** PUBLIC DISCLOSURE COPY Return of Organization Exempt Fro		OMB No. 1545-0047									
Form <b>990</b> Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Cod		» <b>2023</b>									
Do not enter social security numbers on this form as it m		Open to Public									
Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the la		Inspection									
A For the 2023 calendar year, or tax year beginning JUL 1, 2023 and endin	ng JUN 30, 2024										
B Check if applicable: C Name of organization	D Employer identific	ation number									
Address Freshwater Society											
Name Doing business as 23-7007115											
Initial Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number											
Final 2550 University Ave W 212	2N 651-313-										
termin- ated City or town, state or province, country, and ZIP or foreign postal code	<b>G</b> Gross receipts \$	1,908,506.									
Amended St Paul, MN 55114	H(a) Is this a group re										
IF Name and address of principal officer: MICHEILE SCOCKNESS	for subordinates										
	H(b) Are all subordinates in										
I Tax-exempt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or		list. See instructions									
J Website:www.freshwater.orgK Form of organization:X CorporationTrustAssociationOther	H(c) Group exemption										
Part I Summary		State of legal domicile; <b>FIIN</b>									
1 Briefly describe the organization's mission or most significant activities: Educati	ng and ingnirir	ng neonle									
to value, conserve, and protect freshwater		ig peopie									
<ul> <li>to value, conserve, and protect freshwater i</li> <li>Check this box if the organization discontinued its operations or disposed or</li> <li>Number of voting members of the governing body (Part VI, line 1a)</li> <li>Number of independent voting members of the governing body (Part VI, line 1b)</li> </ul>		ots									
3 Number of voting members of the governing body (Part VI, line 1a)		15									
		15									
s Total number of individuals employed in calendar year 2023 (Part V, line 2a)		18									
<ul> <li>5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)</li> <li>6 Total number of volunteers (estimate if necessary)</li> <li>7 a Total unrelated business revenue from Part VIII, column (C), line 12</li> </ul>		604									
7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.									
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11		0.									
	Prior Year	Current Year									
8 Contributions and grants (Part VIII, line 1h)		814,657.									
9 Program service revenue (Part VIII, line 2g)		36,300.									
<ul> <li>9 Program service revenue (Part VIII, line 2g)</li> <li>10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)</li> </ul>		216,999.									
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		111,893.									
12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,179,849.									
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)		749,633.									
14 Benefits paid to or for members (Part IX, column (A), line 4)	. 0.	0.									
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	806,828.	941,322.									
16a Professional fundraising fees (Part IX, column (A), line 11e)	. 0.	0.									
<ul> <li>b Total fundraising expenses (Part IX, column (A), line 11e)</li> <li>b Total fundraising expenses (Part IX, column (D), line 25)</li> <li>117, 122.</li> </ul>		112 026									
	4 - 4 4 - 4 4	442,936.									
<ul> <li>18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)</li> <li>12 Demonstration 2. Interactions 12 from the 12.</li> </ul>		<u>2,133,891.</u> -954,042.									
19 Revenue less expenses. Subtract line 18 from line 12	Beginning of Current Year	End of Year									
of grade       See and the set of th	6 004 201	6,402,127.									
향품 20 Total assets (Part X, line 16) 역 21 Total liabilities (Part X, line 26)	252 210	192,252.									
21 I otal liabilities (Part X, line 26)		6,209,875.									
Part II Signature Block	. 0,,01,002.	0,200,0,0									
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and s	statements, and to the best of my	knowledge and belief, it is									

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge.

		-
Sign	Signature of officer	Date
	Michelle Stockness, Executive Director	
	Type or print name and title	
	Print/Type preparer's name Preparer's signature Date	Check PTIN
Paid	Steven D. Anseth, CPA Steven D. Anseth, CP05/14,	/25 self-employed P00552219
Preparer	Firm's name Abdo LLP	Firm's EIN 41-1397419
Use Only	Firm's address 5201 Eden Ave, Ste 250	
	Edina, MN 55436	Phone no. 952.835.9090
May the II	RS discuss this return with the preparer shown above? See instructions	X Yes No
LHA For	Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23	Form <b>990</b> (2023)

	rt III Statement of Program S	-	X
-		response or note to any line in this Part III	X
1	Briefly describe the organization's mis		
		ering people to value and p	reserve our freshwater
	resources.		
2		gnificant program services during the year which were	
	If "Yes," describe these new services		
3		g, or make significant changes in how it conducts, any	program services?
3	If "Yes," describe these changes on S		
4	· · ·	ervice accomplishments for each of its three largest pr	rearran convision, as measured by expenses
4		zations are required to report the amount of grants and	
	revenue, if any, for each program serv		
4a	(Code: ) (Expenses \$ 1	., 668, 455. including grants of \$ 749	9.633. (Revenue \$ 148.193.
<del>4</del> a	Education and Engag	ement:	<b>5</b> ,055.) (Revenues <u>140,155.</u> )
		mmunity outreach initiative	s including the
		t of Health's State Drinking	
		rogram, the Lake of the Isl	
		ucation work with teachers,	
		se to partner on land conse	
		r guide continued to inspire	
		fforts to streamline product	
		• Through events, presentat	
		tewardship awareness and wo	
		onal recognition and local	
		ng strategic plans, hosting	
4h		including grants of \$	
	,		, , , ,
4c	(Code: ) (Expenses \$	including grants of \$	) (Revenue \$
4d	Other program services (Describe on S		
	(Expenses \$	including grants of \$ (Re	evenue \$
4d 4e			· · · · · · · · · · · · · · · · · · ·
4e	(Expenses \$	including grants of \$ (Re	Form <b>990</b> (202:

Form 990 (2023) Freshwater Society
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	L
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	L
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	<u> </u>
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u>x</u>
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		<u>x</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			<u></u>
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	Х	<u> </u>
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		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	Х	┝──
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	77	<u> </u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	├──
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		<u> </u>
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes, " complete		v	
	Schedule D, Parts XI and XII	12a	Х	<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	101		v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
α	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			1
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	1/1		x
15	or more? <i>If</i> "Yes," <i>complete Schedule F, Parts I and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		
15		15		x
16	foreign organization? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
.,	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			<u> </u>
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"			<u> </u>
		19		x
20a	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		<u> </u>
- •	domestic government on Part IX, column (A), line 1? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21	х	
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Form 990 (2023) Freshwater Society
Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		<u> </u>
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 through 24d and complete			37
_	Schedule K. If "No," go to line 25a	24a		<u> </u>
	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 to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	05-		х
h	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
a	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? <i>If</i> "Yes." <i>complete</i>			
		25b		х
26	Schedule L, Part I	250		
20	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		х
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		_X_
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		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
•	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		v	
Par	Note: All Form 990 filers are required to complete Schedule O           t V         Statements Regarding Other IRS Filings and Tax Compliance	38	Х	<u> </u>
1 01				
	Check if Schedule O contains a response or note to any line in this Part V		V	N-
4-	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		Yes	No
-	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable1a1_lEnter the number of Forms W-2G included on line 1a. Enter -0- if not applicable1b0			
b c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
U	(gambling) winnings to prize winners?	1c	х	
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				. /

