

Public Disclosure Copy

Form 990

Public Inspection Requirement

An exempt organization must make available for public inspection, upon request and without charge, a copy of its original and amended annual information returns. Each information return must be made available from the date it is required to be filed (determined without regard to any extensions), or is actually filed, whichever is later. An original return does not have to be made available if more than 3 years have passed from the date the return was required to be filed (including any extensions) or was filed, whichever is later. An amended return does not have to be made available if more than 3 years have passed from the date it was filed.

An annual information return includes an exact copy of the return (Form 990 or 990-EZ and amended return, if any) and all schedules, attachments, and supporting documents filed with the IRS. For returns filed by Section 501(c)(3) organizations after August 17, 2006, it also includes Form 990-T. In the case of a tax-exempt organization other than a private foundation, the names and addresses of contributors to the organization (Schedule B) need not be disclosed.

This copy of the return is provided only for Public Disclosure purposes. Any confidential information regarding donors has been removed.

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Department of the Treasury
Internal Revenue Service

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

A For the 2007 calendar year, or tax year beginning **OCT 1, 2007** and ending **SEP 30, 2008**

B Check if applicable:
 Address change
 Name change
 Initial return
 Termination
 Amended return
 Application pending

C Name of organization
CLEAN WATER ACTION
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite
38875 HARPER
 City or town, state or country, and ZIP + 4
CLINTON TOWNSHIP, MI 48036

D Employer identification number
23-7128611

E Telephone number
586-783-3277

F Accounting method: Cash Accrual
 Other (Specify) ▶

G Website: ▶ **WWW.CLEANWATERACTION.ORG**

J Organization type (check only one) ▶ 501(c) (**4**) ◀ (insert no.) 4947(a)(1) or 527

K Check here if the organization is not a 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 ▶ **11,429,640.**

M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

Hand here not applicable to section 527 organizations.
H(a) Is this a group return for affiliates? Yes No
H(b) If "Yes," enter number of affiliates ▶ **N/A**
H(c) Are all affiliates included? **N/A** Yes No (If "No," attach a list.)
H(d) Is this a separate return filed by an organization covered by a group ruling? Yes No
I Group Exemption Number ▶ **N/A**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances											
Revenue	1	Contributions, gifts, grants, and similar amounts received:									
	a	Contributions to donor advised funds								1a	
	b	Direct public support (not included on line 1a)								1b	11,395,103.
	c	Indirect public support (not included on line 1a)								1c	
	d	Government contributions (grants) (not included on line 1a)								1d	
	e	Total (add lines 1a through 1d) (cash \$ 11,395,103. noncash \$ _____)								1e	11,395,103.
	2	Program service revenue including government fees and contracts (from Part VII, line 93)								2	
	3	Membership dues and assessments								3	
	4	Interest on savings and temporary cash investments								4	3,997.
	5	Dividends and interest from securities								5	
	6a	Gross rents SEE STATEMENT 1								6a	8,100.
	b	Less: rental expenses								6b	
c	Net rental income or (loss). Subtract line 6b from line 6a								6c	8,100.	
7	Other investment income (describe ▶ _____)								7		
8a			(A) Securities		(B) Other						
			4,915.	8a	9,330.						
			5,004.	8b	4,170.						
			-89.	8c	5,160.						
d	Net gain or (loss). Combine line 8c, columns (A) and (B) STMT 2 STMT 3								8d	5,071.	
9	Special events and activities (attach schedule). If any amount is from gaming, check here <input type="checkbox"/>										
a	Gross revenue (not including \$ 7,045. of contributions reported on line 1b) ...								9a	8,195.	
b	Less: direct expenses other than fundraising expenses								9b	999.	
c	Net income or (loss) from special events. Subtract line 9b from line 9a SEE STATEMENT 4								9c	7,196.	
10a			10a		10b						
c	Gross profit or (loss) from sales of inventory (attach schedule). Subtract line 10b from line 10a								10c		
11	Other revenue (from Part VII, line 103)								11		
12	Total revenue. Add lines 1e, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11								12	11,419,467.	
Expenses	13	Program services (from line 44, column (B))								13	8,467,641.
	14	Management and general (from line 44, column (C))								14	1,807,644.
	15	Fundraising (from line 44, column (D))								15	1,748,782.
	16	Payments to affiliates (attach schedule)								16	
	17	Total expenses. Add lines 16 and 44, column (A)								17	12,024,067.
Net Assets	18	Excess or (deficit) for the year. Subtract line 17 from line 12								18	-604,600.
	19	Net assets or fund balances at beginning of year (from line 73, column (A))								19	-117,704.
	20	Other changes in net assets or fund balances (attach explanation)								20	0.
	21	Net assets or fund balances at end of year. Combine lines 18, 19, and 20								21	-722,304.

