Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule C (Form 990 or 990-EZ) and its

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

instructions is at www.irs.gov/form990.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

• Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.

► See separate instructions.

- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

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

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

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

Nan	ne of organization Great Lakes Aquatic H and Fund, Inc.	abitat Network		Employer identificati	
Da.	t I-A Complete if the organization is exem	ent under section 501/c	) or is a soction	20-56935	
<u>ા લા</u> 1	Provide a description of the organization's direct and indirect			ii Jzi Olganizat	1011.
2	Political expenditures			▶ ¢	
3					
v	Volunteer hours		• • • • • • • • • • • • • • • • • • • •		
Pai	H-B Complete if the organization is exem				
1	Enter the amount of any excise tax incurred by the organization	on under section 4955		<b>▶</b> \$	
2	Enter the amount of any excise tax incurred by organization m	nanagers under section 4955		▶ \$	
3	If the organization incurred a section 4955 tax, did it file Form	4720 for this year?			Yes No
4a	Was a correction made?				
200.00	If "Yes," describe in Part IV.				
Pai	t I-C Complete if the organization is exem		c), except section	on 501(c)(3).	
1	Enter the amount directly expended by the filing organization f				
	activities			<b>&gt;</b> \$	
2	Enter the amount of the filing organization's funds contributed	_			
_	527 exempt function activities	·····		► \$ <sub></sub>	
3	Total exempt function expenditures. Add lines 1 and 2. Enter				
4	line 17b			▶\$	
4	Did the filing organization file Form 1120-POL for this year?	(FINI) of all another 507 and the			Yes No
5	Enter the names, addresses and employer identification number	• •	-		
	organization made payments. For each organization listed, en the amount of political contributions received that were promp	,			
	as a separate segregated fund or a political action committee		,		
	(a) Name				
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate
			[		political organization. If none, enter -0
(1)					Total of the control
( )					
(2)					
(-,					:
(3)					
,					
(4)					
(5)					
(6)					

Schedule C (Form 990 or 990-EZ) 2013

P	art II-A	Complete if the organisection 501(h)).	nization is exempt under section 501(c)(	3) and filed Form 5768 (ele	ection under
	Check ► Check ►	if the filing organization name, address, Ell	ation belongs to an affiliated group (and list N, expenses, and share of excess lobbying ation checked box A and "limited control" pr	expenditures).	oup member's
			obbying Expenditures " means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1	a Total lobby	ring expenditures to influence	oublic opinion (grass roots lobbying)	3,558	
			a legislative body (direct lobbying)		
			and 1b)		
		npt purpose expenditures		) A	
	e Total exem	pt purpose expenditures (add	lines 1c and 1d)	3,558	
			mount from the following table in both	712	
	If the amount	on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500	,000	20% of the amount on line 1e.		
	Over \$500,000	) but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.		
	Over \$1,000,0	00 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.		
	Over \$1,500,0	00 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.		
	Over \$17,000,	000	\$1,000,000.		
	g Grassroots	nontaxable amount (enter 25	% of line 1f)	178	
	h Subtract lin	ne 1g from line 1a. If zero or le	ss, enter -0-	3,380	
		ne 1f from line 1c. If zero or les		2 0/6	
	-	n amount other than zero on e	either line 1h or line 1i, did the organization file Form 47	720	Yes X No.

### 4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expendit	ures During 4-Year	Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	( <b>d</b> ) 2013	(e) Total
2a Lobbying nontaxable amount	133,223	124,916	148,534	712	407,385
<ul> <li>b Lobbying ceiling amount (150% of line 2a, column(e))</li> </ul>					611,078
c Total lobbying expenditures	23	8,323	1,604	3,558	13,508
d Grassroots nontaxable amount	33,306	31,229	37,134	178	101,847
e Grassroots ceiling amount (150% of line 2d, column (e))					152,771
f Grassroots lobbying expenditures	23	8,323	1,604	3,558	13,508

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013 Great Lakes Aquatic Habitat Network 20-5693503 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)). (a) For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. Yes No Amount During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." Dues, assessments and similar amounts from members 1 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information. Schedule C, Part II-A, Explanation of Four Year Averaging Freshwater Future did not have any lobbying expenses in 2009.