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Form	990 (2023) Freshwater Society	23-7007	115	Pa	age <b>5</b>					
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)				0					
				Yes	No					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,									
	filed for the calendar year ending with or within the year covered by this return	2a 18								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	าร?	2b	Х						
3a	a Did the organization have unrelated business gross income of \$1,000 or more during the year?									
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b							
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthority over, a								
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		<u>X</u>					
b	If "Yes," enter the name of the foreign country									
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	counts (FBAR).								
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X					
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact		5b		X					
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e organization solicit								
	any contributions that were not tax deductible as charitable contributions?		<u>6a</u>		X					
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	ons or gifts								
	were not tax deductible?		6b							
7	Organizations that may receive deductible contributions under section 170(c).									
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor?	7a		<u>X</u>					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	s required								
	to file Form 8282?		7c		X					
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d								
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontract?	7e		<u>X</u>					
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?	7f		X					
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 8899 as required?	7g							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion file a Form 1098-C?	7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the								
	sponsoring organization have excess business holdings at any time during the year?		8							
	Sponsoring organizations maintaining donor advised funds.									
			<u>9a</u>							
b			9b							
10	Section 501(c)(7) organizations. Enter:									
	Initiation fees and capital contributions included on Part VIII, line 12	10a	-							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	-							
	Section 501(c)(12) organizations. Enter:	L., I								
	Gross income from members or shareholders	11a	-							
b	Gross income from other sources. (Do not net amounts due or paid to other sources against									
	amounts due or received from them.)	11b	1							
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	-							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		40-							
а	Is the organization licensed to issue qualified health plans in more than one state?		<u>13a</u>							
Ŀ	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.									
D	Enter the amount of reserves the organization is required to maintain by the states in which the	404								
_	organization is licensed to issue qualified health plans	13b	-							
	Enter the amount of reserves on hand	13c	44-		x					
			14a		<u> </u>					
. –	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner		45		х					
	excess parachute payment(s) during the year?		15							
16	If "Yes," see the instructions and file Form 4720, Schedule N.	incomo?	40		х					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment		16		<u>л</u>					
17	If "Yes," complete Form 4720, Schedule O.	tivition								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act that would result in the imposition of an avoire tax under section 4951, 4952 or 49532		17							
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17							
220005	If "Yes," complete Form 6069.		Form	990	(2022)					
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	<b>Int VI</b> Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.		SSPOL	.30
				X
201	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>		Δ
Jet	A doverning body and Management		V.	
4.	Enter the number of voting members of the governing body at the end of the tax year 15	;	Yes	No
Ta		4		
	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 on Schedule 0. Enter the number of voting members included on line 1a, above, who are independent 1b 15			
b		4		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			37
_	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, trustees, or key employees to a management company or other person?	3		X X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	<b>5</b> <i>i i i i</i>			
	more members of the governing body?	7a		<u>x</u>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	с с ,	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
_	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		X
Sec	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on 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	12a	Х	
b	···· ··· · · · · · · · · · · · · · · ·	12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
	ction C. Disclosure	<u>,</u>		
Sec	List the states with which a copy of this Form 990 is required to be filedMN			
		s only)	availa	hle
17	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024 A if applicable) 990 and 990-T (section 501(c)(3))		avana	
17	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3): for public inspection. Indicate how you made these available. Check all that apply.	e e,)		
Sec 17 18	for public inspection. Indicate how you made these available. Check all that apply.	c c,)		
17 18	for public inspection. Indicate how you made these available. Check all that apply.         Own website       X         Another's website       X         Upon request       Other (explain on Schedule O)		cial	
17 18	for public inspection. Indicate how you made these available. Check all that apply.         Own website       X         Another's website       X         Upon request       Other (explain on Schedule O)         Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and		cial	
17 18 19	for public inspection. Indicate how you made these available. Check all that apply.          Own website       X       Another's website       X       Upon request       Other (explain on Schedule O)         Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and statements available to the public during the tax year.		cial	
17 18	for public inspection. Indicate how you made these available. Check all that apply.          Own website       X       Another's website       X       Upon request       Other (explain on Schedule O)         Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and statements available to the public during the tax year.         State the name, address, and telephone number of the person who possesses the organization's books and records		cial	
17 18 19	for public inspection. Indicate how you made these available. Check all that apply. Own website X Another's website X Upon request Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records The Organization - 651-313-5810		cial	
17 18 19 20	for public inspection. Indicate how you made these available. Check all that apply.          Own website       X       Another's website       X       Upon request       Other (explain on Schedule O)         Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and statements available to the public during the tax year.         State the name, address, and telephone number of the person who possesses the organization's books and records	d finano	cial	(200

Form 990 (2023)	Freshwater Society	23-7007115	Page 7								
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated											
Employe	Employees, and Independent Contractors										
Check if Se	chedule O contains a response or note to any line in this Part VII										
Section A. Officers,	Directors, Trustees, Key Employees, and Highest Compensated Employe	ees									
1a Complete this table	e for all persons required to be listed. Report compensation for the calendar y	vear ending with or within the organization's	s tax year.								

• List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	Position (do not check more than one		ne	Reportable	Reportable	Estimated			
	hours per	box	, unles	ss pei	rson i	s both	n an	compensation	compensation	amount of
	week		cer an	id a d	Irecto	r/trus	tee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the organization
	related organizations	rustee	trust		ee	npens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	and related
	below	dual t	utiona		nploy	st cor	ar	1000 1120/		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			erganizatione
(1) Carrie Jennings	40.00		_				-			
Research and Policy Director		1				X		106,408.	Ο.	11,905.
(2) Don Davies	20.00									
Former Finance Director		1		х				85,289.	Ο.	3,526.
(3) Michelle Stockness	40.00									
Executive Director		1		х				77,097.	Ο.	5,405.
(4) Andrea Todd	20.00									
Finance Director		1		х				7,823.	Ο.	0.
(5) Josephine Marcotty	1.00									
Chair		X		Х				0.	Ο.	0.
(6) Dave Leuthe	1.00									
Vice Chair		Х		х				0.	Ο.	0.
(7) Wade Campbell	1.00									
Treasurer		Х		х				0.	Ο.	0.
(8) Renee Willette	1.00									
Secretary		X		Х				0.	Ο.	0.
(9) Ryan Godrey	1.00									
Outgoing Chair		X		Х				0.	Ο.	0.
(10) Risikat Adesaogun	1.00									
Director		X						0.	Ο.	0.
(11) Ryan Hurt	1.00									
Director		X						0.	Ο.	0.
(12) Tyler Johnson	1.00									
Director		Х						0.	0.	0.
(13) Jeremy Lenz	1.00									
Director		X						0.	Ο.	0.
(14) Ali Ling	1.00									
Director		X						0.	Ο.	0.
(15) Corey Lohmiller	1.00									
Director		X						0.	Ο.	0.
(16) Jill Lucas	1.00									
Director		Х						0.	0.	0.
(17) Laura Pagano	1.00									
Director		Х						0.	0.	0.
332007 12-21-23										Form <b>990</b> (2023)

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Form 990 (2023)

#### 11330514 759492 42495

2023.05070 FRESHWATER SOCIETY

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	ter Socie	ety	,						23-700	7115 Page <b>8</b>
Part VII Section A. Officers, Directors, Tr	ustees, Key Emp	ploy	ees,	anc	l Hig	ghes	t C	ompensated Employee	s (continued)	
(A) Name and title				ss per	ition more rson i:	than c s both or/trust	n an	<b>(D)</b> Reportable compensation from	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key em ployee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) Doug Thomas	1.00								_	
Director	1.00	Х						0.	0.	. 0.
(19) Aaron Tinjum Director	1.00	x						0.	0 .	0.
1b Subtotal								276,617.	0.	20,836.
c Total from continuation sheets to Part d Total (add lines 1b and 1c)	VII, Section A							0.276,617.	0	
2 Total number of individuals (including but compensation from the organization	not limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$100,	000 of reportable	1
<b>3</b> Did the organization list any <b>former</b> offic			•		-		-		•	Yes No
<ul> <li>line 1a? If "Yes," complete Schedule J fo.</li> <li>For any individual listed on line 1a, is the and related organizations greater than \$1</li> </ul>	sum of reportabl	e co	mpe	ensa	tion	and	oth	er compensation from t	he organization	3 X 4 X
<ul> <li>5 Did any person listed on line 1a receive or rendered to the organization? <i>If</i> "Yes," co</li> </ul>	r accrue compen	Isati	on fr	om	any	unre	elate	ed organization or individ	dual for services	5 X
Section B. Independent Contractors										
1 Complete this table for your five highest the organization. Report compensation for								the organization's tax y		
(A) Name and busine	ss address	NC	ONE	3				(B) Description of s	ervices	(C) Compensation
2 Total number of independent contractors \$100,000 of compensation from the orga		ot lin	nitec	d to t	thos C		ted	above) who received me	ore than	
										Form <b>990</b> (2023)

