# 7673 03/25/2011 11:47 AM

Department of the Treasury Internal Revenue Service

# Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047 2009 Open to Public Inspection

			,	10/0	1 /00		120 /1					***************************************
<u> </u>	For the 2009	calendar ye	ar, or tax year beg	inning 12/0	1/09 , and e	nding 土土	<u>/30/1</u>	.0			· · · · · · · · · · · · · · · · · · ·	
В	Check if applicable		C Name of organization	on						) Emplo	yer identification nun	nber
	Address change	use IRS		Hudson Ri	ver Sloop (	Clearwate	er, Ind	c.				
$\equiv$	-	label or	Doing Business As				<u> </u>	-		14-	6049022	
	Name change	print or	_ ·					D			· · · · · · · · · · · · · · · · · · ·	
	Initial return	type. See		(or P.O. box if mail is not de	ivered to street address)			Room/suit	e   "		one number	
H		Specific	724 Wolc	ott Avenue						845	-265-8080	
	Termination	instruc-	City or town, sta	te or country, and ZIP +	· 4				L	Gross rece	ipts \$ 2,368,	<u> 250</u>
	Amended return	tions.	Beacon		NY 125	508			1			
$\overline{\Box}$		F Name	e and address of prin	cinal officer:						H(a) is this	a group return for	
	Application pendi	// I	•	Executiv	e Directo	3r			-	affiliate		X No
					e prreceo	-				d(b) Are all	affiliates -	=
			4 Wolcott	Avenue						include	d? Yes	No
		Be	acon		NY 125	08				if "No,"	' attach a list. (see instruction	s)
ı	Tax-exempt st	tatus: X	501(c) ( <b>3</b>	∢ (insert no.)	4947(a)(1) or	527						
J	Website: ▶	www.c	clearwate	r.ora					1	H(c) Group	exemption number	
	Type of organiza				Other >		1	Year of forma			M State of legal domicile:	NY
2000000	er sees and a sees and a sees a sees			Association	Juliei 🚩		1 -	Teal of Johns	111011. — 5		ter Ctate of logal controlle:	
<b>883.8</b>		Summa										
			_	nission or most sign								
as	EN	VIRONM	ENTAL EDUCA	TION AND AD	VOCACY							
Ž												
Activities & Governance											.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
2	O Chool	e thin have	if the erecei	zation discontinued i	to anarations or dis	noond of mor		/ of its not	t accete	· · · · · · · · · ·		
Ô	1				•	-					20	
ಹ	3 Numb	er of voting	members of the g	governing body (Part	: VI, line 1a)					. 3	28	
es	4 Numb	er of indep	endent voting mer	nbers of the governi	ng body (Part VI, lii	ne 1b)	<i></i>			. 4	27	
풒	5 Total	number of e	employees (Part V	', line 2a)						5	41	
늉	1		olunteers (estima								1000	
<				enue from Part VIII,	column (C) line 10							
												0
	<b>b</b> Net u	nrelated bu	siness taxable inco	ome from Form 990-	· I , line 34		<u> </u>		Prior Year	. 7b	Current Year	
	l									405	1,126,0	<u> </u>
<u>o</u>				line 1h)				<u> </u>	,226			
Revenue			revenue (Part VIII						889	,580	1,080,8	
ě	10 invest	tment incon	ne (Part VIII, colur	nn (A), lines 3, 4, an	d 7d)					,667	4,0	<u>056</u>
œ	11 Other	revenue (F	Part VIII. column (A	A), lines 5, 6d, 8c, 9d	. 10c. and 11e)				798	,529	156,	763
				n 11 (must equal Pa				2	,919		2,368,2	
			•					<del></del>	,,	,		
				Part IX, column (A), I								
	l .	•	•	art IX, column (A), lii					000	67.0	200	
ų,	15 Salari	ies, other co	ompensation, emp	loyee benefits (Part	IX, column (A), line	es 5–10)			880	,678	982,2	<u> 212</u>
enses	16a Profes	ssional fund	draising fees (Part	lloyee benefits (Part IX, column (A), line (, column (D), line 2	11e)							
ᅙ	b Total	fundraising	expenses (Part IX	C. column (D), line 2	5) ▶	94,32	0					
Exp	17 Other	evnences	(Part IX column (	A), lines 11a-11d, 1	15 0 45			1	,199	.376	1,200,0	012
				nust equal Part IX, o					,080		2,182,2	
		-	-		olumn (A), line 25)	·						
_		nue less ex	<u>penses. Subtract I</u>	line 18 from line 12.				Bustant		,127	186,0	<u> </u>
Net Assets or	2								ng of Curre		End of Year	<del>-00</del>
Set	20 Total	· · · · · · · · · · · · · · · · · · ·			.,.,				.,546		1,703,	
Ž.	21 Total									,626	334,:	
Ž.	<b>22</b> Net a	ssets.or fur	id balances. Subtr	act line 21 from line	<u> 20 </u>			<u> </u>	.,184	,065	1,369,2	<u> 225</u>
	Part II	Signatu	re Block									
يستند				are that I have examine	d this return, including	accompanying	schedules a	nd stateme	nts and to	the best o	f my knowledge	
		and belief, it	is true, correct, and	complete. Declaration of	of preparer (other than	officer) is based	d on all infor	mation of w	hich prepa	rer has an	y knowledge.	
۸.				chh II						48	179/11	
Si	-	<b>—</b>		11/ my						1	101111	<del></del>
He	re	Signatu	ure of officer							Date	` <b>S</b>	
			***	Jett Kun	1Pt							
		Type of	r print name and title	•	<u> </u>							
_		• ,,	· //		_		Data		Check if		Preparer's identifying nu	Jmber
Pa	id l	Preparer's	<b>▶</b>	N'A MALLA.			Date	ا ـ ـ و ـ ـ ـ	self-		(see instructions)	
		signature	V ( / AM	UN YU WOOM	usan		03/2	5/11	employed	<u> </u>	P0002059	
	eparer's	Charle	, Se	edore and	Company,	CPAs				EIN 🕨	14-1698	408
Us	e Only	Firm's name if self-emplo	e (or yours	678 South						Phone		
	ļ	address, an	7 1	oughkeepsi		601-525	54			l .	845-485-5	510
				<del></del>	<u> </u>	<u> </u>				no.		$\overline{}$
				arer shown above?			<u></u>				Yes Yes	No
		t and Pape	rwork Reduction	Act Notice, see th	e separate instruc	tions.					Form <b>990</b>	(2009)
DΑ	٦.											