Schedule C (Form 99		Great	Lakes	Aquatic	Habitat Network	20-5693503	Page <b>4</b>
Part IV	Supplemer	ital Informa	ation (con	tinued)			
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#### **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.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

OMB No. 1545-0047

Name of the organization

Employer identification number

G	Great Lakes Aquatic Habitat Network			
_ &	and Fund, Inc.		20-5	693503
P	art I Organizations Maintaining Donor Advised Fu	nds or Other Similar Funds or A	ccou	nts.
	Complete if the organization answered "Yes" to F	Form 990, Part IV, line 6.		
		(a) Donor advised funds	(	b) Funds and other accounts
1	Total number at end of year			
2	• · · · · · · · · · · · · · · · · · · ·			
3				
4	Aggregate value at end of year			
5				
	funds are the organization's property, subject to the organization's exclusive			Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writ	ing that grant funds can be used		res No
	only for charitable purposes and not for the benefit of the donor or donor ac			
	conferring impermissible private benefit?			Yes No
P	art II Conservation Easements.			
	Complete if the organization answered "Yes" to F	form 990, Part IV, line 7.		
1	Purpose(s) of conservation easements held by the organization (check all t	that apply).		
	Preservation of land for public use (e.g., recreation or education)	Preservation of an historically importa	ant land	area
	Protection of natural habitat	Preservation of a certified historic str		
	Preservation of open space	_		
2	Complete lines 2a through 2d if the organization held a qualified conservation	on contribution in the form of a conservation		
	easement on the last day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements		2a	The state of the fax four
b	Total acreage restricted by conservation easements		2h	
С	Number of conservation easements on a certified historic structure include	d in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06,	and not on a		
	historic structure listed in the National Register		2d	
3	Number of conservation easements modified, transferred, released, extingu	uished, or terminated by the organization duri	ng the	
	tax year ▶		_	
4	Number of states where property subject to conservation easement is locat	red <b>&gt;</b>		
5	Does the organization have a written policy regarding the periodic monitorin	g, inspection, handling of		
	violations, and enforcement of the conservation easements it holds?			Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, and enforcing	conservation easements during the year		
	<b></b>	-		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing cons	servation easements during the year		
	<b>▶</b> \$			
8	Does each conservation easement reported on line 2(d) above satisfy the re	equirements of section 170(h)(4)(B)		
	(i) and section 170(h)(4)(B)(ii)?	***************************************		Yes No
9	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 orga	nization's financial statements that describes	the	
500.000	organization's accounting for conservation easements.			
Pa	art III Organizations Maintaining Collections of Art,	Historical Treasures, or Other S	imila	Assets.
	Complete if the organization answered "Yes" to F			
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 exhi	bition, education, or research in furtherance of	of	
	public service, provide, in Part XIII, the text of the footnote to its financial sta	atements that describes these items.		
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to rep	oort in its revenue statement and balance she	et	
	works of art, historical treasures, or other similar assets held for public exhi	bition, education, or research in furtherance of	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		▶	\$
2	if the organization received or held works of art, historical treasures, or other	er similar assets for financial gain, provide the	)	
	following amounts required to be reported under SFAS 116 (ASC 958) relative	ting to these items:		
a	Revenues included in Form 990, Part VIII, line 1	***************************************	Þ	\$
b	Assets included in Form 990, Part X			