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Form	990	) (2	2023) Fre	shwate	er So	ciety			23-7007	115 Page 9
Pa	rt V		_							
			Check if Schedule O	contains a r	esponse	or note to any lin	e in this Part VIII (A)	(B)	(C)	(D)
							Total revenue	Related or exempt	Unrelated	Revenue excluded
								function revenue	business revenue	from tax under sections 512 - 514
ស ស	1	а	Federated campaigns		1a					
ran					1b	27,828.				
¶ Bug		с	Fundraising events		1c					
Sifts ar /		d	Related organizations		1d					
ini, (			Government grants (contr		1e	100.				
er S		f	All other contributions, gifts,							
Contributions, Gifts, Grants and Other Similar Amounts			similar amounts not included		1f	786,729.				
nd		-	Noncash contributions included in	-	1g  \$		814,657.			
0 a		n	Total. Add lines 1a-1f			Business Code	014,057.			
	2	а	Water Conserv	ation	Ed.	900099	36,300.	36,300.		
vice	_	b				500055				
Ser		c								
am		d								
Program Service Revenue		е								
Ϋ́			All other program service							
		g	Total. Add lines 2a-2f				36,300.			
	3		Investment income (includ	-			06 701			06 701
	4					raaada	96,781.			96,781.
	4 5		Income from investment of Royalties	-						
	5		noyalles	(i)	Real	(ii) Personal				
	6	а	Gross rents	6a						
		b	Less: rental expenses	6b						
		с	Rental income or (loss)	6c						
		d	Net rental income or (loss)							
	7	а	Gross amount from sales of		curities	(ii) Other				
			assets other than inventory	7a 739	,352.					
			Less: cost or other basis	- 610	121					
evenue			and sales expenses	<u>7</u> 619 7с120	<u>,134.</u> 218					
			Gain or (loss) Net gain or (loss)				120,218.			120,218.
Other R			Gross income from fundraisi				12072101			120,2100
đ	Ū	-	including \$							
			contributions reported on							
			Part IV, line 18		8a					
			Less: direct expenses							
			Net income or (loss) from			·····				
	9	а	Gross income from gamin							
		<b>h</b>	Part IV, line 19							
			Less: direct expenses			1				
			Gross sales of inventory, I			T				
			and allowances		10a	221,416.				
		b	Less: cost of goods sold		10	109,523.				
			Net income or (loss) from				111,893.	111,893.		
S						Business Code				
eou	11	а								
scellaneo Revenue		b								
Miscellaneous <u>Revenue</u>		с 4								
Ϊ			All other revenue							
	12	e	Total revenue. See instruction				1,179,849.	148,193.	0.	216,999.
332009		21-2								Form <b>990</b> (2023)

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Form 990 (2023) Freshwater Society
Part IX Statement of Functional Expenses

5	Section 501(c)(3) and 501(c)(4) organizations must comp	olete all columns. All othe	er organizations must cor	nplete column (A).
Check if Schedule O contains a response or note to any line in this Part IX				
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses
	1 Grants and other assistance to domestic organizations			

	Check if Schedule O contains a response				
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21 🛛 🗌	544,639.	544,639.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	204,994.	204,994.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
	Benefits paid to or for members				
	Compensation of current officers, directors,				
	trustees, and key employees	292,899.	209,323.	58,999.	24,577.
	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	538,200.	383,323.	109,340.	45,537.
	Pension plan accruals and contributions (include		40.00-	c	4 - 6 6
	section 401(k) and 403(b) employer contributions)	20,816.	12,985.	6,239.	<u> </u>
	Other employee benefits	30,616.	24,392.	4,099.	2,125.
	Payroll taxes	58,791.	42,003.	11,919.	4,869.
	Fees for services (nonemployees):				
	Management	1 440		1 440	
	Legal	1,440.		1,440.	
	Accounting	20,500.		20,500.	
	Lobbying				
	Professional fundraising services. See Part IV, line 17	50 054		50.074	
	Investment management fees	52,074.		52,074.	
-	Other. (If line 11g amount exceeds 10% of line 25,		<b>F</b> O 000	18 601	
	column (A), amount, list line 11g expenses on Sch 0.)	95,727.	70,092.	17,681.	<u>7,954</u> . 11.
	Advertising and promotion	3,968.	3,320.	637.	
	Office expenses	38,805.	33,941.	3,140.	1,724.
	Information technology	7,506.	3,425.	3,439.	642.
	Royalties	101 000	56 226	24,400	11 101
	Occupancy	101,927.	56,336.	34,490.	11,101.
	Travel	29,994.	28,852.	917.	225.
	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials $\dots$	16 602	11 500	2 2 2 2	1 000
	Conferences, conventions, and meetings	16,673.	11,582.	3,268.	1,823.
	Interest				
	Payments to affiliates	0 221	1 (00	2 75 6	0.0.5
	Depreciation, depletion, and amortization	8,331.	4,690.	2,756.	885.
	Insurance	18,804.	10,587.	6,220.	1,997.
	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), product line 24e expenses on Cohecida (A).				
	amount, list line 24e expenses on Schedule 0.)	16,279.	2,770.	7,084.	6,425.
	Fees and miscellaneous	12,994.	7,880.	2,580.	2,534.
	Memberships	9,431.	5,521.	1,314.	2,596.
	Staff Training	8,305.	7,800.		505
	All other expenses	178.	,,	178.	
	Total functional expenses. Add lines 1 through 24e	2,133,891.	1,668,455.	348,314.	117,122.
	Joint costs. Complete this line only if the organization	2,133,0710	<u>-,,,,,,,</u> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	540,5140	<u> </u>
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here fifollowing SOP 98-2 (ASC 958-720)				
	IIIUWIIIY SUF 90-2 (ASU 938-120)				Form <b>990</b> (2023

## Freshwater Society

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

Form 990 (2023)

Part X Balance Sheet

		Check in Schedule O contains a response of hote		<b>(A)</b> Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		5,294.	1	2,197.
	2	Savings and temporary cash investments	·····	221,644.	2	47,333.
	3	Pledges and grants receivable, net	1,259,793.	3	1,058,167.	
Assets	4	Accounts receivable, net		274.	4	7,924.
	5	Loans and other receivables from any current or				.,
		trustee, key employee, creator or founder, substa				
		controlled entity or family member of any of thes			5	
	6	Loans and other receivables from other disgualif				
	-	under section 4958(f)(1)), and persons described			6	
	7	Notes and loans receivable, net	E		7	
	8	Inventories for sale or use		30,160.	8	31,417.
	9	Prepaid expenses and deferred charges		27,392.	9	16,851.
	10a	Land, buildings, and equipment: cost or other				
		basis. Complete Part VI of Schedule D	10a 49,587.			
	b	Less: accumulated depreciation		17,662.	10c	9,331.
	11	Investments - publicly traded securities		5,246,392.	11	5,104,820.
	12	Investments - other securities. See Part IV, line 1	1		12	
	13	Investments - program-related. See Part IV, line 1	1		13	
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11	175,670.	15	124,087.	
	16	Total assets. Add lines 1 through 15 (must equa	al line 33)	6,984,281.	16	6,402,127.
	17	Accounts payable and accrued expenses	76,121.	17	69,619.	
	18	Grants payable		18		
	19	Deferred revenue		19		
	20	Tax-exempt bond liabilities		20		
	21	Escrow or custodial account liability. Complete F		21		
es	22	Loans and other payables to any current or form				
Liabilities		trustee, key employee, creator or founder, substa				
iab.		controlled entity or family member of any of thes			22	
-	23	Secured mortgages and notes payable to unrela			23	
	24	Unsecured notes and loans payable to unrelated	Г		24	
	25	Other liabilities (including federal income tax, pay				
		parties, and other liabilities not included on lines	177,098.	05	122,633.	
	26	of Schedule D Total liabilities. Add lines 17 through 25		253,219.	25 26	192,252.
	20	Organizations that follow FASB ASC 958, chee		233,213.	20	172,252.
Se		and complete lines 27, 28, 32, and 33.				
nce	27	Net assets without donor restrictions		4,986,338.	27	4,771,896.
3ala	28	Net assets with donor restrictions		1,744,724.	28	1,437,979.
Βpu	20	Organizations that do not follow FASB ASC 95		_ / / / /	20	
Fur		and complete lines 29 through 33.				
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds			29	
sets	30	Paid-in or capital surplus, or land, building, or eq			30	
Ass	31	Retained earnings, endowment, accumulated inc			31	
let	32	Total net assets or fund balances		6,731,062.	32	6,209,875.
~	33	Total liabilities and net assets/fund balances		6,984,281.	33	6,402,127.