orm 990 (2009) H1	<u>udson River S</u>	loop Clearwater	, Inc.	14-6049022		Page 2
Part III Stat	tement of Program	Service Accomplishmen	nts			
1 Briefly describe	the organization's mission	:		<del></del>		
•	•	ON AND ADVOCACY				
	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>					
* * * * * * * * * * * * * * * * * * * *	• • • • • • • • • • • • • • • • • • • •					
			<u>.</u>			
_		cant program services during th	e year which w	ere not listed on		
						Yes X No
If "Yes," describ	oe these new services on S	Schedule O.				
3 Did the organiza	ation cease conducting, or	make significant changes in ho	w it conducts, a	any program		
services?						Yes X No
If "Yes," describ	e these changes on Sche	dule O.				
4 Describe the ex	empt purpose achieveme	nts for each of the organization's	s three largest p	program services by ex	penses.	
		ions and section 4947(a)(1) trus				
		and revenue, if any, for each pro				
		. ,	· ·	•		
4a (Code:	\(Evnencec \$	700,284 including (	rants of \$		) (Revenue \$	<u>_</u>
COMMITTITY	OTITORACH - F	ESTIVALS AND EV	ENTS TO	ΔͲͲΡΔϹͲ	) (November 4	
*	THE HUDSON					, , , , , , , , , , , , , , , , , , , ,
PEOPTE 10	THE HODSON	WAIERFRONI				
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				· · · · · · · · · · · · · · · · · · ·		
				,		
		************				
4b (Code:	) (Expenses \$	455,428 including (	grants of \$		) (Revenue \$	
VESSELS-	SLOOP CLEARW	ATER "AMERICA'S	ENVIRO	MENTAL	, , , , , , , , , , , , , , , , , , , ,	,,
FLAGSHIP"	,					
<del></del>						
• • • • • • • • • • • • • • • • • • • •						,
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• • • • • • • • • • • • • • • • • • • •						,
					,	
4c (Code:	) (Expenses \$	358,141 including	grants of \$		) (Revenue \$	)
EDUCATION	PROGRAMS -	"CLASSROOM OF T	HE WAVES	S" AND		
ENVIRONME	ENTAL EDUCATI	ON PROGRAMS SER	VING CH	LLDREN AND		
ADULTS			, <b>.</b>			,
*				* . * . *		
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			• • • • • • • • • • • • • • • • • • • •			
						• • • • • • • • • • • • • • • • • • • •
				,		
				•		
	services. (Describe in Sch	nedule O.)				
(Expenses \$	269,521	including grants of \$		) (Revenue \$		)
4e Total program	ı service expenses 🕨	1,783,374				

Form 990 (2009) Hudson River Sloop Clearwater, Inc. 14-6049022

Part IV Checklist of Required Schedules

<b></b>	an sy Checklist of Required Schedules		Yes	No.
	to the executivation described in continue 504(a)(2) or 4047(a)(1) (athor then a private foundation)? If "Voc."		168	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	1	X	
	complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
2 3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
,	Plate Country of the Children State of the Color of the C	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete		_	
-		4		x
5	Schedule C, Part II  Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)			_
Ŭ	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
•	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes,"			
	complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or		İ	
	quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable	11	X	
•	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete			
	Schedule D, Part VI.			
•	■ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
•	■ 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.			
•	■ Did the organization report an amount for other assets related in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40	X	
	Schedule D, Parts XI, XII, and XIII.	12		
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?  Yes No If "Yes " completing Schedule D. Parts XI, XII, and XIII is optional.  12A X			
	1 Tos, completing concede by the Adjustine optioner.	13		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	14a		X
14a		144	-	
b		14b		x
45	business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	145		
15	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		x
46	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	<u> </u>		<del>"</del>
16		16		x
17	to individuals located outside the United States? If "Yes," complete Schedule F, Part III  Did the organization report a total of more than \$15,000 of expenses for professional fundraising services	10		
17	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	<u> </u>	<u> </u>	
10	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?			
10	If "Yes," complete Schedule G, Part III	19	1	x
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	· · ·	Х
<u> </u>	Did the organization operated and or more medicate in 1997 semipliste democratic	<u> </u>	ggr	1 (2000

P	nt IV Checklist of Required Schedules (continued)			
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			ĺ
	24b through 24d and complete Schedule K. If "No," go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
·	to defense and the control bands 0	24c		ĺ
d	to detease any tax-exempt bonds?  Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction			
Lou		25a		x
b	ls the organization aware that it engaged in an excess benefit transaction with a disqualified person in a			
D	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	200 E72 If Was 7 complete Cohedula I Part I	25b		х
26	* * * * * * * * * * * * * * * * * * * *	230		
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	26		x
~~	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	20		
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			x
	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 Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):		37	********
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X	<del> </del>
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			37
	Schedule L, Part IV	28b		<u> </u>
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a			
	family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L,			
	Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X_
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X_
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			
	Part VI	37		X_
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
•	19? Note. All Form 990 filers are required to complete Schedule O.	38	X	
			000	

