990 **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

201

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

Do not enter social security numbers on this form as it may be made public.

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

Open to Public Inspection

| Α | For the | 2022 calend | dar year, or tax year beginning | 07/01/2022 | and ending | | 06/30/2 | 2023 | | | | | |
|-----------------------------|----------------|------------------|--|---|-----------------|------------|--------------------|-----------------------------|--------------------------------|--|--|--|--|
| В | Check if | applicable: | C Name of organization WISCON | ISIN WETLANDS ASSOCIAT | TON INC | | | D Emple | oyer identification number | | | | |
| | Address | change | Doing business as | | | | | | 39-1852601 | | | | |
| | Name ch | nange | Number and street (or P.O. box in | if mail is not delivered to street add | dress) | Room | n/suite | E Teleph | none number | | | | |
| | Initial ret | urn | 214 North Hamilton Street Su | uite 201 | | | 608-250-9971 | | | | | | |
| $\overline{\Box}$ | Final retu | urn/terminated | City or town, state or province, c | country, and ZIP or foreign postal o | code | | | | | | | | |
| $\overline{\Box}$ | Amende | d return | Madison, WI 53703 | | | | | G Gross | receipts \$ 973,242 | | | | |
| П | Applicat | ا ion pending | F Name and address of principal of | ficer: TRACY HAMES | | | H(a) Is this a gro | oup return fo | or subordinates? Yes Vo | | | | |
| | | | 214 N HAMILTON STE 201, M | | | | H(b) Are all su | ubordinat | es included? Yes No | | | | |
| ī | Tax-exe | mpt status: | ✓ 501(c)(3) | | a)(1) or 527 | , | If "No," attacl | h a list. See instructions. | | | | | |
| J | Website | : www.wis | sconsinwetlands.org | | | | H(c) Group ex | exemption number | | | | | |
| K | Form of o | | Corporation Trust Associa | ation Other | L Year of for | mation | : 1969 | M State | of legal domicile: WI | | | | |
| | Part I Summary | | | | | | | | | | | | |
| | 1 | | cribe the organization's miss | sion or most significant act | ivities: Dedi | cated | to protection | n, resto | pration, and enjoyment | | | | |
| ė | | | s and associated ecosystems | | | | | | | | | | |
| Governance | | | | × | 4 | | | | | | | | |
| err | 2 | Check this | box if the organization d | discontinued its operations | or disposed | of m | ore than 25 | 5% of it | s net assets. | | | | |
| Š | 3 | | f voting members of the gove | • | | | | 3 | 7 | | | | |
| ૐ | 4 | | f independent voting membe | | | | | 4 | 7 | | | | |
| Activities & | 5 | | ber of individuals employed in | | | - | | 5 | 10 | | | | |
| Ĭ | 6 | | ber of volunteers (estimate if | | | | | 6 | 85 | | | | |
| Aci | 7a | | lated business revenue from | - · · · · · · · · · · · · · · · · · · · | | | | 7a | 0 | | | | |
| | b | | ted business taxable income | | 7b | 0 | | | | | | | |
| | | | | | | Prior Year | r | Current Year | | | | | |
| ø) | 8 | Contributio | ons and grants (Part VIII, line | 1h) | | | 8 | 40,348 | 889,071 | | | | |
| Ď | 9 | | ervice revenue (Part VIII, line | | | | | 37,263 | 68,820 | | | | |
| Revenue | 10 | _ | t income (Part VIII, column (A | | | 719 | 271 | | | | | | |
| Œ | 11 | | nue (Part VIII, column (A), line | | | | | 0 | 15,080 | | | | |
| | 12 | | nue—add lines 8 through 11 (r | | 8 | 78,330 | 973,242 | | | | | | |
| | 13 | | d similar amounts paid (Part I | · · · · · · · · · · · · · · · · · · · | | _ | | 0 | 0 | | | | |
| | 14 | | aid to or for members (Part I) | | | | | 0 | 0 | | | | |
| s | 15 | | ther compensation, employee | | | | 5 | 98,086 | 668,028 | | | | |
| Expenses | 16a | | nal fundraising fees (Part IX, c | | | | | 0 | 0 | | | | |
| be | b | | raising expenses (Part IX, col | , , | 102,581 | | | - | | | | | |
| ũ | 17 | | enses (Part IX, column (A), lin | · / · | | | 1 | 86,686 | 291,208 | | | | |
| | 18 | - | enses. Add lines 13–17 (must | | line 25) . | | | 84,772 | 959,236 | | | | |
| | 19 | | ess expenses. Subtract line 1 | | | | | 93,558 | 14,006 | | | | |
| or | | | • | | | 1_ | inning of Curr | | End of Year | | | | |
| Net Assets or Fund Balances | 20 | Total asset | ts (Part X, line 16) | | | | 5 | 93,636 | 953,300 | | | | |
| ASS | 21 | Total liabili | ities (Part X, line 26) | | | | | 62,339 | 237,497 | | | | |
| ā E | 22 | Net assets | or fund balances. Subtract I | line 21 from line 20 | | | 5 | 31,297 | 715,803 | | | | |
| P | art II | Signatu | ıre Block | | | | | | | | | | |
| | | | , I declare that I have examined this | | | | | | my knowledge and belief, it is | | | | |
| tru | e, correc | t, and complet | e. Declaration of preparer (other than | n officer) is based on all informatio | n of which prep | arer na | is any knowied | e. | | | | | |
| C: | | | | | | | ل_ | | | | | | |
| Si | _ | Signature of | officer | | | | Date | | | | | | |
| He | ere | | nes, Executive Director | | | | | | | | | | |
| | | 1 | name and title | T | | | | | | | | | |
| Pa | id | Print/Type | e preparer's name | Preparer's signature | | Date | | Check [| if PTIN | | | | |
| | epare | r | | | | | | self-emp | ployed | | | | |
| | e Onl | | ne | | | | Firm's | EIN | | | | | |
| | | Firm's add | | | | | Phone | Phone no. | | | | | |
| Ma | v the IF | KS discuss t | this return with the preparer: | snown above? See instruc | tions | _ | | | . Yes No | | | | |

Form **990** (2022)

| Part l | Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any I | ing in this Part III |
|--------|--|--|
| 1 | Briefly describe the organization's mission: | |
| 1 | , | motion and anicompate of mattered and accordate d accordance |
| | Wisconsin Wetlands Association is dedicated to the protection, resto through science-based programs, education, and advocacy. | |
| | unough science-based programs, education, and advocacy. | |
| | | |
| 2 | Did the organization undertake any significant program services of prior Form 990 or 990-EZ? | during the year which were not listed on the · · · · · · · · · · · · · · · · · · · |
| _ | If "Yes," describe these new services on Schedule O. | |
| 3 | Did the organization cease conducting, or make significant c services? | |
| | If "Yes," describe these changes on Schedule O. | |
| 4 | Describe the organization's program service accomplishments for expenses. Section 501(c)(3) and 501(c)(4) organizations are requi | |
| | the total expenses, and revenue, if any, for each program service | |
| | | |
| 4a | (Code: 315,781 including grants | |
| | Wetland Outreach and Education: in 2022-23, WWA developed and p | |
| | audiences of laypersons and experts and advanced the use of wetlar | |
| | Programs include a bi-weekly webinar called the Wetland Coffee Bre | |
| | field trips, and presentations; advising landowners about wetland probooks, My Healthy Wetlands (to help landowners care for their wetlands) | |
| | wetland poetry, by a WWA member), and an annual wetlands science | |
| | narticipated in WWA's 2022 wetland science conformes | |
| | participated in WWA's 2023 wetland science conference. | |
| | | |
| | | |
| | | |
| | | |
| 4b | (Code:) (Expenses \$ 209,692 including grants | of \$ 0) (Revenue \$ 0) |
| 710 | Public Policy Advocacy: In 2022-23, WWA's policy program work em | |
| | increase the use of wetland restoration to solve problems. Highlights | |
| | Department of Natural Resources develop a Hydrologic Restoration (| - |
| | non-governmental collaborators to support development and introdu | |
| | flood prone communities identify and implement opportunities to res | |
| | 222). Our Executive Director continued to serve as Vice Chair of the | |
| | private, agricultural, conservation, and other diverse interests discus | · |
| | issues. WWA also helped state legislators develop a bill creating a go | |
| | bi-partisan legislation, was unanimously enacted into law and develo | |
| | | , |
| | | |
| | | |
| 4c | (Code:) (Expenses \$ 210,160 including grants | of \$ 0) (Revenue \$ 0) |
| | Place-based Projects: In 2022-23 WWA continued worked with the Vi | |
| | River watershed to restore river flows and conserve groundwater. W | NA also continued and expanded work to help county land |
| | conservation departments, emergency managers, and local road mai | nagers in the Marengo River Watershed (Ashland County) |
| | identify and prioritize areas where restoring wetlands and floodplains | could help reduce downstream flood risks and vulnerabilities. |
| | This project is a collaboration with the Association of State Floodpla | n Managers. It is part of a longer-term effort to develop and |
| | promote methods to help Wisconsin's flood-prone communities asse | ss and address areas where degraded wetland and floodplain |
| | condition contribute to road and culvert damages during runoff even | ts. |
| | | |
| | | |
| | | |
| | | |
| | | |
| 4d | Other program services (Describe on Schedule O.) See Schedule O | , Statement 1 |
| | |) (Revenue \$ 0) |
| 4e | Total program service expenses 765,486 | |