Form 990 (2023)

332011 12-21-23

Form	990 (2023) Freshwater Society	23-	7007115	Pa	<sub>ge</sub> 12	
Pa	rt XI 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)	1	1,179			
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,133			
3	Revenue less expenses. Subtract line 2 from line 1	3	-954			
4						
5	Net unrealized gains (losses) on investments	5	432	2,8	55.	
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	6,209	9,8	75.	
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII				X	
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.				
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	Х		
	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					
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		За		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits	<u></u>	3b			

Form **990** (2023)

Department of the Treasury Internal Revenue Service

(Form 990)

## **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.

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

OMB No. 1545-0047
2023

**Open to Public** 

	Inspecti	ion
Employer	identification	number

#### Name of the organization

Name	Freshwater Society 23-7007115								
Part	Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.						5 /00/115		
		zation is not a private found							
1		A church, convention of ch					1)(A)(i).		
2		A school described in secti							
3		A hospital or a cooperative				(b)(1)(A)(ii	ii).		
4		A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,							
		city, and state:							
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in							
		section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	′0(b)(1)(A)	(v).		
7 🖸	X	An organization that norma	lly receives a substar	ntial part of its support fr	om a gove	ernmental	unit or from th	ne general p	public described in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)						
8		A community trust describe	ed in section 170(b)(	(1)(A)(vi). (Complete Par	t II.)				
9		An agricultural research org	anization described	in section 170(b)(1)(A)(	ix) operate	ed in conju	unction with a	land-grant	college
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or
		university:							
10		An organization that norma	Ily receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, and	d gross receipts from
		activities related to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of it	s support f	rom gross investment
		income and unrelated busir	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	fter June 30, 1975.
_	_	See section 509(a)(2). (Cor	mplete Part III.)						
11		An organization organized a	•		•				
12 🗌		An organization organized a	-	-	-			•	
		more publicly supported or	-						Check the box on
		lines 12a through 12d that	• •					-	
а		<b>Type I.</b> A supporting orga		-	•	-			
		the supported organization			majority o	of the direct	ctors or truste	es of the su	ipporting
		organization. You must o	-						
b		<b>Type II.</b> A supporting org	-				-		-
		control or management o			ame perso	ns that co	ntroi or mana	ge the supp	orted
•		organization(s). You mus			in connoct	ion with	and functional	ly integrate	d with
С		J Type III functionally inte						ly integrate	a with,
d		its supported organization <b>Type III non-functionally</b>		-				ted organia	ration(s)
u	L	that is not functionally int						-	
		requirement (see instructi			•		-	anallenin	61633
е		Check this box if the orga						II. Type III	
•		functionally integrated, or					1)po 1, 1)po	n, rype n	
fE	Ente	r the number of supported c							
	Enter the number of supported organizations Provide the following information about the supported organization(s).								
	(i	) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi		(v) Amount of	-	(vi) Amount of other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)
Total							1		1

#### Schedule A (Form 990) 2023

Freshwater Society

23-7007115 Page 2	2	3-	7(	0 (	7:	11	5	Page	2
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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	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not include any "unusual grants.")	709,130.	876,223.	794,410.	653,227.	814,657.	3847647.
2	Tax revenues levied for the organ-						
	ization'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	709,130.	876,223.	794,410.	653,227.	814,657.	3847647.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						1036464.
	Public support. Subtract line 5 from line 4.						2811183.
Sec	ction B. Total Support	1	<b>F</b>		[		
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 4	709,130.	876,223.	794,410.	653,227.	814,657.	3847647.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,		- 40			0.6 0.01	104 000
	and income from similar sources $\dots$	795.	549.	508.	96,227.	96,781.	194,860.
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 VI.)		130,000.				130,000.
	Total support. Add lines 7 through 10						4172507.
	Gross receipts from related activities,		,			12	915,786.
13	First 5 years. If the Form 990 is for the						
800	organization, check this box and stor ction C. Computation of Publi						
	•	••	-				67.37 %
	Public support percentage for 2023 (I					14	
	Public support percentage from 2022					15	
108	33 1/3% support test - 2023. If the other here. The exception qualifier						V
h	stop here. The organization qualifies		-			or more obsold this	
U	33 1/3% support test - 2022. If the c			1			
170	and <b>stop here.</b> The organization qual					nd line 14 is 1004	
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact meets the facts-and-circumstances te			-	achien	-	
Ь	10% -facts-and-circumstances test	•	•	,	•	7a and line 15 is 1	
0	more, and if the organization meets the	-					
	organization meets the facts-and-circu						
18	<b>Private foundation.</b> If the organization		•		• •		
10				, 100, 170, 01 170			(Form 990) 2023

332022 12-21-23

	Schedule A	Form	990	) 2023
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 Schedule A (Form 990) 2023
 Freshwater Society

 Part III
 Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	3 (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 per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> Gross receipts from activities that						
are not an unrelated trade or bus- iness under section 513						
4 Tax revenues levied for the organ-						
ization's benefit and either paid to or expended on its behalf						
<b>5</b> The value of services or facilities						
furnished by a governmental unit to						
the organization without charge						
6 Total. Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and						
3 received from disqualified persons						
<b>b</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						
<b>c</b> Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	3 (f) Total
9 Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<ul> <li>11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on</li> </ul>						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
<b>13</b> Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) orgar	nization,
Section C. Computation of Public	ic Support Per	centage				
15 Public support percentage for 2023 (	ine 8, column (f), d	livided by line 13,	column (f))		15	%
16 Public support percentage from 2022					16	%
Section D. Computation of Inves	stment Income	e Percentage				
17 Investment income percentage for 20	<b>)23</b> (line 10c, colur	mn (f), divided by I	ine 13, column (f))		17	%
<b>18</b> Investment income percentage from	2022 Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests - 2023. If the	organization did r	not check the box	on line 14, and lin	e 15 is more than :	33 1/3%, and I	ine 17 is not
more than 33 1/3%, check this box a	nd <b>stop here.</b> The	organization qual	ifies as a publicly	supported organiza	ation	
b 33 1/3% support tests - 2022. If the	organization did r	not check a box or	n line 14 or line 19	a, and line 16 is m	ore than 33 1/	3%, and
line 18 is not more than 33 1/3%, che	ck this box and <b>st</b>	<b>op here.</b> The orga	anization qualifies	as a publicly supp	orted organiza	ition
20 Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t	this box and see in	structions	
332023 12-21-23					Sched	dule A (Form 990) 2023
		16				

2023.05070 FRESHWATER SOCIETY

Freshwater Society

Yes No

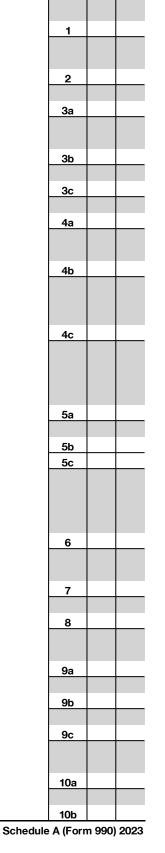
#### Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? // "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- **5a** Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes." answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to 6 anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in Part VI.
- c Did a disgualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes." provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to determine whether the organization had excess business holdings.)

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Schedule A	(Form 990)	2023	Freshwater	Society
Part IV	Suppor	ting Org	ganizations (continued)	

No

# 11 Has the organization accepted a gift or contribution from any of the following persons? Yes No a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? 11a 11a b A family member of a person described on line 11a above? 11b 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide 11c gettail in Part VI. Section B. Type I Supporting Organizations Yes No

1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	
2	Did the organization operate for the benefit of any supported organization other than the supported		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		
	supervised, or controlled the supporting organization.	2	
Sec	tion C. Type II Supporting Organizations		

			Yes	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Se	ction D. All Type III Supporting Organizations			

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		2		

#### supported organizations played in this regard. Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that	the organization used to sat	isfy the Integral Part Tes	t during the vear	(see instructions).
	Check the box hext to the method that	the organization used to sat	isiy the medra Part Tes	l during the year	(see man uc

- a \_\_\_\_ The organization satisfied the Activities Test. Complete line 2 below.
- **b** \_\_\_\_ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

с		The organization supported a governmental entity.	Describe in Part VI how you supported a go	overnmental entity (see instruction <u>s).</u>
---	--	---	--	--

18

- 2 Activities Test. Answer lines 2a and 2b below.
- **a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" *provide details in* **Part VI.** 

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.* 332025 12-21-23

3b | | Schedule A (Form 990) 2023

2a

2b

3a

11330514 759492 42495

2023.05070 FRESHWATER SOCIETY

Yes No

Pa	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations				
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( <i>explain in</i> <b>Part VI</b> ). See instructions.				
	All other Type III non-functionally integrated supporting organizations must	complet	e Sections A through E.		
Sect	Section A - Adjusted Net Income (A) Prior Year (B) Current Year (optional)				
1	Net short-term capital gain	1			
2	Recoveries of prior-year distributions	2			
3	Other gross income (see instructions)	3			
4	Add lines 1 through 3.	4			
5	Depreciation and depletion	5			
6	Portion of operating expenses paid or incurred for production or				
	collection of gross income or for management, conservation, or				
	maintenance of property held for production of income (see instructions)	6			
7	Other expenses (see instructions)	7			
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)	
1	Aggregate fair market value of all non-exempt-use assets (see				
	instructions for short tax year or assets held for part of year):				
а	Average monthly value of securities	1a			
b	Average monthly cash balances	1b			
с	Fair market value of other non-exempt-use assets	1c			
d	Total (add lines 1a, 1b, and 1c)	1d			
	Discount claimed for blockage or other factors				
	(explain in detail in Part VI):				
2	Acquisition indebtedness applicable to non-exempt-use assets	2			
3	Subtract line 2 from line 1d.	3			
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,				
	see instructions).	4			
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6	Multiply line 5 by 0.035.	6			
7	Recoveries of prior-year distributions	7			
8	Minimum Asset Amount (add line 7 to line 6)	8			
Sect	ion C - Distributable Amount			Current Year	
1	Adjusted net income for prior year (from Section A, line 8, column A)	1			
2	Enter 0.85 of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3			
4	Enter greater of line 2 or line 3.	4			
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
_	emergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-functional	y integra	ted Type III supporting organ	nization (see	
	instructions).			`	