Form	990 (2009) Hudson River Sloop Clearwater, Inc. 14-6049	022			P	age 5
	Statements Regarding Other IRS Filings and Tax Compliance				Yes	No
10	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1	1		res	NO
	U.S. Information Returns. Enter -0- if not applicable	1a	50			
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and repo	rtable				
	gaming (gambling) winnings to prize winners?			1c	X	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1	[			
Za	Statements, filed for the calendar year ending with or within the year covered by this return	2a	41			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	?		2b	X	
~	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see					
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered	οу				
	this return?			3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	<u> </u>	ļ
	At any time during the calendar year, did the organization have an interest in, or a signature or other au				1	1
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial					
	account)?			4a	300000000	X
b	If "Yes," enter the name of the foreign country: ▶					
	See the instructions for exceptions and filling requirements for Form TD F 90-22.1, Report of Foreign Ba	ınk				
	and Financial Accounts.					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?					X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	n?		5b	<b>↓.</b> —	X
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regard	ling				
	Prohibited Tax Shelter Transaction?			5c	<del> </del>	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the					
	organization solicit any contributions that were not tax deductible?			<u>6a</u>	├	X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution	з ог				
	gifts were not tax deductible?	<i></i>		6b_		<u> </u>
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for go	ods		<u> </u>		•
	and services provided to the payor?				+-	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?				┼─	+-
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					x
	required to file Form 8282?  If "Yes." indicate the number of Forms 8282 filed during the year	. 11 2 2 2				<u> </u>
d				<del></del>		
е	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a per			7.	4	X
	benefit contract?			7e 7f	+	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract				+	X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			19	+	
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C			7h	1	x
	required?					
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		•			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring			8	200000000	X
_	organization, have excess business holdings at any time during the year?	· • · • •		·····		
9.	Sponsoring organizations maintaining donor advised funds.			9a	90000000	X
а	Did the organization make any taxable distributions under section 4966?				$\top$	X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	• • • • • •				
10	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12	10a	.1			
a	Gross receipts, included on Form 990, Part VIII, line 12.			<del></del>		
b						
11	Section 501(c)(12) organizations. Enter:	11a	,			
a	Gross income from members or shareholders  Gross income from other sources (Do not net amounts due or paid to other sources against	-1.10	<u> </u>			
b		111	,			
40-	amounts due or received from them.)  Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		- I	12a	1	
12a	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12k	J			
n	THE SECOND THE AUDUM OF MATCACHID INCIDENTION OF GOOD AND AUDIC YOUR CONTRACTOR OF THE AUDUM OF			100000000000000000000000000000000000000		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A. Governing Body and Management			<u> </u>		l	T
,		1 a.	. 1	28		Yes	No
1a	Enter the number of voting members of the governing body	11		27	-		
b	Enter the number of voting members that are independent  Did any officer, director, trustee, or key employee have a family relationship or a business relationship with		<u> </u>		-		
2	d m B t t t ' december 0				2	20000000000	X
9	any other officer, director, trustee, or key employee?  Did the organization delegate control over management duties customarily performed by or under the direct				1		<del></del>
3	supervision of officers, directors or trustees, or key employees to a management company or other person?				3		x
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was fill						Х
4 5	Did the organization become aware during the year of a material diversion of the organization's assets?				·		X
6	Does the organization have members or stockholders?				6	x	
7a	Does the organization have members of stockholders, or other persons who may elect one or more members	· · · · · ·	• • • •				
, u	The book of				7a	x	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	<i>.</i>			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during				'		
•	the year by the following:						
а	The governing body?				8a	X	
b	Each committee with authority to act on behalf of the governing body?				8b		X
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached						
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		<u>.</u>		. 9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the						
	enue Code.)						
						Yes	No
10a	Does the organization have local chapters, branches, or affiliates?				10a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,						
	affiliates, and branches to ensure their operations are consistent with those of the organization?				10b		ļ
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the						
	form?				11	X	
11a	Describe in Schedule O the process, if any, used by the organization to review this Form 990.						
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13				12a	X	<u> </u>
þ	Are officers, directors or trustees, and key employees required to disclose annually interests that could give				ļ		
	rise to conflicts?	<b></b>			12b	X	<u> </u>
C	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"				1	==	
	describe in Schedule O how this is done					X	├
13	Does the organization have a written whistleblower policy?					X	
14	Does the organization have a written document retention and destruction policy?	<i></i> .			14	X	
15	Did the process for determining compensation of the following persons include a review and approval by						
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				4-	v	
а	The organization's CEO, Executive Director, or top management official					X	<del> </del>
b	Other officers or key employees of the organization	- · <b>· · ·</b> ·			. 15b	_ A	
	If "Yes" to line 15a or 15b, describe the process in Schedule O. (See instructions.)						
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement				16a		x
	with a taxable entity during the year?		• • •		·		
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard						
					. 16b	***********	o <b>p</b> 000000000000000000000000000000000000
500	the organization's exempt status with respect to such arrangements? tion C. Disclosure		<u> </u>		. 100		
	ATT CITI						
17 18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s		• • •				• • • • •
18	available for public inspection. Indicate how you make these available. Check all that apply.	J. (1)					
	Own website X Another's website X Upon request						
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of inte	rest					
19	policy, and financial statements available to the public.						
20	State the name, physical address, and telephone number of the person who possesses the books and records of	the					
LU	organization: ▶ Roger D'Aquino 724 Wolcott Avenu	e					
P	eacon NY 12	508	• • •	84	15-45	4-7	673
							(2009)