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others.

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.	(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22a Grants paid from donor advised funds (attach schedule) (cash \$ <u>0</u> • noncash \$ <u>0</u> .) If this amount includes foreign grants, check here <input type="checkbox"/>				
22b Other grants and allocations (attach schedule) (cash \$ <u>0</u> • noncash \$ <u>0</u> .) If this amount includes foreign grants, check here <input type="checkbox"/>				
23 Specific assistance to individuals (attach schedule)				
24 Benefits paid to or for members (attach schedule)				
25a Compensation of current officers, directors, key employees, etc. listed in Part V-A	167,928.	96,994.	52,496.	18,438.
25b Compensation of former officers, directors, key employees, etc. listed in Part V-B	48,629.	38,904.	4,863.	4,862.
25c Compensation and other distributions, not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
26 Salaries and wages of employees not included on lines 25a, b, and c	7,227,897.	5,544,843.	714,979.	968,075.
27 Pension plan contributions not included on lines 25a, b, and c				
28 Employee benefits not included on lines 25a-27	466,410.	312,786.	91,979.	61,645.
29 Payroll taxes	455,002.	74,068.	283,467.	97,467.
30 Professional fundraising fees	32,852.			32,852.
31 Accounting fees	31,500.		31,500.	
32 Legal fees	20,209.	10,517.	8,874.	818.
33 Supplies	76,609.	47,350.	20,638.	8,621.
34 Telephone	210,384.	151,160.	32,699.	26,525.
35 Postage and shipping	286,170.	106,340.	44,068.	135,762.
36 Occupancy	653,389.	419,929.	151,958.	81,502.
37 Equipment rental and maintenance	53,618.	29,385.	18,350.	5,883.
38 Printing and publications	282,394.	202,488.	9,084.	70,822.
39 Travel	112,728.	94,905.	7,442.	10,381.
40 Conferences, conventions, and meetings	101,242.	77,631.	7,579.	16,032.
41 Interest	47,430.	35.	47,392.	3.
42 Depreciation, depletion, etc. (attach schedule)	116,016.	52,689.	53,558.	9,769.
43 Other expenses not covered above (itemize):				
a				
b				
c				
d				
e				
f				
g SEE STATEMENT 5	1,633,660.	1,207,617.	226,718.	199,325.
44 Total functional expenses. Add lines 22a through 43g. (Organizations completing columns (B)-(D), carry these totals to lines 13-15)	12,024,067.	8,467,641.	1,807,644.	1,748,782.

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ 9,295,376.; (ii) the amount allocated to Program services \$ 7,047,437.; (iii) the amount allocated to Management and general \$ 730,590.; and (iv) the amount allocated to Fundraising \$ 1,517,349.