Schedule A (Form 990) 2023

332026 12-21-23

Schedule A (Form 990) 2023

Freshwater Society

Schedule A (Form 990) 2023 Freshwater Society

Par	t V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	inizations (continue	ed)	
Secti	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	S	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pri	ovide details in Part VI)		5	
6	Other distributions ( <i>describe in</i> <b>Part VI</b> ). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Secti	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2023	s	Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
c	From 2020				
d	From 2021				
e	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
<u>i</u>	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2019				
b	Excess from 2020				
C	Excess from 2021				
d	Excess from 2022				
е	Excess from 2023				

Schedule A (Form 990) 2023

Schedule A (Form 990) 2023
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Freshwater Society

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Schedule A, Part II, Line 10, Explanation for Other Income:

#### Tax Refunds

Lease Termination Fee

2020 Amount: \$ 130,000.

11330514 759492 42495

\*\* PUBLIC DISCLOSURE COPY \*\*

## **Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

# 2023

Employer identification number

23-7007115

Schedule	В
(Form 990)	

Department of the Treasury Internal Revenue Service

Name of the organization

	Freshwater	Society
Organization type (che	eck one):	

Filers of:	Section:
Form 990 or 990-EZ	$\fbox{X}$ 501(c)( 3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### **General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### **Special Rules**

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set is the set in the set is the set in the set is the set is the set in the set is the set in the set is t

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2023)

#### Schedule B (Form 990) (2023)

Freshwater Society

Name of organization

Employer identification number

(d)

(d)

(d)

(d)

(d)

X

X

X

23-7007115

#### Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution 1 Person Payroll 501,800. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 2 Person Payroll 62,333. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 3 Person Payroll 88,350. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (b) (c) (a) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 Person Payroll Noncash \$ (Complete Part II for

noncash contributions.) Schedule B (Form 990) (2023)

(d)

323452 12-26-23

24 2023.05070 FRESHWATER SOCIETY

11330514 759492 42495

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
  		\$	
(a) No.	(b)	(c)	(d)

Description of noncash property given

(b)

Description of noncash property given

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

Freshwater Society

Name of organization

Part II

Employer identification number

Page 3

23-7007115

323453 12-26-23

from

Part I

(a)

No.

from

Part I

25

\$

\$

Schedule B (Form 990) (2023)

(d)

**Date received** 

Date received

FMV (or estimate)

(See instructions.)

(c)

FMV (or estimate)

(See instructions.)

11330514 759492 42495

Name of o	organization			Employer identification number
resh	water Society			23-7007115
Part III	Exclusively religious, charitable, etc., contribut from any one contributor. Complete columns (a completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	) through (e) and the following line entropy charitable, etc., contributions of \$1,000 or I	v. For organizations	nat total more than \$1,000 for the year
(a) No.				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of gif	 t	
	Transferee's name, address, a	and ZIP + 4	Relationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of gif		
	Transferee's name, address, a			Insferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
		(e) Transfer of gif	 t	
·	Transferee's name, address, a	and ZIP + 4	Relationship of tra	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
	Transferee's name, address, a	(e) Transfer of gif		nsferor to transferee
323454 12-26	6-23	26		Schedule B (Form 990) (202

26 2023.05070 FRESHWATER SOCIETY 42495\_1

SCHEDULE	С
(Form 990)	

Department of the Treasury

Internal Revenue Service

## Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes" on 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.

• 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" on 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" on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then:

Nan	ne of organiza	tion				Emplo	oyer identification ı	number
		Freshwa	ter Society				23-700711	5
Pa	art I-A C	omplete if the org	anization is exempt under	section 501(c) o	r is a section 52	27 org	ganization.	
2	Political carr	paign activity expendit	zation's direct and indirect political sures					
Pa	art I-B C	omplete if the org	panization is exempt under	section 501(c)(3)	-			
2 3 4a	Enter the am If the organiz Was a correc	nount of any excise tax zation incurred a sectio	incurred by the organization under incurred by organization managers n 4955 tax, did it file Form 4720 for	under section 4955 r this year?		\$	Yes	No No
			panization is exempt under	section 501(c), e	except section 5	501(c)	(3).	
1	Enter the am	ount directly expended	d by the filing organization for section	on 527 exempt functio	on activities	\$		
2			ization's funds contributed to othe	-		\$		
3	Total exemp	t function expenditures	s. Add lines 1 and 2. Enter here and	I on Form 1120-POL,				
4	Did the filing	organization file Form	1120-POL for this year?				Yes	No
5	made payme	ents. For each organiza s received that were pr	mployer identification number (EIN) tion listed, enter the amount paid fi omptly and directly delivered to a s additional space is needed, provide	rom the filing organiza eparate political orgar	tion's funds. Also en nization, such as a se	iter the	amount of political	
	(a	) Name	(b) Address	(c) EIN	(d) Amount paid f filing organizatio funds. If none, ente	n's	(e) Amount of po contributions recei promptly and di delivered to a sep political organiz If none, enter	ved and rectly parate ation.

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

Schedule C (Form 990) 2023

OMB No. 1545-0047

Open to Public

Inspection

23

LHA 332041 11-06-23

Schedule C (Form 990) 2023 Fre	shwater	Society		23-7	7007115 Page 2
Part II-A Complete if the organiz	ation is exer	npt under sectio	n 501(c)(3) and file	d Form 5768 (ele	ection under
section 501(h)).					
A Check if the filing organization b	0	• • •	n Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and share of e	, ,	• •			
<b>B</b> Check if the filing organization of	necked box A a	nd "limited control" pr	ovisions apply.		
Limits on (The term "expenditure	Lobbying Expe s" means amou		)	<b>(a)</b> Filing organization's totals	<b>(b)</b> Affiliated group totals
<b>1a</b> Total lobbying expenditures to influence	public opinion (	grassroots lobbying)			
<b>b</b> Total lobbying expenditures to influence	a legislative boo	dy (direct lobbying)			
c Total lobbying expenditures (add lines 1	and 1b)				
e Total exempt purpose expenditures (add	lines 1c and 1c	ł)			
f Lobbying nontaxable amount. Enter the					
If the amount on line 1e, column (a) or (b) is	: The lob	bying nontaxable an	nount is:		
not over \$500,000,	20% of	the amount on line 1e			
over \$500,000 but not over \$1,000,000,	\$100,0	00 plus 15% of the exc	cess over \$500,000.		
over \$1,000,000 but not over \$1,500,00	), \$175,0	00 plus 10% of the exc	cess over \$1,000,000.		
over \$1,500,000 but not over \$17,000,0	0, \$225,0	00 plus 5% of the exce	ess over \$1,500,000.		
over \$17,000,000,	\$1,000	,000.			
g Grassroots nontaxable amount (enter 25	% of line 1f)				
h Subtract line 1g from line 1a. If zero or le	ss, enter -0-				
i Subtract line 1f from line 1c. If zero or le	s, enter -0-				
j If there is an amount other than zero on	either line 1h or	line 1i, did the organiz	ation file Form 4720		
reporting section 4911 tax for this year?					Yes No
	4-Year Av	eraging Period Unde	r Section 501(h)		
(Some organizations that m		01(h) election do not ate instructions for l		f the five columns b	elow.
	Lobbying Expe	nditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2020	<b>(b)</b> 2021	(c) 2022	( <b>d)</b> 2023	<b>(e)</b> Total
2a Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount					
(150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount					
(150% of line 2d, column (e))					
· · · · · · · · · · · · · · · · · · ·					
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2023