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

### 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. Use Schedule J-2 if additional space is needed.
- 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. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average	Pos	itíon (		C) k all t	that ap	ply)	(D) Reportable	(E) Reportable	(F) Estimated
	hours per week	Individual trustee or director		Officer	Key employee	Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
ERIC MARSHALL V PRESIDENT		x		x				0	0	0
ALLAN SHOPE PRESIDENT		x		x				0	0	C
GERHARD RANDERS-F DIRECTOR	EHRSON	x						0	0	
SCOTT BERWICK TREASURER		x		x				0	0	0
STEPHEN FILLER DIRECTOR		x						0	0	
MITCHELL BRING DIRECTOR		x						0	0	C
DAVID CHURCH DIRECTOR		x						0	0	
ANN DAVIS DIRECTOR		x						0	0	C
STEVE DENSMORE DIRECTOR		x						0	0	
EDWARD DLUGOSZ DIRECTOR		x						0	0	C
WILLIAM FLANK DIRECTOR		x						0	0	
CHRIS HUNT DIRECTOR		х						0	0	C
PAUL MANKIEWICZ DIRECTOR		x						0	0	c
SUSAN SHAPIRO DIRECTOR		x				_		0	.0	(
STEPHEN SMITH DIRECTOR		x			ļ			О	0	C
PETER WILLCOX DIRECTOR		x						0	0	<u> </u>
ROSS GOULD SECRETARY		x		x				0	0	c

1013 03/23/2011						
Form 990 (2009)	Hudson	River	Sloop	Clearwater,	, Inc.	14-6049022

Part VII Section A. Office	s, Directors, Trus	tees	, Ke	y Em	ploy	/ees,	ane	Highest Compensated E	mployees (continued)	<del></del>
(A) Name and Title	(B) Average hours per	$\vdash$		checl		hat ap		(D) Reportable compensation	(E) Reportable compensation	<b>(F)</b> Estimated amount of
	week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
ROBERTA GOLDERG DIRECTOR		x	·					0	0	0
ANN OSBORN DIRECTOR		x						o	0	0
ROBERT POLITZER DIRECTOR		x						0	o	0
WILLIAM COX DIRECTOR		х						0		0
FRANCIS MARIE CE	RUZ	x						0	0	0
RON FLAX-DAVIDSO	)N	x						0	0	0
DAVE FENNER DIRECTOR		x						0	0	0
FRANK LANDSBERG DIRECTOR		x						0	0	0
DAVID LEBSON DIRECTOR		x						0	0	0
ROGER MEYER DIRECTOR		x						0	0	0
ALMA RODRIGUEZ DIRECTOR		X						0	0	0
JEFFREY RUMPF EXEC DIRECTO	40.00			x			-	91,923	0	12,735
										,
1b Total					· · · · · ·		<u></u>	91,923		12,735
2 Total number of individuals ( reportable compensation fro				ose	liste	d abo	ove)	who received more than \$1	00,000 in	
3 Did the organization list any										Yes No
employee on line 1a? If "Yes  For any individual listed on li the organization and related	ne 1a, is the sum o	of rep	ortat	ole co	omp	ensa	tion .	and other compensation from	n	
individual	1a receive or acci	ue co	ompe	ensat	ion f	rom	any	unrelated organization for		4 X
Section B. Independent Contra		COIL	picte	, 001	icaa		01 30	JOH POISON T		
Complete this table for your compensation from the organical compensation.		nsate	ed in	depe	nde	nt co	ntra			
Name Name	(A) and business address						_	Descrip	(B) tion of services	(C) Compensation
	·									
		. <del></del>								
Total number of independer more than \$100,000 in com	•	_				i to ti	hose	e listed above) who received		0 Form <b>990</b> (2000

Form 990 (2009) Hudson River Sloop Clearwater, Inc. 14-6049022

	t VI	Statement of Revenue		, , , , , , , , , , , , , , , , , , , ,			
		***************************************		(A)	(B) Related or	(C) Unrelated	(D) Revenue
				Total revenue	exempt	business	excluded from tax under sections
					function revenue	revenue	512, 513, or 514
ខ្ល	1a	Federated campaigns 1a					
E		Membership dues 1b					
25E		Fundraising events 1c					
Contributions, gifts, grants and other similar amounts		Related organizations 1d					
B.S.		Government grants (contributions) 1e 405,	778				
		All other contributions, gifts, grants,					
혈뤿		and similar amounts not included above 1f 720,	835				
들음	a	Noncash contributions included in lines 1a-1f: \$ 24,	**********				
유	_	Total. Add lines 1a-1f	<b>&gt;</b>	1,126,613			
후		Busn.	Code				
틸	2a	EDUCATIONAL PROGRAMS		626,116	626,116	· <del></del>	
8	b	COMMUNITY PROGRAMS		454,702	454,702		
<u>.</u> 2	c					· .	
ē	d				<u>.</u>		<u>,</u>
Program Service Revenue	e						
g	f	All other program service revenue					
옵		Total, Add lines 2a–2f	ightharpoonup	1,080,818			
$\neg$		Investment income (including dividends, interest, and					
<b> </b>	•	other similar amounts)	<b>•</b>	4,056			4,056
	4	Income from investment of tax-exempt bond proceeds	<b>•</b>				
ı	5	Royalties	<b>•</b>		•		
	•	(i) Real (ii) Personal					
	6a	Gross Rents	<del></del>				
		Less: rental exps.					
		Rental inc. or (loss)					
-	d	Net rental income or (loss)	<b>—</b>		0.000.000.00000000000000000000000000000		
		Gross amount from (i) Securities (ii) Other					
		sales of assets					
	b	other than inventory  Less: cost or other					
	D	basis & sales exps.					
		Gain or (loss)					
		Net gain or (loss)	<b></b>		***************************************		
		Gross income from fundraising events					
ä	Ja	(not including \$					
Ve l		of contributions reported on line 1c).					
Other Revenu		See Part IV, line 18 a					
her	h	Less: direct expenses b					
₹		Net income or (loss) from fundraising events	<b></b>				
		Gross income from gaming activities.					
	σd	See Part IV, line 19 a					
	la.	Less: direct expenses b					
		Net income or (loss) from gaming activities	<b>•</b>				
		Gross sales of inventory, less					
	iva		, 667				
	h	returns and allowances a 115 , Less: cost of goods sold b	, <del> ·</del>				
		Net income or (loss) from sales of inventory	<b></b>	115,667	***************************************		115,667
	G		. Code	===,==.			
	11 =	CHANGE IN BENEFICIAL INTEREST		31,662	31,662		
	l la	MISCELLANEOUS		9,434			
				- 1			
	Q C	All other revenue		·			
		Total. Add lines 11a–11d		41,096			
		Total Revenue, See instructions.		2,368,250		(	119,723