| Part | Checklist of Required Schedules | | | |
|----------|--|-----|----------|----------|
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | Yes | No |
| • | complete Schedule A | 1 | 1 | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? See instructions | 2 | √ | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I </i> | 3 | | ✓ |
| 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? <i>If "Yes," complete Schedule C, Part II</i> | 4 | ✓ | |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III | 5 | | ✓ |
| 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 | | √ |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, | | | |
| 8 | the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i> Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete Schedule D, Part III</i> | 7 | | √ |
| 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 | 8 | | ✓ |
| 10 | debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> | 9 | | ✓ |
| | or in quasi endowments? If "Yes," complete Schedule D, Part V | 10 | | ✓ |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, 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 | ✓ | |
| 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 | | ✓ |
| 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 | | ✓ |
| 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? <i>If "Yes," complete Schedule D, Part IX </i> | 11d | √ | |
| e f | Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses | 11e | ✓ | |
| 12a | the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i> Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete</i> | 11f | ✓ | |
| _ | Schedule D, Parts XI and XII | 12a | ✓ | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | | ✓ |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | √ |
| 14a b | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | ✓ |
| - | fundraising, business, investment, and program service activities outside the United States, or aggregate | | | |
| 45 | foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | 14b | | ✓ |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i> | 15 | | ✓ |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV | 16 | | ✓ |
| 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 | | ✓ |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> | 18 | | ✓ |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III | 19 | | · ✓ |
| 20a | Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> | 20a | | ∨ |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | Ė |
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II | 21 | | \ \ |

| Part | Checklist of Required Schedules (continued) | | | |
|----------|--|------------|----------|----------|
| 22 | Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on | | Yes | No |
| 22 | Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III | 22 | | ✓ |
| 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 | | | |
| 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 Schedule K. If "No," go to line 25a | 23 24a | | ✓ ✓ |
| b c | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | 24b 24c | | |
| d 25a | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> | 24d 25a | | ✓ |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I | 25b | | ✓ |
| 26 | Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i> | 26 | | √ |
| 27 | Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III | 27 | | √ |
| 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? <i>If</i> "Yes," complete Schedule L, Part IV | 28a | | √ |
| c | A family member of any individual described in line 28a? <i>If</i> "Yes," complete Schedule L, Part IV | 28b 28c | | ✓ |
| 29 30 | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> | 29 30 | ✓ | ✓ |
| 31 32 | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> | 31 | | √ √ |
| 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? <i>If</i> "Yes," <i>complete Schedule R, Part I</i> | 33 | | V |
| 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 | | √ |
| 35a b | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a 35b | | ✓ |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i> | 36 | | 1 |
| 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? <i>If "Yes," complete Schedule R, Part VI</i> | 37 | | √ |
| 38 | Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O | 38 | √ | |
| Part | | | | |
| | Check if Schedule O contains a response or note to any line in this Part V | • • | Yes | No |
| 1a b | Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable | 1 | | |
| С | Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1c | √ | |

| Part | V Statements Regarding Other IRS Filings and Tax Compliance (continued) | | 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 10 | | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? . | 2b | ✓ | |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | | ✓ |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O | 3b | | |
| 4a | 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)? | 4a | | ✓ |
| b | If "Yes," enter the name of the foreign country | | | |
| _ | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | | | |
| _ | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | | √ |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | ✓ |
| с 6а | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | | |
| Va | organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | | ✓ |
| b | If "Yes," did the organization include with every solicitation an express statement that such contributions or | Ua | | • |
| - | 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 services provided to the payor? | 7a | | ✓ |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 7b | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | - | | , |
| الم | | 7с | | √ |
| d | If "Yes," indicate the number of Forms 8282 filed during the year | 7e | | / |
| e f | Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7 6 | | ./ |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | ·/ |
| 9 h | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? | 79 7h | | <u> </u> |
| 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 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | | | |
| а | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9b | | |
| 10 | Section 501(c)(7) organizations. Enter: | | | |
| а | Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| b | Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b | | | |
| 11 | Section 501(c)(12) organizations. Enter: | | | |
| а | Gross income from members or shareholders | | | |
| b | Gross income from other sources. (Do not net amounts due or paid to other sources | | | |
| | against amounts due or received from them.) | | | |
| 12a | Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | | |
| b | If "Yes," enter the amount of tax-exempt interest received or accrued during the year | | | |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? | 120 | | |
| а | Note: See the instructions for additional information the organization must report on Schedule O. | 13a | | |
| b | Enter the amount of reserves the organization is required to maintain by the states in which | | | |
| | the organization is licensed to issue qualified health plans | | | |
| С | Enter the amount of reserves on hand | | | |
| 14a | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | | √ |
| | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O. | 14b | | |
| 15 | Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or | | | |
| | excess parachute payment(s) during the year? | 15 | | ✓ |
| | If "Yes," see the instructions and file Form 4720, Schedule N. | | | |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? | 16 | | \ |
| | If "Yes," complete Form 4720, Schedule O. | | | |
| 17 | Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities | 7 | | |
| | that would result in the imposition of an excise tax under section 4951, 4952, or 4953? | 17 | | |
| | If "Yes," complete Form 6069. | | | |

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a

Part VI

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year. . . 1a 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 O. Enter the number of voting members included on line 1a, above, who are independent . 1b 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 6 6 1 Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **10a** Did the organization have local chapters, branches, or affiliates? 10a 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 **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 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy? 13 14 14 Did the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a 1 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed wi 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Own website ☐ Another's website ☐ 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, 19 and financial 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. 20 Tracy Hames, (608)250-9971

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See 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 no | r any relate | d org | aniz | atic | n c | ompe | nsa | ated any current | officer, director, | or trustee. |
|---|---|--------------------------------|-----------------------|---------------|--------------|---------------------------------|--------|---|--|---|
| | | | | (0 | C) | | | | | |
| (A) Name and title | (B) Average hours | box, | unles | neck ss pe | rson | e than o is both or/trust | n an | (D) Reportable compensation | (E) Reportable compensation | (F) Estimated amount of other |
| | per week (list any hours for related organizations below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | Former | from the organization (W-2/ 1099-MISC/ 1099-NEC) | from related organizations (W-2/ 1099-MISC/ 1099-NEC) | compensation from the organization and related organizations |
| Tracy Hames | 40.00 | | | | | | | | | |
| Executive Director | 0.00 | ✓ | | | | | | 70,000 | 0 | 4,200 |
| Gretchen Benjamin Secretary | 0.05 0.00 | · / | | | | | | 0 | 0 | 0 |
| Linn Duesterbeck | 0.50 | , | | | | | | | | |
| Board Member | 0.00 | 1 | | | | | | 0 | 0 | 0 |
| Susan Schumacher | 0.50 | | | | | | | | | , |
| Board Member | 0.00 | ✓ | | | | | | 0 | 0 | 0 |
| Nicole Staskowski | 0.50 | | | | | | | | | |
| Board Member | 0.00 | ✓ | | | | | | 0 | 0 | 0 |
| Alison Pena | 1.00 | | | | | | | | | |
| Chair | 0.00 | | | ✓ | | | | 0 | 0 | 0 |
| Jim Ruwaldt | 1.00 | | | | | | | | | |
| Vice chair | 0.05 | | | ✓ | | | | 0 | 0 | 0 |
| R Tod Highsmith | 1.00 | | | | | | | | | |
| Treasurer | 0.00 | | | ✓ | | | | 0 | 0 | 0 |
| | | | | | | | | | | |
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| | | | | | | | | | | |

| Part | VII Section A. Officers, Directors, | Trustees, | Key l | Em | plo | yee | s, an | d F | lighest Compe | ensated Empl | oyees (continued) |
|-------|---|------------------------|-----------------------------------|----------------|---------|--------------|------------------------------|--------|-----------------------|----------------------------------|---------------------------|
| | | | | | (6 | C) | | | | | |
| | (A) | (B) | (do n | ot ch | | ition | e than d | nne | (D) | (E) | (F) |
| | Name and title | Average | box, | unles | ss pe | erson | is both | n an | Reportable | Reportable | Estimated amount |
| | | hours per week | | I — | _ | 1 | or/trust | | compensation from the | compensation from related | of other compensation |
| | | (list any hours for | ndiv or di | nstit | Officer | e | empl High | Former | organization (W-2/ | organizations (W-2 1099-MISC/ | from the organization and |
| | | related | Individual or director | Institutional | ª | dme | est c | ler | 1099-NEC) | 1099-NEC) | related organizations |
| | | organizations below | Individual trustee or director | า <u>al</u> tr | | Key employee | omp | | | | |
| | | dotted line) | stee | trustee | | 0 | Highest compensated employee | | | | |
| | | | | ď | | | ted. | | | | |
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| | | | - | | | | | | | | |
| 1b | Subtotal | | ٠ | ٠. | ٠. | | | | 70,000 | (| 4,200 |
| С | Total from continuation sheets to Part | VII, Section | n A | | | | | | | | ,,=== |
| d | Total (add lines 1b and 1c) | | | | | | | | 70,000 | (| 1, |
| 2 | Total number of individuals (including | | limite | ed t | to t | thos | se list | ted | above) who re | eceived more | than \$100,000 of |
| | reportable compensation from the organ | ızatıon | | | | | | | 0 | | |
| 3 | Did the organization list any former | officer dire | actor | tri | eto | ا م | (0)/ 0 | mn | lovee or higher | st compensate | Yes No |
| 3 | employee on line 1a? If "Yes," complete | | | | | | | - | | | 3 🗸 |
| 4 | For any individual listed on line 1a, is the | | | | | | | | | | |
| | organization and related organizations | | | | | | | | | | |
| | individual | | | | | | | | | | 4 ✓ |
| 5 | Did any person listed on line 1a receive of | | | | | | | | | | |
| Cooti | for services rendered to the organization | ? IT Yes, C | compi | ete | SCI | ieai | ile J T | or s | such person . | | 5 |
| 1 | on B. Independent Contractors Complete this table for your five high | nest comp | ensati | ed | inde | ene | ndent | CC | ontractors that r | received more | than \$100,000 of |
| · | compensation from the organization. Rep | | | | | | | | | | |
| | (A) | | | | | | | | (B) | | (C) |
| | Name and business add | Iress | | | | | | | Description of serv | vices | Compensation |
| None | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| 2 | Total number of independent contractor | ors (includi | ng bu | ıt n | ot | limit | ted to | th | nose listed abov | e) who | |
| | received more than \$100,000 of compens | • | - | | | | | | 0 | | |