Part IV  Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)
Scholarly reasons
Scholarly research     Other
c   Preservation for future generations  4   Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  5   During the year, did the organization sciolit or receive donations of art, historical tressures, or other similar assets to be sold to traise future granization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form  990, Part XI, line 21.  1a Is the organization an angent, trustee, custodian or other intermediary for contributions or other assets not included or Form 990, Part X7?   Yes   No  1   Yes   Robert   No   No   No   No   No   No   No   N
c   Preservation for future generations  A Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.  A Provide a description of the organization solicit or receive donations of art, historical tressures, or other similar assesses to be sold to raise funds rather than to be maintained as part of the organization's collection?  Part IV.  Escrow and Custodial Arrangements.  Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  1a is the organization an agent, truste, outstodian or other intermediary for contributions or other assests not included on Form 990, Part X, line 21.  1a is the organization and agent, truste, outstodian or other intermediary for contributions or other assests not included on Form 990, Part X, line 21.  1a is the organization and part truste, outstodian or other intermediary for contributions or other assests not included on Form 990, Part X, line 21.  1b if "Yes" explain the arrangement in Part XIII and complete the following table:  a Beginning blainace  1c
SUIL   St.   During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?
SUIL   St.   During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?
## Part V   Excrow and Cruste funds rather than to be maintained as part of the organization's collection?
## Part V   Excrow and Cruste funds rather than to be maintained as part of the organization's collection?
Secret Will   Escrow and Custodial Arrangements.   Complete   The organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.    1a   Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XIII and complete the following table:   Amount   It
990, Part X, line 21.  1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  1b If "Fes," explain the arrangement in Part XIII and complete the following table:    C
Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?   Yes
included on Form 990, Part X?    Seginning balance   Amount
c Beginning balance   Amount   1c
d Additions during the year 1d d
c. Beginning balance  d. Additions during the year  e. Distributions during the year  f. Ending balance  2a. Did the organization include an amount on Form 990, Part X, line 217:  b. If Yes, explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII  Part V. Endowment Funds.  Complete if the organization answered "Yes" to Form 990, Part I.V, line 10.  1a. Beginning of year balance  b. Contributions  c. Net investment earnings, gains, and losses  d. Grants or scholarships  e. Other expenditures for facilities and programs  f. Administrative expenses  g. End of year balance  b. Part V. Endowment ►  %  Temporarily restricted endowment I →  %  Temporarily restricted endowment I →  %  Temporarily restricted endowment I →  %  Temporarily restricted endowment I have organization that are held and administered for the organization by in life years organization by in life years organization S  iii   Yes   No    3a(II)      3a(II)      4   Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part I.V, line 11a. See Form 990, Part X, line 10.  Describe in Part XIII the intended uses of the organization answered "Yes" to Form 990, Part IIV, line 11a. See Form 990, Part X, line 10.  Describe in Part XIII the intended uses of the organization answered "Yes" to Form 990, Part IIV, line 11a. See Form 990, Part X, line 10.  Describe in Part XIII the intended uses of the organization answered "Yes" to Form 990, Part IIV, line 11a. See Form 990, Part X, line 10.  Describe in Part XIII the intended uses of the organization answered "Yes" to Form 990, Part IIV, line 11a. See Form 990, Part X, line 10.  Describe in Part XIII the intended uses of the organization answered "Yes" to Form 990, Part IIV, line 11a. See For
d Additions during the year f Ending balance 2a Did the organization include an amount on Form 990, Part X, line 217 b If Yes explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII  Part V Endowment Funds.  Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  1a Beginning of year balance b Contributions 1b Contributions 1c Net investment earnings, gains, and losses 1d Grants or scholarships 1e Other expenditures for facilities and programs 1f Administrative expenses 1g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organizations 1i) related organizations 1i) If "Yes" to 3di(i), are the related draganizations listed as required on Schedule R? 2 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VIII Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Describe in Part XIII the intended uses of the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Described of property  (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation (d) Book value (d) Book
e Distributions during the year  f Ending balance  2a Did the organization include an amount on Form 990, Part X, line 21?  2b Did the organization include an amount on Form 990, Part X, line 21?  2c Did the organization include an amount on Form 990, Part X, line 21?  2a Did the organization include an amount on Form 990, Part X, line 21?  2b Endowment Funds.  Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  1a Beginning of year balance  b Contributions  c Net investment earnings, gains, and losses  d Grants or scholarships  e Other expenditures for facilities and programs  f Administrative expenses  g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment   6 Permanent endowment   7 Permanent endowment   7 Permanent endowment   8 The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations  (ii) related organizations  (iii) related organizations  5 If Yes I No 3a(ii) are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (b) Cost or other basis (c) Accoundated depreciation  (d) Book value  (d) Book value  (d) Book value  (d) Book value
f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21?  Part V: Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.  1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (iii) related organizations (iii) (line 11a. See Form 990, Part X, line 10.  Description of property (iii) Ocolor orber basis (iii) (coher) (iii) Ocolor orber basis (iiii) Ocolor orber basis (iiiii) Ocolor orber basis (iiii) Ocolor orber basis (iiii) Ocolor or
Both Press   explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.   Part V   Endowment Funds.
Part V   Endowment Funds.   Complete if the organization answered "Yes" to Form 990, Part IV, line 10.
Complete if the organization answered "Yes" to Form 990, Part IV, line 10.    Complete
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back b Contributions  c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (ii) irelated organizations (iii) related organizations b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? 4 Describe in Part XIII the intended uses of the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (c) Accumulated depreciation (d) Book value
1a Beginning of year balance b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (iv) related organizations (iv) restricted lines 2a, 2b, and 2c should equal 100%.  Part Vi Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation (d) Book value depreciation  1a Land b Buildings
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations  b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  2 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI  Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation  1a Land b Buildings
c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations 3a(ii)   administrative and a sequired on Schedule R? 4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI  Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation depreciation  1a Land b Buildings
d Grants or scholarships  e Other expenditures for facilities and programs  f Administrative expenses g End of year balance  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment ▶ %  Permanent endowment ▶ %  The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations  (ii) related organizations  (iii) related organizations  (iii) related organizations  (iii) related organizations  (iv) related organization
d Grants or scholarships  e Other expenditures for facilities and programs  f Administrative expenses g End of year balance  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment ▶ %  Permanent endowment ▶ %  The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations  (ii) related organizations  (iii) related organizations  (iii) related organizations  (iii) related organizations  (iv) related organization
e Other expenditures for facilities and programs  f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment ▶ %  b Permanent endowment ▶ %  The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations (ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI  Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation (d) Book value depreciation  1a Land  b Buildings
f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ %  The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations  5 If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (c) Accumulated depreciation (other)  4 Buildings  (d) Book value  (d) Book value  (d) Book value
f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ %  The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations  5 If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (c) Accumulated depreciation (other)  4 Buildings  (d) Book value  (d) Book value  (d) Book value
g End of year balance  Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment ▶ %  Permanent endowment ▶ %  The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations  (ii) related organizations  b If "Yes" to 3a(ii), are the related organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation  (investment)  (b) Buildings  (investment)
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations
a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations  (ii) related organizations  (iii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI  Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation  1a Land  b Buildings    Description of property   (a) Cost or other basis (c) Accumulated depreciation   (d) Book value   (investment)   (other)   (other)   (other)   (d) Book value   (d) Book
c Temporarily restricted endowment ▶ % The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations  (ii) related organizations  (iii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI  Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation  1a Land  b Buildings  Buildings
The percentages in lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations  (ii) related organizations  b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation  1a Land  b Buildings
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations (iv) the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI  Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value (investment) (other) depreciation  1 Land  b Buildings
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations (ii) related organizations (iii) related organizations (iii) related organizations (iv) the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI  Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated (d) Book value (investment) (other) depreciation  1 Land  b Buildings
Organization by:   Organizatio
(ii) unrelated organizations (iii) related organizations b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI  Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation  1a Land b Buildings
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation  1a Land  b Buildings
b if "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation  (d) Book value  1a Land b Buildings
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation  1a Land  b Buildings
Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  (other)  1a Land  b Buildings
Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (investment)  (other)  Description of property  (d) Book value  (d) Book value  depreciation
Description of property  (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation  (investment)  (other)  (d) Book value  (d) Book value  b Buildings
(investment) (other) depreciation  1a Land b Buildings
1a Land b Buildings
b Buildings
c Leasehold improvements
,
d Equipment 3,937 3,937
e Other
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