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must d		(B)		
	not include amounts reported on lines 6b,	(A) Total expenses	Program service	(C) Management and	<b>(D)</b> Fundraising
<u>7b,</u>	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in		·		
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	91,923	55,154	9,192	27,577
6	Compensation not included above, to disqualified				
•	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	688,259	551,611	104,250	32,398
	Pension plan contributions (include section 401(k)	300,200			
8	and section 403(b) employer contributions)				
•		202,030	157,701	32,411	11,918
9	Other employee benefits	202,030			
10	Payroll taxes				
11	Fees for services (non-employees):				1
_	Management				
b	Legal				
С	Accounting	<u> </u>	<del></del>		
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other			0.000	
12	Advertising and promotion	70,512	68,206	2,306	
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	31,436	24,131	4,815	2,490
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19					
20	Interest	12,770		12,770	
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	105,117	102,794	2,323	
23	Insurance	55,621	51,645		5
	modranos		,		
24	Other expenses. Itemize expenses not				
	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below.)				
_	PROFESSIONAL FEES	398,020	320,179	74,916	2,925
a h	EQUIPMENT LEASES & MAINT	96,571			
b	LEASED VESSEL	89,319			
C		66,828		<del></del>	
d	FOOD	60,683			
e	OPERATING SUPPLIES	213,135			
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	2,182,224	1,783,374	304,330	94,320
26	Joint costs. Check here ▶ ☐ if following SOP 98-2. Complete this line only if the				
	organization reported in column (B) joint costs				
	from a combined educational campaign and				
	fundraising solicitation			<u> </u>	Form <b>990</b> (2009)
DAA					Form <b>990</b> (2009)

Form 990 (2009) Hudson River Sloop Clearwater, Inc. 14-6049022

Part	X Balance Sheet					
				(A) Beginning of year		(B) End of year
1	Cash—non-interest bearing			3,213	1	7,247
2	Savings and temporary cash investments			516,509		250,380
3	Pledges and grants receivable, net		Γ	19,132	3	17,137
4	Accounts receivable, net		Г	156,582	4	83,150
5	Receivables from current and former officers, directors	trustees, key				
	employees, and highest compensated employees. Con		:			
	Schedule L				5	
6	Receivables from other disqualified persons (as defined					
	4958(f)(1)) and persons described in section 4958(c)(3	)(B). Complete				
	Part II of Schedule L.				6	
<b>S</b> 7	Notes and loans receivable, net				7	
Assets	Inventories for sale or use			19,456		41,516
و   ک <b>ک</b>				8,003	9	15,931
10:	a Land, buildings, and equipment: cost or					
	other basis. Complete Part VI of Schedule D	10a	1,727,8 <u>86</u>			
k	Less: accumulated depreciation	10b	726,726	823,796	10c	<u> </u>
11					11	
12					12	
13					13	
14			1		14	<u> </u>
15					15	287,067
16		34)		1,546,691	16	1,703,588
17				91,690	17	108,186
18					18	
19	Deferred revenue				19	
20	Tax-exempt bond liabilities				20	
တ္က 21	·	of Schedule D	,,,		21	
≝   22	Payables to current and former officers, directors, trust	ees, key				
Liabilities 22 23	employees, highest compensated employees, and disc	qualified				
┆	persons. Complete Part II of Schedule L				22	
23	Secured mortgages and notes payable to unrelated thi	rd parties			23	172,531
24	Unsecured notes and loans payable to unrelated third	parties		214,128		
25	Other liabilities. Complete Part X of Schedule D			56,808		53,646
26	Total liabilities. Add lines 17 through 25	<u> </u>	<u></u>	362,626	26	334,363
ဖွ	Organizations that follow SFAS 117, check here ▶	X and				
Balances 27	complete lines 27 through 29, and lines 33 and 34.					
<u>re</u>   27	Unrestricted net assets			1,110,330		1,359,225
ന്റ്   28	Temporarily restricted net assets			<u>73,735</u>	28	10,000
[ 29	Permanently restricted net assets				29	
PI 29	Organizations that do not follow SFAS 117, check	here 🕨 🔃				
<u>ا</u> و	and complete lines 30 through 34.					
Net Assets or 33 37 33 34					30	
<b>8</b> 31					31	
<b>%</b>   32	<del>-</del> '	or other funds		4 404 045	32	1 060 005
등 33	Total net assets or fund balances			1,184,065		1,369,225
Ž   34	Total liabilities and net assets/fund balances			1,546,691	34	1,703,588

Form **990** (2009)

orm	n 990 (2009) Hudson River Sloop Clearwater, Inc. 14-6049022		Pa	ge <b>12</b>
Pa	art XI Financial Statements and Reporting	2.5		
			Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			
	Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	_	X
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O.			
d	I If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were			
	issued on a consolidated basis, separate basis, or both:			
	X Separate basis Consolidated basis Both consolidated and separate basis			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?	3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			

required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

SCHEDULE A (Form 990 or 990-EZ)