Page 8

Part VIII Statement of Revenue

| | | Check if Schedule O contains a resp | oons | se or note to an | y line in this Pa | rt VIII.... | | 🗆 |
|---|----------|--|-------------|------------------|-----------------------------|--|--------------------------------------|--|
| | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512–514 |
| is, | 1a | Federated campaigns | 1a | 8,027 | | | | |
| and | b | Membership dues | 1b | 0 | | | | |
| اع ق | С | Fundraising events | 1c | 0 | | | | |
| fts, | d | Related organizations | 1d | 0 | | | | |
| <u>i</u> : | е | | 1e | 271,258 | | | | |
| Sin | f | All other contributions, gifts, grants, | | | | | | |
| utic | | <u> </u> | 1f | 609,786 | | | | |
| 흔히 | g | Noncash contributions included in | | | | | | |
| Contributions, Gifts, Grants, and Other Similar Amounts | | | 1g | 189,402 | | | | |
| <u>0 %</u> | h | Total. Add lines 1a-1f | | Business Code | 889,071 | | | |
| ا بو | 20 | Coiomas Confessora Attendance Food | - | | CO 242 | 60.242 | | |
| į ķ | 2a | Science Conference Attendance Fees Occasional Merchandise Sales | | 541900 541900 | 68,343 | 68,343 | 0 | 0 |
| gram Ser Revenue | b | Occasional Merchandise Sales | | 541900 | 477 | 477 | 0 | 0 |
| Z M | c d | | | | | | | |
| gra Re | u e | | | | | | | |
| Program Service Revenue | f | All other program service revenue . | | | 0 | 0 | 0 | 0 |
| - | g g | Total. Add lines 2a–2f | _ | | 68,820 | Ü | Ü | |
| | 3 | Investment income (including divide | | | 55,525 | | | |
| | | other similar amounts) | | | 271 | 0 | 0 | 271 |
| | 4 | Income from investment of tax-exempt | t bor | nd proceeds | 0 | 0 | 0 | 0 |
| | 5 | Royalties <u></u> | | | 0 | 0 | 0 | 0 |
| | | (i) Real | | (ii) Personal | | | | |
| | 6a | Gross rents 6a | | | | | | |
| | b | Less: rental expenses 6b | | | | | | |
| | С | Rental income or (loss) 6c | 0 | 0 | | | | |
| | _d | | | | | | | |
| | 7a | Gross amount from (i) Securities | 5 | (ii) Other | | | | |
| | | sales of assets other than inventory 7a | 0 | О | | | | |
| | h | other than inventory 7a Less: cost or other basis | | | | | | |
| Revenue | b | and sales expenses . 7b | 0 | o | | | | |
| Š | С | Gain or (loss) 7c | 0 | 0 | | | | |
| | d | Net gain or (loss) | | | 0 | 0 | 0 | 0 |
| Other | 8a | Gross income from fundraising | | | | - | - | |
| ნ ∣ | - | events (not including \$ 0 | | | | | | |
| | | of contributions reported on line | | | | | | |
| | | 1c). See Part IV, line 18 | 8a | | | | | |
| | b | · | 8b | | | | | |
| | С | Net income or (loss) from fundraising | even | nts | | | | |
| | 9a | Gross income from gaming | | | | | | |
| | _ | <u> </u> | 9a | | | | | |
| | | | 9b | | | | | |
| | с 10а | Net income or (loss) from gaming active Gross sales of inventory, less | vities | 5 | | | | |
| | IUa | | l0a | | | | | |
| | b | <u> </u> | 0b | | | | | |
| | C | Net income or (loss) from sales of inve | | v l | | | | |
| s | | . , | | Business Code | | | | |
| on e | 11a | Credit card rewards | ļ | 900099 | 2,143 | 0 | 0 | 2,143 |
| scellaneo Revenue | b | Reimbursement of Staff dev. tuition | | 900099 | 12,000 | 0 | 0 | 12,000 |
| | С | Gain on lease extinguishment | | 900099 | 937 | 0 | 0 | 937 |
| Miscellaneous Revenue | d | All other revenue | . L | | 0 | 0 | 0 | 0 |
| 2 | е | Total. Add lines 11a-11d | | | 15,080 | | | |
| | 12 | Total revenue. See instructions . | | | 973.242 | 68.820 | 0 | 15.351 |

Part IX Statement of Functional Expenses

| Section 501(c)(3) and 501(c)(4) | organizations must complete a | all columns. All other organizations must complete column (A). | |
|---------------------------------|-------------------------------|--|--|
| 0, 1,60, | | | |

| - | Check if Schedule O contains a response or note to any line in this Part IX | | | | | | | | | |
|----------|---|------------------|--------------------------|---------------------------------|------------------------|--|--|--|--|--|
| Do no | t include amounts reported on lines 6b, 7b, | (A) | (B) | (C) | (D) | | | | | |
| 8b, 9b | o, and 10b of Part VIII. | Total expenses | Program service expenses | Management and general expenses | Fundraising expenses | | | | | |
| 1 | Grants and other assistance to domestic organizations | | | | | | | | | |
| | and domestic governments. See Part IV, line 21 . | 0 | 0 | | | | | | | |
| 2 | Grants and other assistance to domestic individuals. See Part IV, line 22 | 0 | 0 | | | | | | | |
| 3 | Grants and other assistance to foreign | | | | | | | | | |
| | organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 | 0 | 0 | | | | | | | |
| 4 5 | Benefits paid to or for members | 0 | 0 | | | | | | | |
| _ | trustees, and key employees | 74,200 | 52,036 | 7,873 | 14,291 | | | | | |
| 6 | Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | 0 | 0 | 0 | 0 | | | | | |
| 7 | Other salaries and wages | 513,238 | 427,904 | 44,455 | 40,879 | | | | | |
| 8 | Pension plan accruals and contributions (include | | | | | | | | | |
| | section 401(k) and 403(b) employer contributions) | 29,961 | 23,912 | 2,846 | 3,203 | | | | | |
| 9 | Other employee benefits | 4,030 | 3,216 | 383 | 431 | | | | | |
| 10 | Payroll taxes | 46,599 | 37,191 | 4,427 | 4,981 | | | | | |
| 11 | Fees for services (nonemployees): | | | | | | | | | |
| а | Management | 0 | 0 | 0 | 0 | | | | | |
| b | Legal | 462 | 0 | 462 | 0 | | | | | |
| С | Accounting | 17,600 | 0 | 17,600 | 0 | | | | | |
| d | Lobbying | 12,000 | 12,000 | 0 | 0 | | | | | |
| e | Professional fundraising services. See Part IV, line 17 | 0 | | | 0 | | | | | |
| f | Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column | 0 | 0 | 0 | 0 | | | | | |
| g | (A), amount, list line 11g expenses on Schedule O.) | 54.004 | 50 700 | 4 000 | 4.450 | | | | | |
| 10 | • ' | 54,984 | 52,730 | 1,096 | 1,158 | | | | | |
| 12 13 | Advertising and promotion | 1,950 | 1,950 | 0 | 0 | | | | | |
| 14 | Information technology | 39,370 20,415 | 22,582 4,472 | 806 4,458 | 15,982 11,485 | | | | | |
| 15 | Royalties | 20,413 | 4,472 | 4,438 | 11,485 | | | | | |
| 16 | Occupancy | 37,519 | 31,146 | 2,707 | 3,666 | | | | | |
| 17 | Travel | 21,634 | 21,366 | 0 | 268 | | | | | |
| 18 | Payments of travel or entertainment expenses | 21,004 | 21,000 | 0 | | | | | | |
| | for any federal, state, or local public officials | 0 | 0 | 0 | 0 | | | | | |
| 19 | Conferences, conventions, and meetings . | 37,558 | 37,514 | 6 | 38 | | | | | |
| 20 | Interest | 0 | 0 | 0 | 0 | | | | | |
| 21 | Payments to affiliates | | | - | | | | | | |
| 22 | Depreciation, depletion, and amortization . | 4,021 | 3,209 | 382 | 430 | | | | | |
| 23 | Insurance | 6,584 | 5,416 | 568 | 600 | | | | | |
| 24 | Other expenses. Itemize expenses not covered | | | | | | | | | |
| | above. (List miscellaneous expenses on line 24e. If | | | | | | | | | |
| | line 24e amount exceeds 10% of line 25, column | | | | | | | | | |
| | (A), amount, list line 24e expenses on Schedule O.) | | | | | | | | | |
| а | Communication | 11,447 | 9,767 | 573 | 1,107 | | | | | |
| b | Service fees | 11,974 | 7,458 | 1,615 | 2,901 | | | | | |
| C | Books, subscriptions, misc | 12,589 | 10,802 | 841 | 946 | | | | | |
| d | Staff development | 1,101 | 815 | 71 | 215 | | | | | |
| e | All other expenses | 0 | | | | | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 959,236 | 765,486 | 91,169 | 102,581 | | | | | |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720) | | | | | | | | | |
| | | | | | Form 990 (2022) | | | | | |