332042 11-06-23

## Schedule C (Form 990) 2023 Freshwater Society 23-70071 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	a)	(k	)
of the lobbying activity.	Yes	No	Amo	ount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?		Х		
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X			
c Media advertisements?		Х		
d Mailings to members, legislators, or the public?		Х		
e Publications, or published or broadcast statements?		Х		
f Grants to other organizations for lobbying purposes?		Х		
g Direct contact with legislators, their staffs, government officials, or a legislative body?	X		25	,049.
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Х		
i Other activities?		Х		
j Total. Add lines 1c through 1i			25	,049.
2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?		Х		
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)(6).	on 501(c)(5	5), or sec	tion	
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
<ul> <li>2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li> </ul>				
<ul> <li>Bid the organization make only infloade lobbying expenditures of \$2,000 of lobby make only infloade lobbying expenditures of \$2,000 of lobby make only infloade lobbying expenditures of \$2,000 of lobby make only infloade lobbying expenditures of \$2,000 of lobby make only infloade lobbying expenditures of \$2,000 of lobby make only infloade lobbying expenditures of \$2,000 of lobby make only infloade lobbying expenditures of \$2,000 of lobby make only infloade lobbying expenditures of \$2,000 of lobby make only infloade lobbying expenditures of \$2,000 of lobby make only infloade lobby make only infloade lobbying expenditures of \$2,000 of lobby make only infloade lobby make on lobby make on</li></ul>				
Part III-B Complete if the organization is exempt under section 501(c)(4), section			tion	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	"No" OR	(b) Part I	II-A, line	3, is
Dues, assessments and similar amounts from members		1		
<ul> <li>2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)</li> </ul>				
expenses for which the section 527(f) tax was paid).	cai			
a Current year		2a		
b Carryover from last year				
c Total				
<ul> <li>4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc</li> </ul>				
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
	ontical	4		
5 Taxable amount of lobbying and political expenditures. See instructions				
Part IV Supplemental Information		5		
Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part I-A (affiliated group	lict): Dort II		ad 2 (soo	
instructions); and Part II-B, line 1. Also, complete this part for any additional information.	, i ait in		10 2 (366	
Part II-B, Affiliated Group Return Statement:				
Society representatives meet with legislators, agency	staff,	and	other	
local units of government to discuss and influence leg	gislati	on an	d/or	
policies relevant to our strategic objectives.				

Schedule C (Form 990) 2023

332043 11-06-23

		Supplement	l Einanaial Statamanta		OMB No. 15	545-0047
	HEDULE D		al Financial Statements nization answered "Yes" on Form 990,		204	22
(Forn	n 990)		, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		<b>ZU</b>	23
	ment of the Treasury I Revenue Service		ttach to Form 990. 0 for instructions and the latest information.		Open to Inspecti	
	e of the organizati	ion		Em	ployer identification	n number
Dec		Freshwater Society			23-70071	
Par		ations Maintaining Donor Advise on answered "Yes" on Form 990, Part IV, lin	d Funds or Other Similar Funds or A	ccoui	<b>ITS.</b> Complete if the	ne
	organizatio		(a) Donor advised funds	(b) Fur	nds and other accou	nte
	Tatal as web as at as		(a) Donor advised funds	( <b>b)</b> Fui		1115
1		nd of year				
2 3		of contributions to (during year)				
4		f grants from (during year) t end of year				
5			writing that the assets held in donor advised fur	nde		
5	-		exclusive legal control?		Yes	No
6			dvisors in writing that grant funds can be used			
-	•		r donor advisor, or for any other purpose confe	-		
	impermissible priv			-	Yes	No
Par	t II Conserv		ganization answered "Yes" on Form 990, Part I			
1		servation easements held by the organization				
		n of land for public use (for example, recrea		torically	important land area	ı
	Protection o	of natural habitat	Preservation of a cer	tified hi	storic structure	
	Preservation	n of open space				
2	Complete lines 2a	through 2d if the organization held a qualif	ied conservation contribution in the form of a c	onserva	tion easement on th	ie last
	day of the tax year	r.			Held at the End of th	e Tax Year
а	Total number of co	onservation easements		2a		
b	Total acreage rest	ricted by conservation easements		2b		
С	Number of conser	vation easements on a certified historic stru	ucture included on line 2a	2c		
d		vation easements included on line 2c acqu				
	on a historic struc	ture listed in the National Register		2d		
3	Number of conser	vation easements modified, transferred, rel	eased, extinguished, or terminated by the organ	nization	during the tax	
	year					
4		where property subject to conservation eas				
5		tion have a written policy regarding the per			<b>∑</b> Vas	
6		forcement of the conservation easements it	holds? handling of violations, and enforcing conservat			
6	Stall and voluntee	er nours devoted to monitoring, inspecting,	narioning of violations, and emorcing conservat	onease	ements during the ye	ear
7	Amount of expens	es incurred in monitoring inspecting hand	lling of violations, and enforcing conservation e	seemen	ts during the year	
'	Amount of expens	ses incurred in morntoning, inspecting, nand		136111611	to during the year	
8	Does each conser	 vation easement reported on line 2d above	satisfy the requirements of section 170(h)(4)(B)	(i)		
-		-			Yes	No
9			on easements in its revenue and expense state			
			ote to the organization's financial statements t			
	organization's acc	counting for conservation easements.				
Par	t III Organiza	ations Maintaining Collections of	Art, Historical Treasures, or Other	Simila	r Assets.	
	Complete i	f the organization answered "Yes" on Form	990, Part IV, line 8.			
1a	•		8, not to report in its revenue statement and ba			
			olic exhibition, education, or research in furthera	ince of	public	
	· •		ncial statements that describes these items.			
b	-		8, to report in its revenue statement and balance			
			exhibition, education, or research in furtherand	e of pu	blic service,	
	-	ing amounts relating to these items.				
					\$	200
-						,300.
2			asures, or other similar assets for financial gain	provid	e	
	•	unts required to be reported under FASB A	0		<b>^</b>	
а	Revenue included	on Form 990, Part VIII, line 1			\$	

|--|

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 332051 09-28-23

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Schedule D (Form 990) 2023

\$

Sche		ter Society				23-70	07115	Pa	age <b>2</b>
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Oth	er Simila	r Assets	contin	ued)	
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that make	e significant	use of its			
	collection items (check all that apply).								
а	<b>X</b> Public exhibition	d		hange program					
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explain	how they further th	e organization's e	kempt purpo	ose in Part	XIII.		
5	During the year, did the organization solicit o				lar assets	_	_		-
D	to be sold to raise funds rather than to be ma						Yes	X	No
Pai	t IV Escrow and Custodial Arrang reported an amount on Form 990, Par		e if the organization	answered "Yes" o	on Form 990	, Part IV, li	ne 9, or		
10	•		ion for contribution	a ar athar agasta r	ot included				
Id	Is the organization an agent, trustee, custodi						Yes		No
h	on Form 990, Part X? If "Yes," explain the arrangement in Part XIII	and complete the fell	owing table:			∟		L	
U			owing table.				Amount		
<u>د</u>	Beginning balance				1c		,		
	Additions during the year								
	Distributions during the year								
	Ending balance								
	Did the organization include an amount on Fo					·	Yes		No
	If "Yes," explain the arrangement in Part XIII.				• • • • • • •		_		]
Par	t V Endowment Funds Complete if	the organization ans	wered "Yes" on For	m 990, Part IV, line	e 10.				
		(a) Current year	(b) Prior year	(c) Two years bac	(d) Three	years back	(e) Four	years	back
1a	Beginning of year balance	5,400,309.	5,083,046.	5,828,718	4,	777,938.	4,	632,	799.
b	Contributions		304,428.						
	Net investment earnings, gains, and losses	608,579.	417,030.	-513,842	1,0	050,780.		145,	139.
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs	737,798.	404,195.	231,830					
f	Administrative expenses								
g	End of year balance	5,271,090.	5,400,309.	5,083,046	5,8	828,718.	4,	777,	938.
2	Provide the estimated percentage of the curr		(line 1g, column (a)	) held as:					
а	Board designated or quasi-endowment	96.8456	_%						
b	Permanent endowment <u>1.1075</u>	%							
С		%							
	The percentages on lines 2a, 2b, and 2c show								
3a	Are there endowment funds not in the posse	ssion of the organizat	ion that are held ar	d administered for	the		Г	Vaa	Na
	organization by:							Yes	No
	(i) Unrelated organizations?						3a(i)		X X
L	(ii) Related organizations? If "Yes" on line 3a(ii), are the related organiza	tiona listad on require					3a(ii)		
U A	Describe in Part XIII the intended uses of the						3b		
Par	t VI Land, Buildings, and Equipm		inent lunus.						
	Complete if the organization answered		Part IV. line 11a. S	ee Form 990. Part	X. line 10.				
	Description of property	(a) Cost or ot			) Accumulat	ed	(d) Book	value	
	Description of property	basis (investm			depreciation		( <b>u</b> ) 2001	vulue	
<b>1</b> a	Land	`			•				
	Buildings								
	Leasehold improvements		1	4,739.	9,5	81.	5	5,15	58.
	Equipment			4,848.	30,6			1,17	
	Other				· · ·				
	I. Add lines 1a through 1e. <i>(Column (d) must e</i>		Line 10c. column	(B))			9	),33	31.
			-	. ,,		Schedule	D (Form	990)	2023