**Public Charity Status and Public Support** 

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Hudson River Sloop Clearwater, Inc. 14-6049022 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). ß An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An organization that normally receives: (1) more than 33 1/3 % of its support from contributions, membership fees, and gross 9 receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c Type III-Functionally integrated Type II By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) Yes No and (iii) below, the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? (iii) A 35% controlled entity of a person described in (i) or (ii) above? Provide the following information about the supported organization(s). (v) Did you notify (vii) Amount of (vi) Is the (iv) is the organization (i) Name of supported (ii) EIN (iii) Type of organization organization in col. the organization in organization (described on lines 1-9 in col. (i) listed in your support col. (1) of your (i) organized in the above or IRC section governing document? U.S.? support? (see instructions)) Yes No

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

Schedule A (Form 990 or 990-EZ) 2009

Schedule A (Form 990 or 990-EZ) 2009 Hudson River Sloop Clearwater, Inc. 14-6049022 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2005 (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") 1,126,613 5,174,724 817,509 757,994 906,078 1,566,530 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 1,566,530 1,126,613 5,174,724 817,509 757,994 906,078 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) 5,174,724 Public support. Subtract line 5 from line 4 . . . Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (b) 2006 (c) 2007 (d) 2008 (e) 2009 (f) Total (a) 2005 5,174,724 Amounts from line 4 ..... 817,509 757,994 906,078 1,566,530 1,126,613 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar <u>1,</u>718 391 4,667 4,056 11,304 472 sources ..... Net income from unrelated business activities, whether or not the business is Other income. Do not include gain or loss from the sale of capital assets 115,667 115,667 (Explain in Part IV.) ........... 5,301,695 11 Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (see instructions) 12 4,136,028 12 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 97.61% Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f)) 14 Public support percentage from 2008 Schedule A, Part II, line 14 % 15 33 1/3 % support test-2009. If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 33 1/3 % support test-2008. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2009. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization 10%-facts-and-circumstances test-2008. 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 IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2009

Page 3

Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

Sec	tion A. Public Support	<del></del>					
	endar year (or fiscal year beginning in) 🕨	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(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	Total. Add lines 1 through 5						<del> </del>
7a	received from disqualified persons						
b	Amounts included on lines 2 and 3 received	•					
	from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the						
_	amount on line 13 for the year				<u> </u>		***
С 8	Add lines 7a and 7b  Public support (Subtract line 7c from						
0	line 6.)						
Sec	tion B. Total Support						<u> </u>
Ca	lendar year (or fiscal year beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)		4				
13	Total support. (Add lines 9, 10c, 11,				1		
	and 12.)				1		
14	First five years. If the Form 990 is for the organization, check this box and stop here	~					⊾□
Sec	tion C. Computation of Public S	upport Percent		· · · · · · · · · · · · · · · · · · ·	*************		· · · · · · · · · · · · · · · · · · ·
15	Public support percentage for 2009 (line 8			(f))		15	%
16	Public support percentage from 2008 Sch						%
	ction D. Computation of Investme						
17	Investment income percentage for 2009 (I			column (f))		17	%
18	Investment income percentage from 2008					40	%
19a	33 1/3 % support tests—2009. If the orga			14, and line 15 is r	more than 33 1/3 %	, and line	
	17 is not more than 33 1/3 %, check this b						<b>&gt;</b> [
b	33 1/3 % support tests—2008. If the orga						· —
	line 18 is not more than 33 1/3 %, check the						▶ ∟
20	Private foundation. If the organization did	d not check a box or	n line 14, 19a, or 19	b, check this box	and see instruction:	3	

#### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No. 1545-0047

2009

Name of the organization

Hudson River Sloop Clearwater, Inc.

Organization type (check one):

Filers of:

Section:

Employer identification number

14-6049022

**X** 501(c)( 3 ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules X For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and 11. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box in the heading of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

7673 03/25/2011 11:47 AM Schedule B (Form 990, 990-EZ, or 990-PF) (2009) Page 1 of 1 of Part I Employer identification number Name of organization Hudson River Sloop Clearwater, Inc. 14-6049022 Part | Contributors (see instructions) (a) (c) (d) Type of contribution No. Name, address, and ZIP + 4 Aggregate contributions 1 DORR FOUNDATION Person 84 HILLSIDE DRIVE Pavroll 30,000 Noncash PORTSMOUTH NH 03801 (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution 2 72ANDSUNNY Person 6300 ARIZONA CIRCLE Payroll Noncash

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

➤ Attach to Form 990. ➤ See separate instructions.

OMB No. 1545-0047
2009
Open to Public

**Employer Identification number** Name of the organization 14-6049022 Hudson River Sloop Clearwater, Inc. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year \_\_\_\_\_ [ Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements Total acreage restricted by conservation easements 2h Number of conservation easements on a certified historic structure included in (a) 2c C Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ \_ \_ \_ \_ \_ Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items: a Revenues included in Form 990, Part VIII, line 1 Assets included in Form 990, Part X