Part X Balance Sheet

| | | Check if Schedule O contains a response or | note | to any line in this Par | t X | | 🗌 |
|-----------------------------|----------|---|---------------------|-------------------------|---------------------------------|--------|---------------------------|
| | | | | | (A) Beginning of year | | (B) End of year |
| | 1 | Cash—non-interest-bearing | | | 286,043 | 1 | 465,976 |
| | 2 | Savings and temporary cash investments | | F | 156,337 | 2 | 142,808 |
| | 3 | Pledges and grants receivable, net | [| 98,117 | 3 | 36,005 | |
| | 4 | Accounts receivable, net | | 1,764 | 4 | 79,092 | |
| | 5 | Loans and other receivables from any current of trustee, key employee, creator or founder, substa- controlled entity or family member of any of these | contributor, or 35% | | | | |
| | 6 | Loans and other receivables from other disqual | | | 0 | 5 | 0 |
| | 0 | under section 4958(f)(1)), and persons described | | | 0 | 6 | 0 |
| s | 7 | Notes and loans receivable, net | | , , , , , | 0 | 7 | 0 |
| Assets | 8 | Inventories for sale or use | | | 0 | 8 | 0 |
| As | 9 | Prepaid expenses and deferred charges | | | 18,115 | 9 | 8,819 |
| | 10a | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 32,746 | 10,110 | | 0,010 | |
| | b | Less: accumulated depreciation | 10b | 14,966 | 5,431 | 10c | 17,780 |
| | 11 | - | | | | 11 | |
| | 12 | Investments - other securities. See Part IV, line 1 | [| | 12 | | |
| | 13 | Investments-program-related. See Part IV, line | [| | 13 | | |
| | 14 | Intangible assets | | [| | 14 | |
| | 15 | Other assets. See Part IV, line 11 | | | 27,829 | 15 | 202,820 |
| | 16 | Total assets. Add lines 1 through 15 (must equa | | | 593,636 | 16 | 953,300 |
| | 17 | Accounts payable and accrued expenses | | | 33,544 | 17 | 23,532 |
| | 18 | Grants payable | | _ | 0 | 18 | 0 |
| | 19 | Deferred revenue | 0 | 19 | 0 | | |
| | 20 | Tax-exempt bond liabilities | | 0 | | 0 | |
| | 21 | Escrow or custodial account liability. Complete P | | | 0 | 21 | 0 |
| Liabilities | 22 | Loans and other payables to any current or trustee, key employee, creator or founder, substa- controlled entity or family member of any of these | antial | contributor, or 35% | | | |
| iab | | | • | | 0 | | 0 |
| _ | 23 | Secured mortgages and notes payable to unrelat | | · | 0 | | 0 |
| | 24 25 | Unsecured notes and loans payable to unrelated Other liabilities (including federal income tax, p | | | 0 | 24 | 0 |
| | 25 | parties, and other liabilities not included on lines | 17–2 | 4). Complete Part X | | | |
| | | of Schedule D | | L | 28,795 | | 213,965 |
| | 26 | Total liabilities. Add lines 17 through 25 | | | 62,339 | 26 | 237,497 |
| Net Assets or Fund Balances | | Organizations that follow FASB ASC 958, checand complete lines 27, 28, 32, and 33. | ck he | re 🔽 | | | |
| ala | 27 | Net assets without donor restrictions | | | 475,797 | 27 | 489,803 |
| d B | 28 | | | | 55,500 | 28 | 226,000 |
| · Func | | Organizations that do not follow FASB ASC 95 and complete lines 29 through 33. | 8, ch | eck here 🗌 | | | |
| ō | 29 | Capital stock or trust principal, or current funds | | [| | 29 | |
| ets | 30 | Paid-in or capital surplus, or land, building, or eq | | | | 30 | |
| 4ss | 31 | Retained earnings, endowment, accumulated inc | ome, | or other funds . | | 31 | |
| et/ | 32 | | | [| 531,297 | 32 | 715,803 |
| Ź | 33 | Total liabilities and net assets/fund balances . | | | 593,636 | 33 | 953,300 |

| Part | 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 | | 9 | 73,242 | | | |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | | 9 | 59,236 | | | |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | | 14,006 | | | |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | | 5 | 31,297 | | | |
| 5 | Net unrealized gains (losses) on investments | | | | | | | |
| 6 | Donated services and use of facilities | 6 | | | 0 | | | |
| 7 | Investment expenses | 7 | | | 0 | | | |
| 8 | Prior period adjustments | 8 | | | 0 | | | |
| 9 | Other changes in net assets or fund balances (explain on Schedule O) | 9 | | 1 | 70,500 | | | |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line | | | | | | | |
| David | 32, column (B)) | 10 | | 7 | 15,803 | | | |
| Part | Financial Statements and Reporting Check if Schoolule O centains a response or note to any line in this Part XII | | | | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | • • | · · · | Yes | No | | | |
| 1 | Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other | | | 162 | INO | | | |
| • | If the organization changed its method of accounting from a prior year or checked "Other," ex | nlain | on | | | | | |
| | Schedule O. | ., | | | | | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | . 2 | a ✓ | | | | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were cor | | | u V | | | | |
| | 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? | | . 2 | b ✓ | | | | |
| | If "Yes," check a box below to indicate whether the financial statements for the year were audi | ted o | n a 📉 | | | | | |
| | separate basis, consolidated basis, or both: | | | | | | | |
| | ☐ 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 over | | | | | | | |
| | the audit, review, or compilation of its financial statements and selection of an independent accounts | ınt? | . 2 | c | | | | |
| | If the organization changed either its oversight process or selection process during the tax year, ex | kplain | on | | | | | |
| | Schedule O. | | | | | | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set fo | rth in | the | | | | | |
| | Uniform Guidance, 2 C.F.R. Part 200, Subpart F? | | . 3 | a ✓ | <u> </u> | | | |
| b | If "Yes," did the organization undergo the required audit or audits? If the organization did not und | | | | | | | |
| | required audit or audits, explain why on Schedule O and describe any steps taken to undergo such a | udits | . 3 | - | | | | |
| | | | | - 00 | ^ | | | |

Form **990** (2022)

SCHEDULE A (Form 990)

Public Charity Status and Public Support

OMB No. 1545-0047 2022

Department of the Treasury Internal Revenue Service

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.

Open to Public Inspection

| Name of the organization | ame of the organization Employer identification number | | | | | | |
|---|--|---|-------------------------|--------------------------------------|---|---|--|
| WISCONSIN WETLANDS ASSOCIATION | | | | | 39-18 | | |
| Part I Reason for Public Cha | | | | - | | ons. | |
| The organization is not a private found | | , | | • | • | | |
| 1 A church, convention of church | • | | | | 0(b)(1)(A)(i). | | |
| 2 A school described in section | | • | • | • | | | |
| 3 A hospital or a cooperative ho | | | | | | , , , , , , , , , , , , , , , , , , , | |
| 4 A medical research organizati hospital's name, city, and star | ·e: | | | | | | |
| 5 An organization operated for section 170(b)(1)(A)(iv). (Com | | college or university | owned o | r operate | ed by a government | al unit described in | |
| 6 ☐ A federal, state, or local gover 7 ☑ An organization that normally described in section 170(b)(1 | receives a subs | tantial part of its sup | | | | n the general public | |
| 8 A community trust described | in section 170(b) | (1)(A)(vi). (Complete | Part II.) | | | | |
| 9 An agricultural research organ or university or a non-land-gra university: | ant college of agr | iculture (see instruction | ons). Ente | r the nan | ne, city, and state of | the college or | |
| 10 An organization that normally receipts from activities related support from gross investmen acquired by the organization a | I to its exempt fu It income and uni | nctions, subject to ce related business taxal | rtain exce ble incom | eptions; a ne (less se | and (2) no more than ection 511 tax) from | 33 ¹ / ₃ % of its | |
| 11 | d operated exclus | sively to test for public | c safety. | See sect i | ion 509(a)(4). | | |
| 12 An organization organized and | | | | | | | |
| one or more publicly supporte the box on lines 12a through 1 | | | | | | | |
| a Type I. A supporting orgation the supported organization supporting organization. Y | n(s) the power to | regularly appoint or e | lect a ma | jority of t | | | |
| b Type II. A supporting orga control or management of organization(s). You must | the supporting o | rganization vested in | the same | | | | |
| c Type III functionally integ | grated. A suppor | ting organization oper | ated in c | | | ally integrated with, | |
| d Type III non-functionally | | | | | | orted organization(s) | |
| that is not functionally inte requirement (see instruction | grated. The orga | nization generally mu | st satisfy | a distribu | ıtion requirement an | | |
| e Check this box if the orgation functionally integrated, or | | | | | | e II, Type III | |
| f Enter the number of supported | organizations . | | | | | | |
| g Provide the following information | n about the supp | ported organization(s). | | | | | |
| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1–10 above (see instructions)) | listed in you | rganization ur governing ment? | (v) Amount of monetary support (see instructions) | (vi) Amount of other support (see instructions) | |
| | | | Yes | No | | | |
| (A) | | | | | | | |
| (B) | | | | | | | |
| (C) | | | | | | | |
| (D) | | | | | | | |
| (E) | | | | | | | |
| Total | | | | | | | |