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► SEE STATEMENT 7	Program Service Expenses
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a PUBLIC EDUCATION: CITIZEN CONTACT & EDUCATIONAL OUTREACH, PROVIDING INFORMATION FOR INDIVIDUAL AND COMMUNITY INVOLVEMENT IN PUBLIC POLICY AND LOCAL IMPACTS ON ISSUES RELATED TO WATER, ENVIRONMENTAL HEALTH, TOXICS AND THE ENVIRONMENT.	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	7,112,818.
b SEE STATEMENT 6	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	762,088.
c EDUCATION AND TRAINING: PROGRAMS TO INFORM THE GENERAL PUBLIC AND IMPROVE THE PERFORMANCE OF ENVIRONMENTALLY CONCERNED PUBLIC AND PRIVATE INSTITUTIONS/AGENCIES.	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	592,735.
d	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
e Other program services (attach schedule)	
(Grants and allocations \$) If this amount includes foreign grants, check here ► <input type="checkbox"/>	
f Total of Program Service Expenses (should equal line 44, column (B), Program services) ►	8,467,641.

Form 990 (2007)

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year	(B) End of year
Assets	45 Cash - non-interest-bearing	521,251.	45 546,130.
	46 Savings and temporary cash investments		46
	47 a Accounts receivable	261,860.	
	b Less: allowance for doubtful accounts		47c 261,860.
	48 a Pledges receivable		48a
	b Less: allowance for doubtful accounts		48b 48c
	49 Grants receivable		49
	50 a Receivables from current and former officers, directors, trustees, and key employees		50a
	b Receivables from other disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B))		50b
	51 a Other notes and loans receivable		51a
	b Less: allowance for doubtful accounts		51b 51c
	52 Inventories for sale or use		52
	53 Prepaid expenses and deferred charges	40,684.	53 61,678.
	54 a Investments - publicly-traded securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54a
	b Investments - other securities	<input type="checkbox"/> Cost <input type="checkbox"/> FMV	54b
55 a Investments - land, buildings, and equipment: basis		55a	
b Less: accumulated depreciation		55b 55c	
56 Investments - other		56	
57 a Land, buildings, and equipment: basis	998,047.		
b Less: accumulated depreciation STMP 8	792,501.	57b 165,770.	
58 Other assets, including program-related investments (describe SEE STATEMENT 9)		58 333,135.	
59 Total assets (must equal line 74). Add lines 45 through 58	1,113,544.	59 1,253,087.	
Liabilities	60 Accounts payable and accrued expenses	1,231,248.	60 1,704,337.
	61 Grants payable		61
	62 Deferred revenue		62
	63 Loans from officers, directors, trustees, and key employees		63
	64 a Tax-exempt bond liabilities		64a
	b Mortgages and other notes payable		64b 38,494.
	65 Other liabilities (describe SEE STATEMENT 10)	0.	65 232,560.
66 Total liabilities. Add lines 60 through 65	1,231,248.	66 1,975,391.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.		
	67 Unrestricted	-119,521.	67 -1,010,103.
	68 Temporarily restricted	1,817.	68 287,799.
	69 Permanently restricted		69
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.		
	70 Capital stock, trust principal, or current funds		70
	71 Paid-in or capital surplus, or land, building, and equipment fund		71
	72 Retained earnings, endowment, accumulated income, or other funds		72
73 Total net assets or fund balances. Add lines 67 through 69 or lines 70 through 72. (Column (A) must equal line 19 and column (B) must equal line 21)	-117,704.	73 -722,304.	
74 Total liabilities and net assets/fund balances. Add lines 66 and 73	1,113,544.	74 1,253,087.	