Sched	dule D (Form 990) 2009	<u> Hudson Ri</u>									Page 2
		ons Maintaining							sets (cont	inue	d)
3	Using the organization's a collection items (check all	acquisition, accession I that apply):	ı, and other reco	ds, check	any of the followi	ng that are a	a significant us	se of its			ě.
а	Public exhibition		đ	Loan o	r exchange prog	rams					
b	Scholarly research		e Ì	Other					_		
c	Preservation for future	e generations	1				· <b>-</b>				
4	Provide a description of the Part XIV.	*	ections and expla	in how the	y further the orga	anization's e	xempt purpos	e in			
5	During the year, did the or assets to be sold to raise	rganization solicit or r funds rather than to l	receive donations be maintained as	of art, his	torical treasures, organization's c	or other simulation,		,,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	_	Yes	☐ No
Pa		d Custodial Arra					nswered "Y	es" to Fo	rm 990, F	art	
	Is the organization an age						not .				
Iu	included on Form 990, Pa									Yes	No
h	If "Yes," explain the arran										L
	ii rea, explain the arrain	goment are say a	na complete the	ionoming in					Am	ount	
С	Reginning halance							1c			
	Beginning balance										
· ·	Distributions during the year										
•	Ending balance							···			
22	Did the organization inclu							• • • • • • • • • • • • • • • • • • • •		Yes	No
	If "Yes," explain the arran		111 990, Fait X, III	16 21:						163	
	rt V Endowmer	nt Funds. Compl	lete if organiz	ration an	swered "Yes	" to Form	990 Part	IV. line 10	<u>).</u>		
*********	Litaowiller	it i dilas. Compi	(a) Current		(b) Prior year			(d) Three yea		Four ye	ears back
10	Paginning of year halang			,,,,,	(2)	\(\frac{\sqrt{\sq}\sqrt{\sq}}\sqrt{\sq}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}					
	Beginning of year balance		25	5,405							
	Contributions			3,405							
G	Net investment earnings,	· •	3.	1,662							
_1	and losses			-,002							
	Grants or scholarships		<u> </u>								
е	Other expenditures for fa										
	and programs										
	Administrative expenses			7 007							
_	End of year balance			7,067						<u> </u>	********* <u>*****</u>
2	Provide the estimated pe			l as:							
а	Board designated or qua-		_1 <u>0</u> 0.00%								
b											
		%									
3a	Are there endowment fur	nds not in the possess	sion of the organ	ization that	are held and ad	ministered fo	or the			<u>, , , , , , , , , , , , , , , , , , , </u>	
	organization by:								<u>_</u>		es No_ X
	(i) unrelated organization									<del>- ' /-  </del>	
	(ii) related organizations	3								a(ii)	X
b	if "Yes" to 3a(ii), are the r	-							Li	3b	
4	Describe in Part XIV the										
Pa	irt VI Investmen	ts—Land, Build									<del></del>
	Description of inv	/estment	(a) Cost or		(b) Cost of		, ,	umulated	(d) I	Book va	ilue
			(invest	ment)	basis (d			ciation		4 4 1	- 400
1a	Land	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			1	<u>45,400</u>			<u> </u>	14:	5, <u>400</u>
b	Buildings	.,,,		-					<del></del>		
	Leasehold improvements										
d	Equipment										
е	Other	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>				<u>82,486</u>		726,720			5,760
Tota	I. Add lines 1a through 1e.	. (Column (d) must ed	qual Form 990, P	art X, colui	mn (B), line 10(c)	).) <sub>.</sub>	<u> </u>	<u></u> ▶	<u>·   1</u>	<u>, 00:</u>	<u>1,160</u>

Schedule D (Form 990) 2009

673 03/25/2011 11:47 AM	, , , , ,		
chedule D (Form 990) 2009 Hudson River Sloop Cl	learwater, Inc.	14-6049022	Page 3
Part VII Investments—Other Securities. See Form 99	90, Part X, line 12.	<u></u>	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of Cost or end-of-yea	
inancial derivatives			·
losely-held equity interests			
ther			
<b></b>	-		
<b></b>			•
<b></b>	- <del>   </del>		
	-		
	-		
- <b></b>			
-			
otal. (Column (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments—Program Related. See Form 9	90, Part X, line 13.		<u></u>
(a) Description of investment type	(b) Book value	(c) Method of	
		Cost or end-of-yea	ar market value
		<u> </u>	
		_	
	,		
		<u> </u>	
		<del> </del>	<u> </u>
		<u> </u>	
otal. (Column (b) must equal Form 990, Part X, col. (B) line 13.)  Part IX  Other Assets. See Form 990, Part X, line 15.	<u> </u>		
(a) Description	<u>'</u>		(b) Book value
Benef. Int. in Communi	ty Foundation		287,067
	<u> </u>		
		<u></u>	
Fotal. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	<u> </u>	<u> </u>	287,067
Part X Other Liabilities. See Form 990, Part X, line			
1. (a) Description of liability	(b) Amount		
Federal income taxes	47,651		
ACCRUED VACATION PAYABLE REFUNDABLE ADVANCES	5,995		
VIII OMPUNI VII AVII CRO	2,233	İ	
		]	
	Ī	\$1000000000000000000000000000000000000	

53,646

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

Sche	dule D (Form 990) 2009 Hudson River Sloop Clearwater, Inc. 14-604902		Page 4
₽a	rt XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statem	ents	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,368,250
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,182,224
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	186,026
4	Net unrealized gains (losses) on investments	4	-866
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7 _	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	-866
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	185,160
	Reconciliation of Revenue per Audited Financial Statements With Revenue per Ret	urn	
1	Total revenue, gains, and other support per audited financial statements	1	2,367,384
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
	Net unrealized gains on investments 2a -866		
b	Donated services and use of facilities 2b		
	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIV.)		
	Add lines 2a through 2d	2e	-866
3		3	2,368,250
4	Subtract line 2e from line 1  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		
a			
	02101 (20001110 1111 1111111111111111111	4c	
	Add lines 4a and 4b	5	2,368,250
5 152	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)  **Reconciliation of Expenses per Audited Financial Statements With Expenses per R	<del></del>	2,300,230
		1	2,182,224
1	Total expenses and losses per audited financial statements		2,102,224
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  2a		
a			
b	Prior year adjustments 2b		
C	Other losses 2c		
đ	Other (Describe in Part XIV.)		
е	Add lines 2a through 2d	2e	0 100 004
3	Subtract line 2e from line 1	3	2,182,224
4	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		
b	Other (Describe in Part XIV.)		
	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,182,224
Pa	rt XIV Supplemental Information		
om	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b		
nd 2	b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete		
	art to provide any additional information.		
P	art V, Line 4 - Intended Uses for Endowment Funds		
			— — — — — — — — — — — — — — — — — —
_T_	ne_Board_of Directors transferred monies to the Community Fo	unda	<u></u>
e:	stablish a Board designated endowment fund to provide an inc	ome	stream_for_
_ ੮	ne_future_of_the_Organization_and_be_a_mechanism_for_savings	<u>-</u> - ·	
	<b> </b>		
	·		
		<b>-</b> - ·	