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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.) Section A. Public Support Calendar year (or fiscal year beginning in) **(b)** 2019 (a) 2018 (c) 2020 (d) 2021 (e) 2022 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . 829,387 760,964 612,617 743,698 889,070 3,835,736 Tax revenues levied for the 2 organization's benefit and either paid to or expended on its behalf 0 0 0 0 0 0 The value of services or facilities 3 furnished by a governmental unit to the organization without charge 0 0 Total. Add lines 1 through 3 . . . 4 612,617 829,387 743,698 760,964 889,070 3,835,736 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) 609,818 **Public support.** Subtract line 5 from line 4 3,225,918 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 7 Amounts from line 4 889,070 612,617 829,387 743.698 760,964 3,835,736 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 233 299 204 195 271 1,202 Net income from unrelated business 9 activities, whether or not the business is regularly carried on 0 0 0 0 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 706 0 0 2,849 3,555 **Total support.** Add lines 7 through 10 11 3,840,493 Gross receipts from related activities, etc. (see instructions) 12 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) 13 Section C. Computation of Public Support Percentage Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) 84 % 14 Public support percentage from 2021 Schedule A, Part II, line 14 15 331/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported 10%-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

18

Schedule A (Form 990) 2022 Page **3**

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.)

| Secti | on A. Public Support | | | , | | | |
|---------|--|-----------------|-----------------|------------------|-----------------|-----------------|-------------|
| | dar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees | , , | | . , | | | |
| _ | received. (Do not include any "unusual grants.") | | | | | | |
| 2 | Gross receipts from admissions, merchandise sold or services performed, or facilities | | | | | | |
| | furnished in any activity that is related to the | | | | | | |
| _ | organization's tax-exempt purpose | | | | | | |
| 3 | Gross receipts from activities that are not an unrelated trade or business under section 513 | | | | | | |
| 4 | Tax revenues levied for the | | | | | | |
| | organization's benefit and either paid to or expended on its behalf | | | | | | |
| 5 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to the | | | | | | |
| • | organization without charge | | | | | | |
| 6 7a | Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 | | | | | | |
| 1 a | received from disqualified persons . | | | | | | |
| b | Amounts included on lines 2 and 3 | | | | | | |
| D | received from other than disqualified | | | | | | |
| | persons that exceed the greater of \$5,000 | | | | | | |
| | or 1% of the amount on line 13 for the year | | | | | | |
| С | Add lines 7a and 7b | | | | | | |
| 8 | Public support. (Subtract line 7c from | | | | | | |
| | line 6.) | | | | | | |
| | on B. Total Support | | | | | | |
| | dar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| 9 | Amounts from line 6 | | | | | | |
| 10a | Gross income from interest, dividends, payments received on securities loans, rents, | | | | | | |
| | royalties, and income from similar sources . | | | | | | |
| b | Unrelated business taxable income (less | | | | | | |
| | section 511 taxes) from businesses | | | | | | |
| | acquired after June 30, 1975 | | | | | | |
| С | Add lines 10a and 10b | | | | | | |
| 11 | Net income from unrelated business | | | | | | |
| | activities not included on line 10b, whether | | | | | | |
| | or not the business is regularly carried on | | | | | | |
| 12 | Other income. Do not include gain or loss from the sale of capital assets | | | | | | |
| | (Explain in Part VI.) | | | | | | |
| 13 | Total support. (Add lines 9, 10c, 11, | | | | | | |
| . • | and 12.) | | | | | | |
| 14 | First 5 years. If the Form 990 is for the | organization' | s first, second | , third, fourth, | or fifth tax ye | ar as a sectio | n 501(c)(3) |
| | organization, check this box and stop he | | | | | | 🗆 |
| Secti | on C. Computation of Public Suppor | t Percentag | е | | | | |
| 15 | Public support percentage for 2022 (line 8 | | | | | | <u>%</u> |
| 16 | Public support percentage from 2021 Sch | | | | | 16 | <u>%</u> |
| | on D. Computation of Investment In | | | | (6) | | |
| 17 | Investment income percentage for 2022 (| | | - | | | <u>%</u> |
| 18 | Investment income percentage from 2021 331/3% support tests—2022. If the organ | | | | | | % and line |
| 19a | 17 is not more than 33 ¹ / ₃ %, check this box | | | | | | |
| b | 33 ¹ / ₃ % support tests—2021. If the organiz | | _ | • | | - | _ |
| | line 18 is not more than 33 ¹ / ₃ %, check this l | | | | | | |
| 20 | Private foundation. If the organization di | | _ | • | | | _ |

Schedule A (Form 990) 2022 Page 4

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.)

Se

| Secti | on A. All Supporting Organizations | | V | NI. |
|-------|---|----------|-----|-----|
| 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. | 1 | Yes | NO |
| 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). | 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. | 3a | | |
| 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. | 3b | | |
| С | 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. | 3c | | |
| 4a | Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below. | 4a | | |
| 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. | 4b | | |
| С | 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. | 4c | | |
| 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? | 5a 5b | | |
| С | Substitutions only. Was the substitution the result of an event beyond the organization's control? | 5c | | |
| 6 | Did the organization provide support (whether in the form of grants or the provision of services or facilities) to 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? <i>If "Yes," provide detail in Part VI.</i> | 6 | | |
| 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). | 7 | | |
| 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). | 8 | | |
| 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 . | 9a | | |
| 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 . | 9b | | |
| С | Did a disqualified 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 . | 9с | | |
| 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

b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to

supporting organizations)? If "Yes," answer line 10b below.

determine whether the organization had excess business holdings.)

10a

10b

Schedule A (Form 990) 2022 Page 5 **Supporting Organizations** (continued) Part IV Yes No Has the organization accepted a gift or contribution from any of the following persons? 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 **b** A family member of a person described on line 11a above? 11b A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. 11c **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 Part VI 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 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 Section C. Type II Supporting Organizations Yes No 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 Section 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 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 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 supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. *Complete line 3 below.* The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions). Activities Test. Answer lines 2a and 2b below. Yes No 2 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. 2a 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. 2b Parent of Supported Organizations. Answer lines 3a and 3b below. 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. 3a

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.