Part VI Other Information (continued)		Yes	No
82 a	Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
	b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)		
	82b 3,749.		
83 a	Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b	Did the organization comply with the disclosure requirements relating to <i>quid pro quo</i> contributions?	83b	N/A
84 a	Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	X
85 a	501(c)(4), (5), or (6). Were substantially all dues nondeductible by members?	85a	X
b	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	85b	X
	If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.		
c	Dues, assessments, and similar amounts from members	85c	N/A
d	Section 162(e) lobbying and political expenditures	85d	N/A
e	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f	Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?	85g	N/A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86	501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on line 12	86a	N/A
b	Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87	501(c)(12) organizations. Enter: a Gross income from members or shareholders	87a	N/A
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	87b	N/A
88 a	At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88a	X
b	At any time during the year, did the organization, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Part XI	88b	X
89 a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 ▶ N/A ; section 4912 ▶ N/A ; section 4955 ▶ N/A		
b	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c	Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		0.
d	Enter: Amount of tax on line 89c, above, reimbursed by the organization		0.
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?	89e	X
f	All organizations. Did the organization acquire a direct or indirect interest in any applicable insurance contract?	89f	X
g	For supporting organizations and sponsoring organizations maintaining donor advised funds. Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	89g	X
90 a	List the states with which a copy of this return is filed ▶ SEE STATEMENT 15		
b	Number of employees employed in the pay period that includes March 12, 2007	90b	432
91 a	The books are in care of ▶ KATHLEEN E. ATERNO Telephone no. ▶ 586-783-3277		
	Located at ▶ 38875 HARPER, CLINTON TWP, MI ZIP + 4 ▶ 48036		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	91b	X
	If "Yes," enter the name of the foreign country ▶ N/A		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		

Part VI Other Information (continued)

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c Yes No

If "Yes," enter the name of the foreign country N/A

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041- Check here and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclu- sion code	(D) Amount	
93 Program service revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies ...					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments ...			14	3,997.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property			16	8,100.	
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	5,071.	
101 Net income or (loss) from special events			01	7,196.	
102 Gross profit or (loss) from sales of inventory					
103 Other revenue:					
a _____					
b _____					
c _____					
d _____					
e _____					
104 Subtotal (add columns (B), (D), and (E))		0.		24,364.	0.
105 Total (add line 104, columns (B), (D), and (E))					24,364.

Note: Line 105 plus line 1e, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
N/A	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

Part XI Information Regarding Transfers To and From Controlled Entities. Complete only if the organization is a controlling organization as defined in section 512(b)(13). **N/A**

106 Did the reporting organization make any transfers to a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
Totals				

107 Did the reporting organization receive any transfers from a controlled entity as defined in section 512(b)(13) of the Code? If "Yes," complete the schedule below for each controlled entity.

Yes	No

	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	(D) Amount of transfer
a	-----			
b	-----			
c	-----			
Totals				

108 Did the organization have a binding written contract in effect on August 17, 2006, covering the interest, rents, royalties, and annuities described in question 107 above?

Yes	No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Please Sign Here

Signature of officer: *[Signature]* Date: *5/6/09*

Type or print name and title: *Asst Corp Secretary*

Paid Preparer's Use Only

Preparer's signature: *[Signature]* Date: *MAY 06 2009* Check if self-employed:

Firm's name (or yours if self-employed), address, and ZIP + 4: **PLANTE & MORAN, PLLC**
P.O. BOX 307
SOUTHFIELD, MI 48037-0307

Preparer's SSN or PTIN (See Gen. Inst. X): *P00170336*

EIN: _____ Phone no.: *(248) 352-2500*

FORM 990 RENTAL INCOME STATEMENT 1

KIND AND LOCATION OF PROPERTY	ACTIVITY NUMBER	GROSS RENTAL INCOME
205 1/2 NORTH MAIN ST, ANN ARBOR, MI 48036	1	3,000.
38875 HARPER, CLINTON TWP., MI 48036	2	300.
715 WEST 23RD ST., SUITE R, AUSTIN, TX 78705	3	4,800.
TOTAL TO FORM 990, PART I, LINE 6A		8,100.

FORM 990 GAIN (LOSS) FROM PUBLICLY TRADED SECURITIES STATEMENT 2

DESCRIPTION	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	NET GAIN OR (LOSS)
INVESTMENT	4,915.	5,004.	0.	-89.
TO FORM 990, PART I, LINE 8	4,915.	5,004.	0.	-89.