	Complete if the organization answered "Yes" to		ne 11b. See Form 990, Part X, line 12.
	(a) Description of security or category	(b) Book value	(c) Method of valuation:
	(including name of security)		Cost or end-of-year market value
(1) Financial o	derivatives		
(2) Closely-he	eld equity interests		
(3) Other			
(A)			
(B)			
(E)			
(F)			
(G)			
(H)			
	n (b) must equal Form 990, Part X, col. (B) line 12.) ▶		
Part VIII	Investments—Program Related.		
	Complete if the organization answered "Yes" to	Form 990, Part IV, lin	e 11c. See Form 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation:
			Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	(b) must equal Form 990, Part X, col. (B) line 13.) ▶		
Part IX	Other Assets.		
	Complete if the organization answered "Yes" to I	Form 990, Part IV, lin	e 11d. See Form 990, Part X, line 15.
	(a) Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)	1		
(6)			
(7)		<del></del>	
(8)			
(9)			
	(b) must equal Form 990, Part X, col. (B) line 15.)		<b>&gt;</b>
Part X	Other Liabilities.		
	Complete if the organization answered "Yes" to I line 25.	Form 990, Part IV, lin	e 11e or 11f. See Form 990, Part X,
l <u>.                                    </u>	(a) Description of liability	(b) Book value	
	ncome taxes		
	nsated Absences	8,300	
(3)			
(4)			
(5)			
(6)			
(7)			
(8)		·	ro