3b

Schedule A (Form 990) 2022

| 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). S instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E Section A — Adjusted Net Income (A) Prior Year (B) Current Y (optional) 1 Net short-term capital gain 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 4 Add lines 1 through 3. 5 Depreciation and depletion 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) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B — Minimum Asset Amount (A) Prior Year (B) Current Y (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): a Average monthly value of securities b Average monthly value of other non-exempt-use assets 1c (Fair market value of other non-exempt-use assets 1c (Fair market value of other non-exempt-use assets 1d (Fair market value of other non-exempt-use assets 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Acquisition indebtedness applicable to non-exempt-use assets 3 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | rage | itions | ianiza | rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Org. | |
|---|--------------------------------|-------------------------|--------|--|------|
| instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E Section A — Adjusted Net Income (A) Prior Year (B) Current Y (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. 5 Depreciation and depletion 5 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 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) Section B — Minimum Asset Amount (A) Prior Year (B) Current Y (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): a Average monthly value of securities b Average monthly cash balances 1 b Average monthly value of other non-exempt-use assets 1 c d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | in Part VI\ See | | | | |
| Section A—Adjusted Net Income (A) Prior Year (B) Current N (optional) 1 Net short-term capital gain 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 Add lines 1 through 3. 5 Depreciation and depletion 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 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 Potter expenses (see instructions) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B—Minimum Asset Amount (A) Prior Year (B) Current N (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): a Average monthly value of securities 1 Average monthly value of securities 1 Average monthly value of other non-exempt-use assets 1 C Total (add lines 1a, 1b, and 1c) 1 Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | | | | | - |
| 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 4 Add lines 1 through 3. 5 Depreciation and depletion 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) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section 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): a Average monthly value of securities b Average monthly cash balances 1b C Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 9 Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebteness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | (B) Current Year (optional) | · | | | Sect |
| 3 Other gross income (see instructions) 4 Add lines 1 through 3. 5 Depreciation and depletion 5 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 Other expenses (see instructions) 7 Other expenses (see instructions) 7 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B—Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | | | 1 | Net short-term capital gain | 1 |
| 4 Add lines 1 through 3. 5 Depreciation and depletion 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) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B—Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities b Average monthly cash balances c Fair market value of other non-exempt-use assets t C d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 3 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). 4 | | | 2 | Recoveries of prior-year distributions | 2 |
| 5 Depreciation and depletion 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) 7 Other expenses (see instructions) 7 Other expenses (see instructions) 7 Section 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): a Average monthly value of securities b Average monthly cash balances c 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 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | | | 3 | Other gross income (see instructions) | 3 |
| 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) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B—Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities b Average monthly value of other non-exempt-use assets c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | | | 4 | Add lines 1 through 3. | 4 |
| of gross income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 Section B – Minimum Asset Amount 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities b Average monthly cash balances c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | | | 5 | Depreciation and depletion | 5 |
| 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) Section B — Minimum Asset Amount (A) Prior Year (B) Current Y (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): a Average monthly value of securities b Average monthly cash balances c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | | | | of gross income or for management, conservation, or maintenance of | 6 |
| Section B – Minimum Asset Amount (A) Prior Year (B) Current Y (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): a Average monthly value of securities b Average monthly cash balances c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | | | 7 | | 7 |
| 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): a Average monthly value of securities b Average monthly cash balances c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | | | 8 | Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 |
| instructions for short tax year or assets held for part of year): a Average monthly value of securities b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 3 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | (B) Current Year (optional) | (A) Prior Year | | ction B-Minimum Asset Amount | Sect |
| a Average monthly value of securities b Average monthly cash balances c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets Subtract line 2 from line 1d. Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | | | | The second secon | 1 |
| c Fair market value of other non-exempt-use assets d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Subtract line 2 from line 1d. 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | | | 1a | Average monthly value of securities | a |
| d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | | | 1b | b Average monthly cash balances | b |
| e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | | | 1c | c Fair market value of other non-exempt-use assets | С |
| (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | | | 1d | d Total (add lines 1a, 1b, and 1c) | d |
| 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). | | | | · · | е |
| 3 Subtract line 2 from line 1d. 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions). | | | 2 | | 2 |
| see instructions). | | | 3 | | 3 |
| | | | 4 | ,,,,, | 4 |
| | | - | 5 | | 5 |
| 6 Multiply line 5 by 0.035. | | | 6 | | 6 |
| 7 Recoveries of prior-year distributions 7 | | | 7 | | 7 |
| 8 Minimum Asset Amount (add line 7 to line 6) 8 | | | 8 | | 8 |
| Section C-Distributable Amount Current Ye | Current Year | | | ction C—Distributable Amount | Sect |
| 1 Adjusted net income for prior year (from Section A, line 8, column A) 1 | | | 1 | Adjusted net income for prior year (from Section A, line 8, column A) | 1 |
| 2 Enter 0.85 of line 1. 2 | | | 2 | Enter 0.85 of line 1. | 2 |
| 3 Minimum asset amount for prior year (from Section B, line 8, column A) 3 | | | 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 | | 4 |
| 5 Income tax imposed in prior year 5 | | | 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 | Distributable Amount. Subtract line 5 from line 4, unless subject to | 6 |
| 7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions) | g organization | egrated Type III suppor | | ☐ Check here if the current year is the organization's first as a non-functiona | 7 |

Schedule A (Form 990) 2022 Page 7

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 3 Administrative expenses paid to accomplish exempt purposes of supported organizations Amounts paid to acquire exempt-use assets 4 5 5 Qualified set-aside amounts (prior IRS approval required - provide details in **Part VI**) Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2022 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) **Underdistributions** Distributable Section E—Distribution Allocations (see instructions) **Excess Distributions** Pre-2022 Amount for 2022 Distributable amount for 2022 from Section C, line 6 2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2022 a From 2017 From 2018 **c** From 2019 **d** From 2020 **e** From 2021 Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2022 distributable amount Carryover from 2017 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2022 from Section D, line 7: Applied to underdistributions of prior years Applied to 2022 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result 5 greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2023. Add lines 3j and 4c. Breakdown of line 7: Excess from 2018 . . . Excess from 2019 . . . Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 . . .

Schedule A (Form 990) 2022 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 - credit card rewards reimbursements

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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

• Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization **Employer identification number** WISCONSIN WETLANDS ASSOCIATION INC 39-1852601 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for 1 definition of "political campaign activities." Volunteer hours for political campaign activities. See instructions Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . Yes No Yes No If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function 2 Enter the amount of the filing organization's funds contributed to other organizations for section Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, 3 4 Did the filing organization file Form 1120-POL for this year? Yes Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received and funds. If none, enter -0-. promptly and directly delivered to a separate political organization. If none, enter -0-. (1) (2)(3) (4)(5) (6)

| Sched | ule C (Form 990) 2022 | | | | | Page 2 |
|------------|--|--------------------|---|---|----------------------------------|------------------------------------|
| Part | II-A Complete if the organization section 501(h)). | on is exempt u | ınder section 50 | 01(c)(3) and file | d Form 5768 (ele | |
| | heck if the filing organization belongs EIN, expenses, and share of exc | ess lobbying ex | penditures). | | ed group member's | s name, address, |
| B C | heck $\;\square$ if the filing organization checked | | • | sions apply. | | |
| | (The term "expenditures" m | | paid or incurred. | | (a) Filing organization's totals | (b) Affiliated group totals |
| 1a | Total lobbying expenditures to influence | public opinion | (grassroots lobbyi | ng) | 0 | |
| b | Total lobbying expenditures to influence | e a legislative bo | dy (direct lobbying | g) | 15,055 | |
| С | Total lobbying expenditures (add lines | a and 1b) . | | | 15,055 | |
| d | Other exempt purpose expenditures . | | | | 944,181 | |
| е | Total exempt purpose expenditures (ad | d lines 1c and 1 | d) | | 959,236 | |
| f | Lobbying nontaxable amount. Enter columns. | the amount fr | om the following | table in both | 168,885 | |
| | If the amount on line 1e, column (a) or (b) is | : The lobbying | nontaxable amoun | t is: | | |
| | Not over \$500,000 | | nount on line 1e. | | | |
| | Over \$500,000 but not over \$1,000,000 | \$100,000 plus | 15% of the excess | over \$500,000. | | |
| | Over \$1,000,000 but not over \$1,500,000 | | 10% of the excess | | | |
| | Over \$1,500,000 but not over \$17,000,000 | | 5% of the excess or | | | |
| | Over \$17,000,000 | \$1,000,000. | | * | | |
| g | Grassroots nontaxable amount (enter 2 | . , , | | | 42,221 | |
| h | Subtract line 1g from line 1a. If zero or I | · | | | 0 | |
| i | Subtract line 1f from line 1c. If zero or le | | | | 0 | |
| i | If there is an amount other than zero | | | | | |
| | reporting section 4911 tax for this year | | | - | | Yes No |
| | (Some organizations that made a se | ction 501(h) ele | Period Under Sec ection do not have uctions for lines | e to complete all | of the five colum | ns below. |
| | Lobbyin | g Expenditures | During 4-Year Av | veraging Period | | |
| | Calendar year (or fiscal year beginning in) | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) Total |
| 2a | Lobbying nontaxable amount | 125,506 | 142,709 | 142,716 | 168,885 | 579,816 |
| b | Lobbying ceiling amount (150% of line 2a, column (e)) | | | | | 869,724 |
| c | Total lobbying expenditures | 45,547 | 21,754 | 21,035 | 15,055 | 103,391 |
| d | | 31,377 | 35,677 | 35,679 | 42,221 | 144,954 |
| е | Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | 217,431 |

0

0

f Grassroots lobbying expenditures

Schedule C (Form 990) 2022

Schedule C (Form 990) 2022 Page **3**

| Part | II-B Complete if the organization is exempt under section 501(c)(3) and has NOT f (election under section 501(h)). | iled | Form | 5768 | | |
|-----------|--|---------|---------------|------------|-------|-------|
| For e | ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed | (a | a) | | (b) | |
| | iption of the lobbying activity. | Yes | No | Ar | noun | t |
| 1 | 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? | | | | | |
| b | Media advertisements? | | | | | |
| c d | Mailings to members, legislators, or the public? | | | | | |
| e | Publications, or published or broadcast statements? | | | | | |
| f | Grants to other organizations for lobbying purposes? | | | | | |
| g g | Direct contact with legislators, their staffs, government officials, or a legislative body? | | | | | |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | | | |
| i | Other activities? | | | | | |
| j | Total. Add lines 1c through 1i | | | | | |
| 2a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | | | | |
| b | If "Yes," enter the amount of any tax incurred under section 4912 | | | | | |
| С | 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) 501(c)(6). | (5), (| or se | ction | | |
| | | | | | Yes | No |
| 1 | Were substantially all (90% or more) dues received nondeductible by members? | | | 1 | | |
| 2 | Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | | 3 | | |
| 3 Part | Did the organization agree to carry over lobbying and political campaign activity expenditures from the Complete if the organization is exempt under section 501(c)(4), section 501(c) | | | | | |
| rare | 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OF answered "Yes." | | | | ine 3 | B, is |
| 1 | Dues, assessments and similar amounts from members | | 1 | | | |
| 2 | Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid). | of | | | | |
| а | Current year | | 2a | | | |
| b | Carryover from last year | | 2b | | | |
| C | Total | ٠ | 2c | | | |
| 3 | Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues . | | 3 | | | |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby and political expenditures next year? | | 4 | | | |
| 5 | Taxable amount of lobbying and political expenditures. See instructions | | <u>4</u> 5 | | | |
| Pari | | • | 3 | | | |
| Provid | le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated ground instructions); and Part II-B, line 1. Also, complete this part for any additional information. | up list | t); Par | t II-A, Ii | nes 1 | and |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Attach to Form 990.