Part VII Investments - O		-
Schedule D (Form 990) 2023	Freshwater	Society

23-7007115 Page 3

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
1) Financial derivatives			
2) Closely held equity interests			
3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
otal. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line		
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	1
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Column (b) must equal Form 990, Part X, line 15, col	<u>. (</u> B))		
Part X Other Liabilities			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 2	
. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) Lease Liability			122,633
(3)			
(4)			
(5)			
(6)			
(7)			
(7)			

Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the z. organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2023

332053 09-28-23

	edule D (Form 990) 2023 Freshwater Society				7007115 Page
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme		Revenue per Re	turn	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	a.			
1	Total revenue, gains, and other support per audited financial statements			1	1,670,153
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	····· ································		432,855.		
b					
С	Recoveries of prior year grants	. 2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines <b>2a</b> through <b>2d</b>			2e	432,855
3	Subtract line 2e from line 1			3	1,237,298
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	. 4a	<u>52,074.</u> -109,523.		
b	Other (Describe in Part XIII.)	4b	-109,523.		
	Add lines <b>4a</b> and <b>4b</b>			4c	-57,449
С					
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990. Part I. line 12.</i> )		<u> </u>	5	1,179,849
5			Expenses per F		
5	Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990. Part I. line 12.</i> )	ents With	I Expenses per F		n
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	ents With	I Expenses per F		
5 Pa	Total revenue. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 12.</i> ) <b>rt XII</b> Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ents With	I Expenses per F	letur	n
5 Ра 1	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         rt XII       Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements	ents With	I Expenses per F	letur	n
5 Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         rt XII       Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities	ents With	I Expenses per F	letur	n
5 Pa 1 2 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Total Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments	2a 2b	I Expenses per F	letur	n
5 Pa 1 2 a b	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         rt XII         Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments	2a 2b 2c	I Expenses per F	letur	n 2,191,340
5 Pa 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Total Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)	2a 2b 2c 2d	1 Expenses per F	letur	n 2,191,340 109,523
5 Pa 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.)         Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.)         Total Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d	2a 2b 2c 2d	1 Expenses per F	1	n 2,191,340
5 Pa 1 2 a b c d e	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Total Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments       Other losses         Other (Describe in Part XIII.)       Other (Describe in Part XIII.)	2a 2b 2c 2d	1 Expenses per F	1 2e	n 2,191,340 109,523
5 Pa 1 2 a b c d e 3	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         rt XII         Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1	2a 2b 2c 2d	1 Expenses per F	1 2e	n 2,191,340 109,523
5 Pa 1 2 a b c d e 3 4	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) <b>TXII</b> Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 	109,523.	1 2e	n 2,191,340 109,523 2,081,817
5 Pa 1 2 a b c d e 3 4 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         rt XII         Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 4a 4b	109,523. 52,074.	1 2e	n 2,191,340 109,523 2,081,817 52,074
5 Pa 1 2 a b c d e 3 4 a b c 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)         Reconciliation of Expenses per Audited Financial Statem         Complete if the organization answered "Yes" on Form 990, Part IV, line 12a         Total expenses and losses per audited financial statements         Amounts included on line 1 but not on Form 990, Part IX, line 25:         Donated services and use of facilities         Prior year adjustments         Other losses         Other (Describe in Part XIII.)         Add lines 2a through 2d         Subtract line 2e from line 1         Amounts included on Form 990, Part IX, line 25, but not on line 1:         Investment expenses not included on Form 990, Part VIII, line 7b         Other (Describe in Part XIII.)	2a 2b 2c 2d 4a 4b	109,523. 52,074.	1 2e 3	n 2,191,340 109,523 2,081,817

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

#### Part III, line 4:

One	pair	ntin	ng in	h the	collecti	on,	done	by	Les	Kouba	for	the	organi	izatic	on, i	ls
hang	ina	in	the	organ	nization'	s bu	ildir		The	other	pied	es c	of artw	work w	vere	
					nization,											
				- <b>J</b> -						<u> </u>			<b>_</b> _			

storage.

Part V, line 4:

The Society's endowments consist of two funds: one fund established and

restricted by a donor to provide support for student scholarship,

educational programs for students, and the general support of the

educational programs; and another fund established in the year ending June

30, 2018 consisting of unrestricted net assets designated for endowment by 332054 09-28-23 Schedule D (Form 990) 2023 33

11330514 759492 42495

2023.05070 FRESHWATER SOCIETY

Schedule D (Form 990) 2023 Freshwater Society Part XIII Supplemental Information (continued)	23-7007115 Page 5
the Board of Directors to manage operational cashflow needs.	As required
by generally accepted accounting principles, net assets asso	ciated with
endowment funds are classified and reported based on the exi	stence or
absence of donor-imposed restrictions.	
Part XI, Line 4b - Other Adjustments:	
Cost of Goods Sold	-109,523.
<u> Part XII, Line 2d - Other Adjustments:</u>	
Cost of Goods Sold	109,523.

Schedule D (Form 990) 2023

332055 09-28-23

SCHEDULE I (Form 990)		arants and Oth					OMB No. 1545-0047	
(Form 990) Governments, and Individuals in the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.								
Department of the Treasury Internal Revenue Service	epartment of the Treasury Attach to Form 990. Open to Public							
Name of the organization							Employer identification number	
Freshwate	r Society						23-7007115	
Part I General Information on Grants a	nd Assistance							
<b>1</b> Does the organization maintain records t								
criteria used to award the grants or assis							X Yes No	
2 Describe in Part IV the organization's pro					······································		N/ line Of factories	
Part II Grants and Other Assistance to I recipient that received more than \$	-				anization answered "Y	es" on Form 990, Part	IV, line 21, for any	
<b>1 (a)</b> Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	
Black Swamp Conservancy							Organizational support	
P.O Box 332 Perrysburg, OH 43552-0352	34-1746749	501(c)3	10,000.	0.			for subaward staff during grant project	
	54 1/40/45	501(075	10,000.	••				
Landmark Conservancy, Inc.							Organizational support	
509 East Main Street							for subaward staff during	
Menomonie, WI 54751	39-1872550	501(c)3	20,000.	0.			grant project	
Little Fork Conservancy P.O Box 2847							Organizational support for subaward staff during	
Midland, MI 48641	38-3353122	501(c)3	20,000.	0.			grant project	
Minnesota Land Trust I 2356 University Avenue W Suite 2 St. Paul, MN 55114	41-1713652	501(c)3	20,000.	0.			Organizational support for subaward staff during grant project	
Saginaw Basin Land Trust 706 South Euclid Avenue Bay City, MI 48706	81-3121257	501(c)3	20,000.	0.			Organizational support for subaward staff during grant project	
Water 365 3749 South 15th Street Milwaukee, WI 53221	39-5525616		23,874.	0.			Technical support for grant project	
2 Enter total number of section 501(c)(3) and	nd government org	ganizations listed in the	e line 1 table			·	6.	
3 Enter total number of other organizations	s listed in the line 1	I table	<u></u>	<u>.</u>				

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

Schedule I (Form 990) 2023

## Schedule I (Form 990) Freshwater Society Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

23-7007115 Page 1

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
arleton College							
ne North College Street							Technical support for
orthfield, MN 55057	41-0694747	501(c) 3	33,317.	0.			grant project
	41 0004/4/	501(0)5		••			
olin-Zweig							
500 Olson Memorial Highway, Suite							Marketing support for
	46-4365764		207 440	0.			grant project
olden Valley, MN 55427	40-4303/04		387,448.	0.			grant project

Schedule I (Form 990)

Schedule I (Form 990) 2023

Freshwater Society

Page 2

 Part III
 Grants and Other Assistance to Domestic Individuals.
 Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

 Part III can be duplicated if additional space is needed.
 Part III can be duplicated if additional space is needed.
 Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance	
Groundwater Governance and Joyce II Project	9	109,500.	0.			
Regenerative Agriculture Project	2	13,168.	0.			
Water Resource Center Project	1	8,484.	0.			
National Gaianza Daundatian Duaiast	2	1 215	0.			
National Science Foundation Project	2	1,315.	0.			
State Drinking Water Plan	1	975.	0.			
Part IV         Supplemental Information.         Provide the information red	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	ditional information.		
Part I, Line 2:						
Freshwater Society maintains recor	ds to sub	stantiate	the amount	s of grants		
or assistance through the preparat	ion of su	b-award ag	reements.E	ach		
organization is vetted for eligibi	lity duri	ng the suk	-award rec	ruitment		
phase of the grant project.Sub-awa	rdees are	selected	either to	provide		
support (technical or other) to Fr	eshwater	in accompl	ishing pro	ject		
objectives, or are being supported by Freshwater as part of those						
objectives.						