8,300

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶

<sup>2.</sup> Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2013 Great Lakes Aquatic Habi			Page 4
Part XI Reconciliation of Revenue per Audited Financial Complete if the organization answered "Yes" to Form		nue per Return.	······································
1 Total revenue, gains, and other support per audited financial statements		1	1,185,732
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			1,100,132
a Net unrealized gains on investments	2a		
b Donated services and use of facilities	2b		
c Recoveries of prior year grants	2c		
d Other (Describe in Part XIII.)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	1,185,732
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	<u>4</u> a		
b Other (Describe in Part XIII.)			
c Add lines 4a and 4b  Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		4c	1 10
Part XII Reconciliation of Expenses per Audited Financia	I Statemente With Evne	5	1,185,732
Complete if the organization answered "Yes" to Form	n 990. Part IV. line 12a.	enses per Keturr	1.
A Tatalamana and last 19 16 11 14		1	1,038,435
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a Donated services and use of facilities	2a		
<b>b</b> Prior year adjustments	2b		
c Other losses	2c		
d Other (Describe in Part XIII.)	2d		
e Add lines 2a through 2d  3 Subtract line 2e from line 1		2e	
<ul> <li>3 Subtract line 2e from line 1</li> <li>4 Amounts included on Form 990, Part IX, line 25, but not on line 1:</li> </ul>		3	1,038,435
a Investment expenses not included on Form 990, Part VIII, line 7b	4.		
b Other (Describe in Part XIII.)	4a		
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	1,038,435
Part XIII Supplemental Information			
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F	Part IV, lines 1b and 2b; Part V, li	ne 4; Part X, line	
2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pro	ovide any additional information.		
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DAA		Sci	nedule D (Form 990) 2013
		301	

# SCHEDULE F (Form 990)

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
 ► Attach to Form 990.
 ► See separate instructions.

or 16. **2013** Open to Public

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

► Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Great Lakes Aquatic Habitat Network

Employer ide

Employer identification number

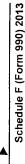
and Fund, Inc. 20-5693503 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (a) Region (b) Number of (d) Activities conducted in (c) Number of (e) If activity listed in (d) is (f) Total offices in the employees, agents, region (by type) (e.g., a program service. expenditures for region and independent fundraising, program services, describe specific type of and investments contractors investments. service(s) in region in region in region grants to recipients located in the region) (1) (2) \_(3) \_(4) (5) (6) (7) (8) (9) (10)(11)(13)(14)(15)(16)(17) 3a Sub-total b Total from continuation sheets to Part I ... c Totals (add lines 3a and 3b)

20-5693503 Great Lakes Aquatic Habitat Network Schedule F (Form 990) 2013

Page 2 Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed Part II

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 7

Enter total number of other organizations or entities 8



P	art IV Foreign Forms	
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	<b>X</b> No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	<b>X</b> No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing  Fund. (see Instructions for Form 8621)  Yes	<b>X</b> No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	<b>X</b> No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	X No

Schedule F (Form 990) 2013

Page 4

Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States ▶ Attach to Form 990.

OMB No. 1545-0047 2013

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public

ŝ Wild Rice Protection Inspection Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Little Manitowoc Yellow Dog River (h) Purpose of grant Milwaukee River or assistance Employer identification number Lake Ontario X Yes Great Lakes Rouge River **Grand River** 20-5693503 Wetlands non-cash assistance (g) Description of Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed (f) Method of valuation (book, FMV, appraisal, other) Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (e) Amount of noncash assistance 10,000 7,000 15,000 18,000 11,313 15,000 15,000 18,293 6,314 (d) Amount of cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. grant Great Lakes Aquatic Habitat Network Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable 04-3740575 501c3 501c3 501c3 16-1663614 501c3 501c3 22-3931720 501c3 32-0182692 501c3 39-1592200 501c3 501c3 38-1674780 38-3103021 38-3251163 27-1009241 General Information on Grants and Assistance (b) EIN the selection criteria used to award the grants or assistance? Bad River Watershed Association 502 Second Street NW, Suite 300 WI 54806 48183 MI 49009 54235 MI 49808 MI 48188 (5) Yellow Dog Watershed Preserve 46036 Michigan Ave, Suite 126 NE 68301 MI 49504 WI 53202 (6) Alliance of Rouge Communities (2) Friends of the Detroit River (a) Name and address of organization (4) Lakeshore Natural Resources 1845 North Farwell Avenue 7000 N. Westnedge Avenue 101 W. Main Street, #353 2674 W. Jefferson Avenue Ψ and Fund, (3) Kalamazoo Nature Center (8) Grand Rapids Whitewater or government 303 Bensinger Street (7) Ducks Unlimited, Inc 917 South 148th Road (9) Groundwork Milwaukee Kalamazoo Township P.O. Box 62 Sturgeon Bay Department of the Treasury Internal Revenue Service Grand Rapids Name of the organization Milwaukee Ashland Trenton Big Bay Part Canton Adams

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

Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2013)

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SCHEDULE (Form 990)

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

OMB No. 1545-0047	2013

Open to Public

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. ► Attach to Form 990.