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

| Name o | f the organization | | Employer identification number |
|--------|--|---|--|
| WISC | ONSIN WETLANDS ASSOCIATION INC | | 39-1852601 |
| Par | t I Organizations Maintaining Donor Advi | sed Funds or Other Similar Fund | ds or Accounts. |
| | Complete if the organization answered " | | |
| | Complete if the organization answered | (a) Donor advised funds | (b) Funds and other accounts |
| | | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | | |
| 2 | Aggregate value of contributions to (during year) . | | |
| 3 | Aggregate value of grants from (during year) | | |
| 4 | Aggregate value at end of year | | |
| 5 | Did the organization inform all donors and donor | advisors in writing that the assets he | ld in donor advised |
| 3 | funds are the organization's property, subject to the | | |
| • | | | — |
| 6 | Did the organization inform all grantees, donors, ar | | |
| | only for charitable purposes and not for the benefit | | |
| | conferring impermissible private benefit? | | · · · · · · 🗌 Yes 🗌 No |
| Par | Conservation Easements. | | |
| | Complete if the organization answered " | Yes" on Form 990 Part IV line 7 | |
| | · | | |
| 1 | Purpose(s) of conservation easements held by the c | | |
| | Preservation of land for public use (for example, recre | | f a historically important land area |
| | ☐ Protection of natural habitat | ☐ Preservation o | f a certified historic structure |
| | ☐ Preservation of open space | | |
| 2 | Complete lines 2a through 2d if the organization hel | d a qualified conservation contribution | n in the form of a conservation |
| | easement on the last day of the tax year. | · | Held at the End of the Tax Year |
| _ | • | | |
| а | | | |
| b | Total acreage restricted by conservation easements | | |
| С | Number of conservation easements on a certified hi | | |
| d | Number of conservation easements included in (c) a | acquired after July 25, 2006, and not o | on a |
| | historic structure listed in the National Register . | | · 2d |
| 3 | Number of conservation easements modified, trans | ferred released extinguished or term | |
| | tax year | norroa, roroadda, oxungaronda, or torr | milated by the organization during the |
| | | | |
| 4 | Number of states where property subject to conserv | | |
| 5 | Does the organization have a written policy reg | | |
| | violations, and enforcement of the conservation eas | ements it holds? | · · · · · · L Yes L No |
| 6 | Staff and volunteer hours devoted to monitoring, inspec | ting, handling of violations, and enforcing | g conservation easements during the year |
| | | | , |
| 7 | Amount of expenses incurred in monitoring, inspecting | a handling of violations, and enforcing | conservation easements during the year |
| • | Amount of expenses incurred in monitoring, inspecting | g, nariding of violations, and emorning t | conservation easements during the year |
| _ | Described and the second secon | O(-1) - 1 +i - f - +i | +: 4.70/I-\/ 4\/D\/:\ |
| 8 | Does each conservation easement reported on line 2 | • • | |
| | and section 170(h)(4)(B)(ii)? | | |
| 9 | In Part XIII, describe how the organization repo | rts conservation easements in its r | evenue and expense statement and |
| | balance sheet, and include, if applicable, the text of | of the footnote to the organization's fi | nancial statements that describes the |
| | organization's accounting for conservation easemer | nts. | |
| Part | III Organizations Maintaining Collections | of Art Historical Treasures or | Other Similar Assets |
| ı aı | Complete if the organization answered " | | other ommar Accordi |
| | | <u>`</u> | |
| 1a | If the organization elected, as permitted under FAS | • | |
| | of art, historical treasures, or other similar assets | | |
| | service, provide in Part XIII the text of the footnote t | o its financial statements that describe | es these items. |
| b | If the organization elected, as permitted under FAS | B ASC 958, to report in its revenue s | statement and balance sheet works of |
| | art, historical treasures, or other similar assets held | • | |
| | provide the following amounts relating to these item | • | |
| | | | |
| | (i) Revenue included on Form 990, Part VIII, line 1 | | \$ |
| | (ii) Assets included in Form 990, Part X | | \$ |
| 2 | If the organization received or held works of art, | | |
| | following amounts required to be reported under FA | | <u> </u> |
| _ | • | <u>~</u> | ¢ |
| a | Revenue included on Form 990, Part VIII, line 1 . | | |
| b | Assets included in Form 990, Part X | | \$ |

| Schedu | le D (Form 990) 2022 | | | | | | | Page 2 |
|--------|--|-------------------------------|----------------|---|----------|--------------------------|--------------------|------------|
| Part | Organizations Maintaining | Collections of A | rt, His | torical Treasure | s, or O | ther Similar As | sets (con | tinued) |
| 3 | Using the organization's acquisition, a collection items (check all that apply): | accession, and other | er recor | ds, check any of t | he follo | wing that make s | ignificant (| use of its |
| а | ☐ Public exhibition | | d | Loan or exchan | ae proa | ram | | |
| b | ☐ Scholarly research | | e | | | | | |
| c | ☐ Preservation for future generations | | | | | | | |
| 4 | Provide a description of the organizat | ion's collections ar | nd expla | in how they furthe | r the or | ganization's exen | not purpos | se in Par |
| | XIII. | | | , | | 9 | 1 1 1 1 1 1 1 | |
| 5 | During the year, did the organization assets to be sold to raise funds rather | | | | | | ır □ Yes | □No |
| Part | | | ' | | | | | |
| | Complete if the organization 990, Part X, line 21. | | on For | m 990, Part IV, lir | ne 9, or | reported an am | nount on I | Form |
| 1a | Is the organization an agent, trustee, included on Form 990, Part X? | | | - | | | ot ☐ Yes | ☐ No |
| b | If "Yes," explain the arrangement in Pa | art XIII and complet | e the fo | llowing table: | | | | |
| | | | | | | A | mount | |
| С | Beginning balance | | | | 10 | С | | |
| d | Additions during the year | | | | 10 | d | | |
| е | Distributions during the year | | | | 10 | е | | |
| f | Ending balance | | | | 1 | f | | |
| 2a | Did the organization include an amoun | | | | custodia | al account liability | ? 🗌 Yes | ☐ No |
| b | If "Yes," explain the arrangement in Pa | | | | | | | |
| Par | | | | • | | | | |
| | Complete if the organization | answered "Yes" | on For | m 990, Part IV, lir | ne 10. | | | |
| | · | (a) Current year | (b) Pri | or year (c) Two ye | ars back | (d) Three years back | (e) Four y | ears back |
| 1a | Beginning of year balance | | | | | | | |
| b | Contributions | | | | | | | |
| С | Net investment earnings, gains, and losses | | | | | | | |
| d | Grants or scholarships | | | | | | | |
| e | Other expenditures for facilities and | | | | | | | |
| | programs | | | | | | | |
| f | Administrative expenses | | | | | | | |
| g | End of year balance | | | | | | | |
| 2 | Provide the estimated percentage of the | he current vear end | l halanc | e (line 1a. column (| a)) held | ac. | | |
| a | Board designated or quasi-endowmen | | | e (iii e rg, colairii (| ajj Hola | чо. | | |
| b | Permanent endowment | " % | , | | | | | |
| C | Term endowment % | 70 | | | | | | |
| · | The percentages on lines 2a, 2b, and 2 | o should oqual 10 | 1 0% | | | | | |
| За | Are there endowment funds not in the | - | | zation that are held | l and ad | Iministered for th | Δ | |
| Ja | organization by: | possession or the | organi | zation that are ner | i and ac | arriiriisterea ior tri | _ | es No |
| | | | | | | | | 62 140 |
| | (i) Unrelated organizations | | | | | | 3a(i) | |
| | · , | | | | | | 3a(ii) | |
| b | If "Yes" on line 3a(ii), are the related or | - | | | · | | 3b | |
| 4 | Describe in Part XIII the intended uses | | r's endo | wment funds. | | | | |
| Part | | | | 000 D+ N/ P | | 0 000 | D=.4 V !! | 10 |
| | Complete if the organization | | | | 1 | | | |
| | Description of property | (a) Cost or othe (investment) | | (b) Cost or other basis (other) | | Accumulated lepreciation | (d) Book | value |
| | | (IIIVESUITE) | | , , | | ioprodiation | | |
| 1a | Land | | 0 | 0 | | | | 0 |
| b | Buildings | | 0 | 0 | 1 | 0 | | 0 |
| _ | | | | | | n i | | |

0

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) .