FORM 990 GAIN (LOSS) FROM SALE OF OTHER ASSETS STATEMENT 3

DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED		
VEHICLES			PURCHASED		
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	9,330.	64,416.	0.	60,246.	5,160.
DESCRIPTION	DATE ACQUIRED	DATE SOLD	METHOD ACQUIRED		
FURNITURE AND FIXTURES			PURCHASED		
NAME OF BUYER	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC	NET GAIN OR (LOSS)
	0.	1,494.	0.	1,494.	0.
TO FM 990, PART I, LN 8	9,330.	65,910.	0.	61,740.	5,160.

FORM 990 SPECIAL EVENTS AND ACTIVITIES STATEMENT 4

DESCRIPTION OF EVENT	GROSS RECEIPTS	CONTRIBUT. INCLUDED	GROSS REVENUE	DIRECT EXPENSES	NET INCOME OR (LOSS)
14TH ANNUAL PARTY IN THE SPRINGTIME	14,010.	7,045.	6,965.	759.	6,206.
HEALING THE EARTH	1,230.	0.	1,230.	240.	990.
TO FM 990, PART I, LINE 9	15,240.	7,045.	8,195.	999.	7,196.

FORM 990

OTHER EXPENSES

STATEMENT 5

DESCRIPTION	(A) TOTAL	(B) PROGRAM SERVICES	(C) MANAGEMENT AND GENERAL	(D) FUNDRAISING
AUTO	467,846.	368,644.	24,561.	74,641.
RECRUITING	9,989.	7,881.	363.	1,745.
PRIZES AND AWARDS	14,928.	9,561.	2,351.	3,016.
ADVERTISING	204,885.	183,332.	16,057.	5,496.
BAD DEBT	32,108.	24,168.	2,943.	4,997.
BANK FEES	114,384.	70,177.	27,390.	16,817.
COMPUTER SERVICES	37,236.	26,581.	8,511.	2,144.
COMPUTER SOFTWARE	6,334.	2,844.	3,269.	221.
CONCESSION/CATERING	6,052.	4,496.	176.	1,380.
CONSULTING FEES	139,491.	112,195.	13,929.	13,367.
CONTRIBUTIONS	119,652.	107,586.	3,620.	8,446.
HBC EXPENSE	345,993.	238,735.	47,055.	60,203.
LICENSE FEES				
PERMITS/REGISTRAT	10,490.	1,630.	8,498.	362.
MAIL HOUSE SERVICES	4,777.	4,156.	336.	285.
MEDIA BUY/PRODUCTION	7,760.	6,984.	233.	543.
MEMBERSHIP DUES	5,911.	5,332.	170.	409.
OFFICE MOVE	27,323.	4,407.	22,506.	410.
PAYROLL SERVICES	38,974.	0.	38,974.	0.
PER DIEM	21,411.	17,753.	1,177.	2,481.
PERSONAL PROPERTY AND SPECIAL	4,238.	577.	3,558.	103.
STAFF RELOCATION	2,887.	2,330.	147.	410.
SUPERVISORS EXPENSES	10,991.	8,248.	894.	1,849.
TOTAL TO FM 990, LN 43	1,633,660.	1,207,617.	226,718.	199,325.

FORM 990 STATEMENT OF PROGRAM SERVICE ACCOMPLISHMENTS STATEMENT 6

DESCRIPTION OF PROGRAM SERVICE TWO

PUBLIC POLICY RESEARCH AND LOBBYING: LEGISLATIVE CONTACT AND EDUCATIONAL OUTREACH, ENGAGING INDIVIDUALS, ORGANIZATIONS AND PUBLIC OFFICIALS IN EFFORTS TO UNDERSTAND AND IMPROVE POLICIES AND THEIR IMPLEMENTATION RELATED TO WATER, ENVIRONMENTAL HEALTH, TOXICS AND THE ENVIRONMENT. MAJOR EMPHASIS ON WATER QUALITY AND SAFETY, AND ENVIRONMENTAL HEALTH RISKS FROM POLLUTING POWER PLANT EMISSIONS.