**ջ** Inspection Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Employer identification number Yes 20-5693503 Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Great Lakes Aquatic Habitat Network General Information on Grants and Assistance the selection criteria used to award the grants or assistance? Inc and Fund, Department of the Treasury Internal Revenue Service Name of the organization Part II Part

1 (a) Name and address of organization	(b) EIN	(c) IRC	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation	(a) Description of	(h) Purpose of grant
or government	,	section if applicable	grant		(book, FMV, appraisal, other)	~	or assistance
(1) Michigan Environmental Council							
602 West Ionia Street							Hydrofracking
	38-2517980	501c3	25,000				1
(2) Michigan Trout Unlimited							
							Hvdrofracking
DeWitt MI 48820-8820	23-7188803	501c3	12,000		-		1
(3) Minnesota Trout Unlimited							
P.O. Box 845							Blackhoof River
Chanhassen MN 55317	52-1766036	501c3	12,000				
(4) Sierra Club Michigan Chapter							
109 E. Grand River Avenue				•			Hvdrofracking
LANSING MI 48906	22-3935178	501c4	38,121				6
(5) West MI Environmental Action Commit							
1007 Lake Drive SE				,			Hvdrofracking
Grand Rapids MI 49506	38-2550054	501c3	36,385				n
(6) Western Reserve Land Conservancy							
3850 Chagrin River Road							Lower Big Creek
Moreland Hills OH 44022	34-1571233	501c3	15,000		10-10-10-10-10-10-10-10-10-10-10-10-10-1		n
(7)							
					210		
(8)							
					-		
(6)							
2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	ganizations listed in	the line 1 ta					<b>A</b>

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

3 Enter total number of other organizations listed in the line 1 table

Schedule ! (Form 990) (2013)

PartIII

(a) Type of grant or assistance (b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
		And the state of t		
Supplemental Information. Provide the information re	equired in Part I, line	2, Part III, column (I	o), and any other additions	al information.
mation. Provide	the information r	the information required in Part I, line	the information required in Part I, line 2, Part III, column (	the information required in Part I, line 2, Part III, column (b), and any other additional information.

Procedures for Monitoring the Use of Grant Funds Part I, Line 2 -

Aquatic Habitat Network and Fund, Inc. and the grant recipient that detail When grant funds are awarded, contracts are signed by both Great Lakes

the way the grant funds may be used, ways they may not be used and

reporting requirements. During the grant period, Freshwater Future staff

are in contact with grant recipients, providing information, assistance and

guidance. At the end of the grant period for each grant, a reporting form

is completed by the grant recipient and submitted to Great Lakes Aquatic

Habitat Network and Fund, Inc. for approval. If funds were spent as

sent outlined in the contract the file is closed and the grant recipient is

Page 2 Great Lakes Aquatic Habitat Network 20-5693503

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Schedule I (Form 990) (2013)
Part III Grants and

	(a) Type of grant or assistance (b) Number of	(b) Number of	(c) Amount of	of Amount of	The state of the s	
		recipients	cash grant	non-cash assistance	(e) Metriou or valuation (book, FMV, appraisal, other)	(t) wethou of valuation (book, (t) Description of non-cash assistance FMV, appraisal, other)
-						
2						
e						
,						
4						
2						
¢						
9						
1						
7						
Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	de the information re	quired in Part I, line	2, Part III, column (t	), and any other additiona	Il information.

a letter stating that their grant has successfully been closed. If not all Fartiv

of the funds have been expended, or if funds were expended in ways that

were not in the grant contract, the grant recipient is contacted for more

information. If funds remain unexpended, the grant recipient is given a

time period for spending the remaining funds for activities outlined in the

original grant contract and then asked to submit another report at the end

of that time period. If funds were expanded for purposes outside of the

grant contract, the grant recipient will be asked to either amend their

agreement with Freshwater Future to a resolution acceptable to both

the funds were spent on a prohibited activity, the organizations or if

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. Great Lakes Aquatic Habitat Network 20-5693503 Schedule I (Form 990) (2013)
Part III Grants and