0

0 0 14,966 17,780 0 0 Schedule D (Form 990) 2022 Page **3**

| Part VII | Investments – Other Securities. Complete if the organization answered "Yes" on Form 990, Part | IV. line 11b. See I | Form 990. Part X. line 12. |
|--------------------------------|--|--------------------------|--|
| | (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
| (1) Financia | I derivatives | | _ |
| | neld equity interests | | |
| (3) Other | | | |
| (A) | | | |
| (B) | | | |
| (C) | | | |
| | | _ | |
| (E) | | | |
| (F) | | | |
| (G) | | _ | |
| (H) | way (b) word a good Farm 2000 Part V and (D) line 10 | | |
| Part VIII | mn (b) must equal Form 990, Part X, col. (B) line 12.) Investments – Program Related. | | |
| Part VIII | Complete if the organization answered "Yes" on Form 990, Part | IV line 11e See I | Form 000 Part V line 12 |
| | | T . | |
| | (a) Description of investment | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
| (1) | | | , |
| (2) | | | _ |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| Total. (Colu | mn (b) must equal Form 990, Part X, col. (B) line 13.) | | |
| Part IX | Other Assets. | | |
| | Complete if the organization answered "Yes" on Form 990, Part | IV, line 11d. See I | |
| | (a) Description | | (b) Book value |
| | f Use Asset Occupancy Operating Lease 7yr | | 202,820 |
| (2) | | | |
| (3) | | | |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| <u>(7)</u> | | | |
| (8) (9) | | | |
| | mn (b) must equal Form 990, Part X, col. (B) line 15.) | | 202,820 |
| Part X | Other Liabilities. | | 202,020 |
| | Complete if the organization answered "Yes" on Form 990, Part | IV. line 11e or 11f | f. See Form 990. Part X. |
| | line 25. | , | , |
| 1. | (a) Description of liability | | (b) Book value |
| (1) Federal in | ncome taxes | | C |
| (2) Lease L | iability Current - Office Rental | | 25,676 |
| (3) Lease L | iability Long term - Office Rental | | 188,289 |
| (4) | | | |
| (5) | | | |
| (6) | | | |
| (7) | | | |
| (8) | | | |
| (9) | | | |
| | mn (b) must equal Form 990, Part X, col. (B) line 25.) | | 213,965 |
| Liability fo | r uncertain tax positions. In Part XIII, provide the text of the footnote to the organ | nızation's tinancial sta | atements that reports the |

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) 2022 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements. 973,242 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains (losses) on investments 0 Donated services and use of facilities 0 Recoveries of prior year grants 2c 0 Other (Describe in Part XIII.) 0 Add lines **2a** through **2d** 2e 0 3 Subtract line **2e** from line **1** 3 973,242 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 0 4b 0 Add lines 4a and 4b 4c 0 Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) 5 973,242 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Part XII Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements . . . 959,236 Amounts included on line 1 but not on Form 990, Part IX, line 25: 2 Donated services and use of facilities 0 Prior year adjustments 2b 0 Other losses 2c 0 Other (Describe in Part XIII.) 0 Add lines 2a through 2d 2e 0 Subtract line **2e** from line **1** 3 3 959,236 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 4a 0 Other (Describe in Part XIII.) 4h 0 Add lines **4a** and **4b** 4c 0 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 959,236 Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. Schedule D, Part X, Line 2 - The Association is a nonprofit corporation exempt from income taxes under Section 501(c)(3) of the Internal Revenue Code, and Wisconsin franchise and income tax. The Association has adopted accounting guidance for recognizing and measuring uncertain tax positions. The Association follows the statutory requirements for their income tax accounting and generally avoids risks associated with potentially problematic tax positions that may be challenged upon examination. Management believes any liability resulting from taxing authorities imposing additional income taxes from activities deemed to be unrelated to the Association's tax-exempt status would not have a material effect on the accompanying financial statements. Schedule D, Part XI, Line 2d - Gain on extinguishment of office lease

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

WISCONSIN WETLANDS ASSOCIATION INC

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

39-1852601

Employer identification number

| Part | Types of Property | | | | | | | |
|-------|---|-------------------------------|--|---|--|-------|--------|----------|
| | | (a) Check if applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | Method o | | | |
| 1 | Art—Works of art | | | | | | | |
| 2 | Art—Historical treasures | | | | | | | |
| 3 | Art—Fractional interests | | | | | | | |
| 4 | Books and publications | | | | | | | |
| 5 | Clothing and household | | | | | | | |
| | goods | | | | | | | |
| 6 | Cars and other vehicles | | | | | | | |
| 7 | Boats and planes | ✓ | 1 | 3,800 | appraisal | | | |
| 8 | Intellectual property | | | | | | | |
| 9 | Securities—Publicly traded | ✓ | 8 | 178,989 | FMV | | | |
| 10 | Securities—Closely held stock . | | | | | | | |
| 11 | Securities—Partnership, LLC, or trust interests | | | | | | | |
| 40 | | | | | | | | |
| 12 | Securities – Miscellaneous | | | | | | | |
| 13 | Qualified conservation contribution—Historic | | | | | | | |
| | structures | | | | | | | |
| 14 | Qualified conservation | | | | | | | |
| | contribution—Other | | | | | | | |
| 15 | Real estate—Residential | | | | | | | |
| 16 | Real estate—Commercial | | | | | | | |
| 17 | Real estate—Other | | | | | | | |
| 18 | Collectibles | | | | | | | |
| 19 | Food inventory | | | | | | | |
| 20 | Drugs and medical supplies | | | | | | | |
| 21 | Taxidermy | | | | | | | |
| 22 | Historical artifacts | | | | | | | |
| 23 | Scientific specimens | | | | | | | |
| 24 | Archeological artifacts | | | | | | | |
| 25 | Other (Office furniture | ✓ | 14 | 5,446 | comparable | sales | | |
| 26 | Other (Staff Lodging at Bad River | ✓ | 1 | 922 | FMV | | | |
| 27 | Other (| | | | | | | |
| 28 | Other (Number of Forms 8283 received | by the or | anization during the tax | year for contributions for | | | | |
| 29 | which the organization completed | | | | 29 | • | | |
| | Willow the organization completed | 1 01111 0200 | o, rait v, Bonoo nomiowio | agomont | 29 | 0 | Yes | No |
| 30a | During the year, did the organiza | tion receive | by contribution any prope | erty reported in Part I lines | s 1 through | | | |
| - COU | 28, that it must hold for at least 3 | | | | | | | |
| | used for exempt purposes for the | | | | | 30a | \neg | √ |
| b | If "Yes," describe the arrangemen | t in Part II. | | | | | | |
| 31 | Does the organization have a | | otance policy that require | es the review of any no | onstandard | | | |
| | | | | | | 31 | | ✓ |
| 32a | Does the organization hire or use | e third part | ies or related organization | s to solicit, process, or se | ell noncash | | | |
| | contributions? | | | | | 32a | | ✓ |
| b | If "Yes," describe in Part II. | | | | | | | |
| 33 | If the organization didn't report an describe in Part II. | amount in | column (c) for a type of pro | perty for which column (a) | s checked, | | | |

Schedule M (Form 990) 2022 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether Part II the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Schedule M, Part I, Line 7 - Donated canoe was given away at WWA 2023 science conference. Schedule M, Part I, Line 9 - Wisconsin Wetlands Association uses Securities and Advisory services offered through Harbor Investments, Inc. to sell Marketable securities at the time they are donated. Schedule M, Part I, Lines 25-28 - Bad River Indian tribe donated lodging for staff during a site visit

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| Schedule M (Form 990) 2022 |
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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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

| Name of the organization | Employer identification number |
|--|-----------------------------------|
| WISCONSIN WETLANDS ASSOCIATION INC | 39-1852601 |
| Form 990, Part VI, Section A, Line 6 - Form 990, Part VI, Section A, Line 6 - The Organization's bylaws define | ne the terms of membership and |
| allow members to elect officers and directors at the annual meeting. | io the terms of membership the |
| anow members to elect omicers and unectors at the annual meeting. | |
| | |
| Form 990, Part VI, Section A, Line 7a - Form 990, Part VI, Section A, Line 7a - Members who attend the org | anization's annual meeting elect |
| officers and directors for the coming year. | |
| | |
| Form 990, Part VI, Section B, Line 11b - Form 990, Part VI, Section B, Line 11b - The organization's 990 is r | eviewed and approved by the |
| | |
| Executive Director and an external accountant. It is also made available to each board member for review | prior to ming. |
| | |
| Form 990, Part VI, Section B, Line 12c - Form 990, Part VI, Section B, Line 12c - The Executive Director col | lects and reviews conflict of |
| interest statements completed annually by each board member and communicates to applicable board me | embers any potential conflicts of |
| interest. Board members who have a conflict of interest are expected to excuse themselves from participations. | |
| decision-making about matters involving the conflict. | |
| decision-making about matters involving the connect. | |
| | |
| Form 990, Part VI, Section B, Line 15 - Form 990, Part VI, Section B, Line 15 - The Board of Directors author | rizes the compensation of the |
| Executive Director, based partly on information obtained from informally surveying compensation paid by | comparable organizations, and |
| governmental salaried positions. | |
| | |
| Form 000 Dott VI. Section C. Line 10. Available at https://www.wisconsinyatlande.org/ | |
| Form 990, Part VI, Section C, Line 19 - Available at https://www.wisconsinwetlands.org/ | |
| | |
| Form 990, Part XI, Line 9 - Foundation contributions: \$196,000 Water Solutions Fund grant and \$30,000 Br | ico Fund. Net Assets released |
| from restriction: \$55,500 | |
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Schedule O, Statement 1

WISCONSIN WETLANDS ASSOCIATION INC

Form: Form 990 (2022)

EIN: 39-1852601 Part III, Line 4d

Page: 2

Other Program Services Accomplishments

| Activity Code | Description | Expense | Grants | Revenue |
|------------------|---|---------|--------|---------|
| | Program Development: In 2022-23 WWA continued working with the Wisconsin Department of Agriculture, Trade and Consumer Protection on efforts to build capacity to restore wetlands and floodplains in agricultural landscapes. The work included policy analysis and the development and delivery of trainings on hydrologic restoration concepts and approaches for DATCP's Conservation Engineering staff. Policy staff also initiated exploratory program development conversations with the Wisconsin Department of Transportation. | 29,853 | 0 | 0 |
| Total: | | 29,853 | 0 | 0 |