	GRANTS	EXPENSES
TO FORM 990, PART III, LINE B		762,088.

FORM 990 STATEMENT OF ORGANIZATION'S PRIMARY EXEMPT PURPOSE PART III STATEMENT 7

EXPLANATION

CLEAN WATER ACTION IS A NATIONAL CITIZENS' ORGANIZATION WORKING FOR CLEAN, SAFE AND AFFORDABLE WATER, PREVENTION OF HEALTH-THREATENING POLLUTION, CREATION OF ENVIRONMENTALLY SAFE JOBS AND BUSINESSES, AND EMPOWERMENT OF PEOPLE TO MAKE DEMOCRACY WORK. CLEAN WATER ACTION ORGANIZES STRONG GRASSROOTS GROUPS, COALITIONS, AND CAMPAIGNS TO PROTECT OUR ENVIRONMENT, HEALTH, ECONOMIC WELL-BEING AND COMMUNITY QUALITY OF LIFE.

FORM 990 DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT STATEMENT 8

DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
EQUIPMENT	540,805.	446,972.	93,833.
AUTOMOBILES	402,203.	292,843.	109,360.
LEASEHOLD IMPROVEMENTS	55,039.	52,686.	2,353.
TOTAL TO FORM 990, PART IV, LN 57	998,047.	792,501.	205,546.

FORM 990	OTHER ASSETS	STATEMENT 9	
DESCRIPTION		BEGINNING OF YEAR	END OF YEAR
DEPOSITS		69,657.	75,750.
DUE FROM AFFILIATE		263,478.	102,123.
TOTAL TO FORM 990, PART IV, LINE 58		333,135.	177,873.

FORM 990	OTHER LIABILITIES	STATEMENT 10	
DESCRIPTION		BEGINNING OF YEAR	END OF YEAR
DUE TO AFFILIATE			40,560.
BANK LINE OF CREDIT			192,000.
TOTAL TO FORM 990, PART IV, LINE 65			232,560.

FORM 990	OTHER EXPENSES NOT INCLUDED ON FORM 990	STATEMENT 11	
DESCRIPTION		AMOUNT	
GAIN ON DISPOSAL			-5,160.
LOSS ON INVESTMENT			89.
SPECIAL EVENT EXPENSES			999.
TOTAL TO FORM 990, PART IV-B			-4,072.

FORM 990	OTHER REVENUE INCLUDED ON FORM 990	STATEMENT 12	
DESCRIPTION		AMOUNT	
GAIN ON DISPOSAL			5,160.
LOSS ON INVESTMENT			-89.
SPECIAL EVENTS EXPENSES			-999.
TOTAL TO FORM 990, PART IV-A			4,072.

 FORM 990 PART V-A - LIST OF CURRENT OFFICERS, DIRECTORS, STATEMENT 13
 TRUSTEES AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JOHN DECOCK 38875 HARPER CLINTON TOWNSHIP, MI 48036	PRESIDENT 18.00	58,077.	6,350.	0.
KATHLEEN ATERNO 38875 HARPER CLINTON TOWNSHIP, MI 48036	SECRETARY 31.00	55,713.	2,789.	0.
TONYA SMITH 38875 HARPER CLINTON TOWNSHIP, MI 48036	ASST. SECRETARY 30.00	39,820.	5,179.	0.
DAVID TYKULSKER 38875 HARPER CLINTON TOWNSHIP, MI 48036	CHAIR 7.00	0.	0.	0.
PETER LOCKWOOD 38875 HARPER CLINTON TOWNSHIP, MI 48036	TREASURER 3.00	0.	0.	0.
MICHAEL GRAVITZ 38875 HARPER CLINTON TOWNSHIP, MI 48036	DIRECTOR 2.00	0.	0.	0.
MAURICE SAMPSON 38875 HARPER CLINTON TOWNSHIP, MI 48036	DIRECTOR 1.00	0.	0.	0.
PAT COSTNER 38875 HARPER CLINTON TOWNSHIP, MI 48036	DIRECTOR 1.00	0.	0.	0.
BRENT BAESLACK 38875 HARPER CLINTON TOWNSHIP, MI 48036	DIRECTOR 1.00	0.	0.	0.
ELIZABETH DICKINSON 38875 HARPER CLINTON TOWNSHIP, MI 48036	DIRECTOR 1.00	0.	0.	0.
MAXINE LIPELES 38875 HARPER CLINTON TOWNSHIP, MI 48036	DIRECTOR 1.00	0.	0.	0.