Page 2

	(d) Amount of (e) Method of valuation (book, (f) Description of non-cash assistance FMV, appraisal, other)								Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	that nortion of the grant again
	(c) Amount of cash grant								equired in Part I, lin	hat nortion
oliai space is liceded.	(b) Number of recipients								ide the information re	
i di tili dali po daplicated il additioliai space is lleeded.	(a) Type of grant or assistance									grant recipient will be asked to refind
		-	2	9	4	5	9	7	Part IV	grant

Schedule I (Form 990) (2013)

### **SCHEDULE M** (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization Great Lakes Aquatic Habitat Network and Fund, Inc.

Employer identification number 20-5693503

P	art I Types of Property					
		(a) Check if applicable	(b)  Number of contributions or items contributed	(c)  Noncash contribution amounts reported on	(d) Method of determinin noncash contribution am	*
1	Art — Works of art			Form 990, Part VIII, line 1g	noncesh contribution and	ounts
2	Art — Historical treasures					
3	Art — Fractional interests					
4	Books and publications					
5	Clothing and household					
_	goods					
6	Cars and other vehicles					
7	Boats and planes					
8	Intellectual property					
9	Securities — Publicly traded					
10	Securities — Closely held stock					
11	Securities — Partnership, LLC,					
40	or trust interests					
12	Securities — Miscellaneous					
13	Qualified conservation					
	contribution — Historic					
	structures					
14	Qualified conservation					
45	contribution — Other					
15	Real estate — Residential					
16 17	Real estate Commercial					
17 10	Real estate — Other					
18 19	Collectibles					
20	Food inventory					
21	Drugs and medical supplies					
22	Taxidermy					
23	Historical artifacts					
24	Scientific specimens					
24 25	Archeological artifacts Other ▶( Chem Engineer )	x	19	40.477		
26				40,477	FMV	
20 27	Other ►(					
28	Other ►( )					
<u>20                                    </u>	Other ►( )  Number of Forms 8283 received by the		ion during the towns - 5			
	which the organization completed Form	organizat	the tax year for	contributions for		
	which the digarization completed Form	1 0205, Fa	it iv, Donee Acknowledge	ement [	29	<del> </del>
30a	During the year did the organization re	aaiya bu a	antella di an anconomia	and the second second		Yes No
Jua	During the year, did the organization re					
	it must hold for at least three years from	i the date				
h	used for exempt purposes for the entire		eriod?			30a X
b 24	If "Yes," describe the arrangement in P					
31	Does the organization have a gift accept contributions?					31 X
32a	Does the organization hire or use third contributions?	harries or i	elated organizations to so	nicit, process, or sell nonca:	sh	32a X
b	If "Yes," describe in Part II.			************		J20 22
33	If the organization did not report an amo	ount in colu	umn (c) for a type of prope	erty for which column (a) is	checked,	
	describe in Part II.					
or Pa	perwork Reduction Act Notice, see the Instruction	ons for Form	990			r

Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
	·····
	······································

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.

OMB No. 1545-0047

2013

Department of the Treasury Internal Revenue Service Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization

Great Lakes Aquatic Habitat Network and Fund, Inc.

Employer identification number 20-5693503

Form 990 - Organization's Mission

Our mission is to promote the protection and enhancement of water quality and water resources in the Great Lakes. Freshwater Future builds effective community-based initiatives to protect and restore the water quality of the Great Lakes basin.

Form 990, Part III, Line 4c - Third Accomplishment

Ohio to encourage communities to take steps to prepare for future

impacts of a more variable climate on their water resources. Freshwater

Future also has an assistance program to provide nonprofit bookkeeping

services to our member groups and training on how to manage and read

financial statements. This is an important piece of meeting our mission

because small nonprofits have difficulty finding bookkeepers with adequate

nonprofit experience and often need assistance in developing tracking and

recordkeeping systems.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

An independent CPA prepares the Form 990 and meets with the Executive

Director to review a draft copy of the form. The Executive Director

forwards the Form 990 and audited financial statements to the Finance

Committee. Upon the completion of their review, a recommendation for

approval is submitted to the full Board of Directors for final review and

approval. All changes addressed by the Finance Committee and/or the Board

of Directors, if any, are made to the return.