Schedule D (Fo	orm 990) 2009 _	Hudson Rive	r Sloop	Clearwater,	Inc.	14-6049022	Page 5
Part XIV	Supplemer	Hudson Rive ntal Information (co	ntinued)				
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### SCHEDULE L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Transactions With Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Attach to Form 990 or Form 990-EZ. See separate instructions.

OMB No. 1545-0047

Open To Public Inspection

**Employer identification number** Name of the organization 14-6049022 Hudson River Sloop Clearwater, Inc. Excess Benefit Transactions (section 501(c)(3) and section 501(c)(4) organizations only). Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (c) Corrected? (b) Description of transaction (a) Name of disqualified person 1 Yes Nο Enter the amount of tax imposed on the organization managers or disqualified persons during the year ▶ \$ under section 4958 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a. (g) Written (e) In default? (f) Approved (d) Balance due (c) Original (b) Loan to (a) Name of interested person and purpose by board or principal amount agreement? or from the committee? organization? Yes Yes No Yes No No ▶ \$ Total Grants or Assistance Benefitting Interested Persons. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (c) Amount and type of assistance (b) Relationship between interested person and the (a) Name of interested person organization Part IV **Business Transactions Involving Interested Persons.** Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing (d) Description of transaction (c) Amount of (a) Name of interested person (b) Relationship between of org. revenues? interested person and the transaction organization Yes No 16,000 Wood for Sloop Renov Х Board Member Alan Shope (Listening Rock Farm)

#### **SCHEDULE 0** (Form 990)

# **Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ➤ Attach to Form 990.

2009 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Hudson River Sloop Clearwater, Inc.	Employer identification number 14-6049022
Form 990, Part III, Line 4d - All Other Achievemen	ts
PUBLIC AWARENESS - DISTRIBUTION OF RELEVANT RIVER	WATER
QUALITY INFORMATION	
ENVIRONMENTAL ACTION - DIRECT RESEARCH AND CITIZEN	
INVOLVEMENT IN WATER QUALITY AND ENVIRONMENTAL PRO	BLEMS
Form 990, Part VI, Line 6 - Classes of Members or	Stockholders
The Organization has members.	
Form 990, Part VI, Line 7a - Election of Members a	nd Their Rights
Members of the Organization are able to nominate B	oard members at the
Annual Meeting.	· · · · · · · · · · · · · · · · · · ·
Form 990, Part VI, Line 8b - Documentation by Comm	
The Board has numerous committees but none of the	committees have the
authority to act on behalf of the Organization	
Form 990, Part VI, Line 11a - Organization's Proce	ss to Review Form 990
The Board of Directors will receive a copy of the	draft 990 via e-mail
before their April Board meeting.	
Form 990, Part VI, Line 12c - Enforcement of Confl	
The Board monitors the conflict of interest disclo	sure.
Form 990, Part VI, Line 15a - Compensation Process	

Name of the organization
--------------------------

Hudson River Sloop Clearwater, Inc	Hudson	River	Sloop	Clearwater,	Inc.
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Employer identification number 14-6049022

A compensation committee which consists of different Board members decides
annually on the Executive Director's salary which is then presented and
approved by the full Board. Comparable salaries of other Executive
Directors' are examined in coming up with a fair and reasonable
compensation.
Form 990, Part VI, Line 15b - Compensation Process for Officers
Other key employees compensation is determined by the Executive Director
with comparable salaries to not-for-profits within the region.
Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation
Governing documents are made available upon request.
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(10)

Totals

Forms		Mor	tgages and Otl	her Notes Payable		
990	/ 990-PF			10/01/00	11/20/10	2009
Name		For calendar year 2009,	or tax year beginning	12/01/09 , and ending	11/30/10	entification Number
Ivallie					Employer lui	enuncation Number
Hud	son River S	Sloop Clearwat	er, Inc.		14-604	9022
For	m 990, Part	t X, Line 23 -	Additional	Information		
		Name of lands		Dalakanahi	A. alia	_
(1) <b>M</b>	&T Bank Lir	Name of lender ne of Credit		Relationshi	p to disqualified perso	Π
		mmercial Loan				
(3)						
(4)						
(5)						
(6)					· · · · ·	
(7) (8)			<u>.</u>	<u>-   </u>		
(9)						,
(10)						
	Original amount	Data of land	Maturity	D		Interest
(1)	125,00	Date of loan 0 03/03/10	date	Repayment to 12 months inte		4.000
(2)	177,00			12 months inte		4.000
(3)						
(4)						
(5)						
(6)						
(7) (8)				<u> </u>		
(9)						***
(10)						
44)	Sec	curity provided by borrower		Pu	rpose of loan	
(1) (2)						
(3)						
(4)						
(5)						
(6)						
<u>(7)</u>						
(8) (9)						
(10)		<del></del>				
<u>,</u>						
				Balance due at	В	alance due at
	Consider	ation furnished by lender		beginning of year		end of year
(1)						10,531 162,000
(2) (3)		,				102,000
(4)						
(5)					•	
(6)						
(7)				· ·		
(8)						
(9)						

172,531