CLEAN WATER ACTION

23-7128611

MYRNA POTICHA
38875 HARPER
CLINTON TOWNSHIP, MI 48036

DIRECTOR
1.00

0. 0. 0.

BILL REDDING
38875 HARPER
CLINTON TOWNSHIP, MI 48036

DIRECTOR
0.00

0. 0. 0.

TOTALS INCLUDED ON FORM 990, PART V-A

153,610. 14,318. 0.

FORM 990

PART V-A OFFICER COMPENSATION FROM
RELATED ORGANIZATIONS

STATEMENT 14

<u>OFFICER'S NAME</u>	<u>COMPENSATION</u>	<u>EMPLOYEE BENEFIT PLAN CONTRIBUTION</u>	<u>EXPENSE ACCOUNT</u>
JOHN DECOCK	67,644.	7,056.	
<u>NAME OF RELATED ORGANIZATION</u>			<u>EMPLOYER ID NUMBER</u>
CLEAN WATER FUND			52-1043444
<u>RELATIONSHIP BETWEEN ORGANIZATIONS</u>			
ACTION ACTS AS A PAYMASTER FOR THE ENTITY FOR SHARED EXPENSES AND EMPLOYEES			

<u>OFFICER'S NAME</u>	<u>COMPENSATION</u>	<u>EMPLOYEE BENEFIT PLAN CONTRIBUTION</u>	<u>EXPENSE ACCOUNT</u>
KATHY ATERNO	43,902.	3,665.	
<u>NAME OF RELATED ORGANIZATION</u>			<u>EMPLOYER ID NUMBER</u>
CLEAN WATER FUND			52-1043444
<u>RELATIONSHIP BETWEEN ORGANIZATIONS</u>			
ACTION ACTS AS A PAYMASTER FOR THE ENTITY FOR SHARED EXPENSES AND EMPLOYEES			

FORM 990

LIST OF STATES RECEIVING COPY OF RETURN
PART VI, LINE 90

STATEMENT 15

STATES

CA, CO, CT, DC, FL, ME, MD, MA, MI, MN, NH, NJ, NM, NY, ND, OH, PA, RI, SD, TX, VA, WA, WI

Application for Extension of Time To File an Exempt Organization Return

▶ File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box **X**
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

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

Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time to file one of the returns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronically if (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Type or print	Name of Exempt Organization CLEAN WATER ACTION	Employer identification number 23-7128611
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 38875 HARPER	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. CLINTON TOWNSHIP, MI 48036	

Check type of return to be filed (file a separate application for each return):

- | | | |
|--|---|------------------------------------|
| <input checked="" type="checkbox"/> Form 990 | <input type="checkbox"/> Form 990-T (corporation) | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (sec. 401(a) or 408(a) trust) | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 8870 |

- The books are in the care of ▶ **KATHLEEN E. ATERNO**
Telephone No. ▶ **586-783-3277** FAX No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension will cover.

1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time until **MAY 15, 2009**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year _____ or
▶ tax year beginning **OCT 1, 2007**, and ending **SEP 30, 2008**.

2 If this tax year is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	N/A

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

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