Schedule I (Form 990) Freshwater So	23-7007115 Page				
Part III Continuation of Grants and Other Assistance to Do	mestic Individuals	Schedule I (Form 99	90), Part III.)		
(a) Type of grant or assistance	(b) Number of recipients	<b>(c)</b> Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Contracted Projects	3.	16,743.	0.		
Jamline LCCMR	3.	38,479.	0.		
		50,475.			
MN Water Stewards Project	8.	16,330.	0.		
					Schodulo I / Form 9

Schedule I (Form 990)

Schedule I (Form 990) Freshwater Society	23-7007115 Page 2
Schedule I (Form 990)         Freshwater Society           Part IV         Supplemental Information	
Each sub-awardee is required to report on how their	ir funds have been used on
a frequency based on their specific agreements.	This normally ranges from
one to six months.	
	Sabadula I (Farma 000)
332291 04-01-23	Schedule I (Form 990)

42495\_\_\_1

SCHEDULE O (Form 990)

#### Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



23-7007115

Freshwater Society

Form 990, Part III, Line 2, New Program Services:

Water Workforce Pathways: This initiative by Freshwater aims to enhance the visibility and accessibility of stable, well-paying careers in the water industry. This multifaceted program addresses critical challenges such as workforce burnout, lack of diversity, and the impending retirement of a significant portion of current professionals. Key components include educational outreach to K-12 students, development of clear career guides, compilation of technical training programs, and the creation of standardized, inclusive job postings. By fostering connections across public and private sectors, the initiative seeks to build a more diverse and resilient water workforce.

Circular Water Economy Project: Freshwater is actively promoting circular water systems in Minnesota, focusing on recycling, conserving, and replenishing local water supplies. Activities include site visits in Waconia, Hugo, and Woodbury to showcase stormwater reuse implementations. Executive Director Michelle Stockness recently discussed with Treatment Plant Operator magazine how circular water systems can replace traditional one-way operations, enhancing infrastructure resilience within watersheds. Additionally, Freshwater is finalizing a white paper titled "State of Minnesota's Circular Water Economy," which analyzes current water use and gathers insights from government and industry experts on implementing circular water strategies.

 Form 990, Part III, Line 4a, Program Service Accomplishments:

 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990) 2023

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Schedule O (Form 990) 2023	Page <b>2</b>
Name of the organization	Employer identification number
Freshwater Society	23-7007115

#### celebrations, and representing Minnesota at key national water summits.

#### Policy:

We strengthened our advocacy efforts by creating a cross-functional policy team to address water issues at local, state, and federal levels. Highlights include testifying at the Minnesota Legislature, engaging 19 state and eight federal legislative leaders, and participating in Farm Bill reviews and national water priorities discussions. Our team championed critical issues like nitrate contamination, access to safe drinking water, and infrastructure funding, funding for local units of government, ensuring a strong voice for water quality and accessibility.

#### Research:

We advanced water research by launching innovative projects on sustainable water supply, climate smart strategies, and regenerative agriculture. Collaborative efforts with tribal communities, universities, and national organizations supported initiatives like the St. Anthony Falls Cutoff Wall investigation, managed aquifer recharge studies, our Groundwater Governance project, and circular water economy evaluations. Presentations at key forums and active pursuit of statewide water reuse planning solidified our role as leaders in water research and innovation.

Form 990, Part VI, Section	on A, line 1a:	
The Board of Directors ma	ay designate an Executive Committee composed of at	
least three (3) officers	and any additional individuals designated by the	
Board of Directors. The	Executive Committee shall have the authority of the	
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	41	
.330514 759492 42495	2023.05070 FRESHWATER SOCIETY 42495	1

Schedule O (Form 990) 2023	Page <b>2</b>
Name of the organization	Employer identification number
Freshwater Society	23-7007115
Board of Directors in the management of the business of th	is corporation in
the interval between meetings of the Board of Directors, a	nd the Executive

Committee shall at all times be subject to the control and direction of the

Board of Directors.

Form 990, Part VI, Section B, line 11b:

The return is reviewed by the Finance Director prior to Finance Committee review. A copy of the Form 990 is approved by the Finance Committee and provided to the Board before it is filed.

Form 990, Part VI, Section B, Line 12c:

All officers, directors, and key employees are required to sign a conflict of interest policy annually. The forms are reviewed and any items noted as conflicts are reviewed by the Board to determine if any restrictions need to be imposed on a person with a conflict, which would typically include a restriction from voting on matters related to the conflict.

Form 990, Part VI, Section B, Line 15a:

Organization-wide practice is for compensation to be reviewed periodically with industry salary survey data and is commensurate with the position and experience of the individual. Annual reviews are conducted that are linked with changes in compensation. The Board of Directors annually reviews the Executive Director's performance and sets the Executive Director's compensation. The process was last completed in 2023.

Form 990, Part VI, Section C, Line 19:

The organization makes its governing documents, conflict of interest

policy, and financial statements available to the public upon request and
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Schedule O (Form 990) 2023
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Schedule O (Form 990) 2023	Page 2			
Name of the organization Freshwater Society	Employer identification number 23-7007115			
at the organization's discretion.				
Form 990, Part XII, Line 2c				

This process has not changed from the prior year.

Schedule O (Form 990) 2023

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(Rev. January 2024)

### Application for Extension of Time To File an Exempt Organization Return or Excise Taxes Related to Employee Benefit Plans

Department of the Treasury Internal Revenue Service

#### File a separate application for each return. Go to www.irs.gov/Form8868 for the latest information.

**Electronic filing (e-file).** You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

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

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

	Torrit 7004 to request an extension of time to hie incom		113.				
	lentification			1			
Type or	or Name of exempt organization, employer, or other filer, see instructions.			Taxpayer	axpayer identification number (TIN)		
Print							
File by the	Freshwater Society				23-7007115		
due date for	he for Number, street, and room or suite no. If a P.O. box, see instructions.						
filing your return. See	2550 University Ave W, 212N						
instructions.	City, town or post office, state, and ZIP code. For a for St Paul, MN 55114	oreign addi	ress, see instructions.				
Enter the	Return Code for the return that this application is for (file	e a separa	te application for each return)				
Application Is For		Return	Application Is For		Return		
		Code			Code		
Form 990 or Form 990-EZ		01	Form 4720 (other than individual)			09	
Form 4720 (individual)		03	Form 5227			10	
Form 990-PF		04	Form 6069			11	
Form 990-T (sec. 401(a) or 408(a) trust)		05	Form 8870			12	
Form 990-T (trust other than above)		06	Form 5330 (individual)			13	
Form 990-T (corporation)		07	Form 5330 (other than individual)			14	
Form 1041-A		08					
<ul> <li>After yo</li> </ul>	ou enter your Return Code, complete either Part II or Par	t III. Part II	I, including signature, is applicable of	only for an	extension of		
time to file	e Form 5330.						
<ul> <li>If this a</li> </ul>	pplication is for an extension of time to file Form 5330, y	ou must e	nter the following information.				
Pla	n Name		-				
	n Number						
Pla	n Year Ending (MM/DD/YYYY)						
Part II - Au	utomatic Extension of Time To File for Exempt Organ	izations (s	see instructions)				
The bo	ooks are in the care of The Organization						
	2550 University A	Ave W,	212N - St Paul, M	IN 551	14		
Teleph	one No. <u>651-313-5810</u>		Fax No				
• If the c	organization does not have an office or place of business	s in the Uni					
• If this i	s for a Group Return, enter the organization's four-digit (	Group Exe	mption Number (GEN)	If this is fo	r the whole g	roup, check this	
box[	If it is for part of the group, check this box	and atta	ch a list with the names and TINs of	all membe	ers the exten	sion is for.	
1 Ire	quest an automatic 6-month extension of time until $[M]$	ay 15	, 20 <u>25</u> , to file	e the exem	npt organizati	on return for	
the	organization named above. The extension is for the orga	anization's	return for:				
	] calendar year 20 or						
Х							
2 If th	e tax year entered in line 1 is for less than 12 months, c Change in accounting period	heck reaso	on: Initial return	Final retur	n		
3a lfth	is application is for Forms 990-PF, 990-T, 4720, or 6069	enter the	tentative tax less				
	nonrefundable credits. See instructions.	, 51161 116			\$	0.	
	If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and				<b>. .</b>		
	mated tax payments made. Include any prior year overp	-		3b	\$	0.	
	ance due. Subtract line 3b from line 3a. Include your pa	-			¥		
	ng EFTPS (Electronic Federal Tax Payment System). See			3c	\$	0.	
u311				1.00	Ψ		

For Privacy Act and Paperwork Reduction Act Notice, see instructions.