

Charitable Organization Registration Statement – Form BCO – 10

For the Fiscal Year Which Ended : 9 / 30 / 04

Employer Identification # 23-7116453 Certificate # 12791

Check if registering voluntarily. (See note under "Important Information".)

1. Legal name of organization: WHITE CLAY WATERSHED ASSOCIATION

Check if name change. Previous name: _____

2. c/o DAVID HAWK

Street address 1928 15 1/2 ST

City ROCK ISLAND State IL Zip Code 61201

County CHESTER COUNTY, PA

Phone # 309 793 0422 800 # _____ Fax # _____

3. All other names used to solicit contributions: (none)

4. Organizations described in Section 162.7(a) of the Act, check section which describes organization (See footnote #2 of Instructions. Volunteer registrants do not respond.):

162.7(a)(1) 162.7(a)(2) 162.7(a)(3) 162.7(a)(4) Not Applicable

5. List type of organization (e.g. corporation, association, etc.), where established, and date established. NON-PROFIT CORPORATION, ESTABLISHED IN LANDENBERG, PA IN 1965

INCORPORATED 11/30/1970

(Initial registrants must submit copies of organizational documents such as charter, articles of incorporation, constitution, or other organizational instrument, and by-laws.)

6. Is any person compensated or do you intend to compensate any person for soliciting contributions from Pennsylvania? Yes No If "yes", give date person started or will start soliciting contributions from Pennsylvania residents. / / (Do not check "yes" if you only use or intend to only use a professional fund raising counsel.)

Items 7, and 8 need only be completed by initial registrants

7. Date organization first solicited contributions from Pennsylvania residents: / /

8. If organization solicited and received gross national contributions totaling more than \$25,000 during the fiscal year covered by this registration statement or during its current fiscal year, give date contributions first totaled more than \$25,000. / /

9. Has organization been granted IRS tax-exempt status? Yes No (If "yes", please submit copy of IRS exemption letter if not previously submitted.) If "yes", were you required to file an IRS 990 Return and Schedule A for your immediate preceding fiscal year? Yes No . (If "no", attach explanation of why organization is exempt from filing an IRS 990 Return.) ANNUAL GROSS RECEIPTS UNDER \$25,000

10. Has organization's tax-exempt status ever been denied, revoked, or modified? Yes No (If "yes", attach copy of denial, revocation, or modification.)

11. Purposes and programs for which contributions are, or will be, used:

PRESERVATION OF WATER QUALITY, CULTURAL & NATURAL RESOURCES
AND EDUCATIONAL OUTREACH

12. Manner in which contributions are solicited (eg. direct mail, telephone, etc.):

DIRECT MAIL, DISTRIBUTION OF NEWSLETTER, WEBSITE

13. Is organization registered to solicit contributions in any other state or municipality?

Yes No (If "yes", list all states and municipalities. Attach separate sheet if necessary.)

14. Names, addresses, and telephone numbers of all professional solicitors you use or intend to use to solicit contributions from Pennsylvania residents. For each entry, include the beginning and ending dates of all contracts and dates Pennsylvania residents were first solicited, or will be solicited. (Attach separate sheet if necessary.)

(none)

15. Names, addresses, and telephone numbers of all professional fund raising counsels you use or intend to use to provide services with respect to the solicitation of contributions from Pennsylvania residents. For each entry, include beginning and ending dates of all contracts and dates services began, or will begin, with respect to soliciting contributions from Pennsylvania residents. (Attach separate sheet if necessary.)

(none)

16. Attach names, addresses, and telephone numbers of any commercial coventurers under contract with your organization.

(none)

17. If you are a parent organization located in Pennsylvania, do you elect to file a combined registration covering all of your Pennsylvania affiliates? Yes No Not Applicable
(See note under "Important Information".)

18. Are you a Pennsylvania affiliate of a parent organization which has elected to file a combined registration on your behalf? Yes No (If "yes", give the name and, if available, certificate # of your parent organization. See note under "Important Information".)

(Legal name of parent organization)

(Certificate #)

19. Does your organization share revenue or formal governance with any other nonprofit corporation or unincorporated association? Yes No (If "yes", attach explanation listing name, address, type of organization, and relationship to your organization.)

20. Does any other domestic or foreign organization own a 10% or greater interest in your organization or does your organization own a 10% or greater interest in any other domestic or foreign organization? Yes No (If "yes", attach the following information for each other domestic or foreign organization: name and type of organization, whether organization is for-profit or nonprofit, and relationship of organization to your organization.)

21. Names, addresses, and telephone numbers of all offices, chapters, branches, auxiliaries, affiliates, or other subordinate units located in Pennsylvania: (Attach separate sheet if necessary.)

(none)

22. Names and addresses for: (Attach separate sheet if necessary.)

Individual(s) responsible for the custody and/or distribution of contributions:

DAVID HAWK, TREASURER
1928 15 1/2 ST
ROCK ISLAND, IL 61201

Individual(s) responsible for solicitation activities:

(same as above)

Individual(s) responsible for custody of financial records:

(same as above)

23. Attach names and addresses of all officers, directors, trustees, and executive staff officers.

(see attached sheet)

24. If you answer "Yes" to any of the following, attach a list of related individuals with names, business, and residence addresses of related parties. Are any officers, directors, trustees, or employees related by blood, marriage, or adoption to:

Any other officer, director, trustee, or employee? Yes No

Any officer, agent, or employee of any professional fundraising counsel or solicitor under contract with organization? Yes No

Any supplier or vendor providing goods or services? Yes No

25. If you answer "Yes" to any of the following, please attach full written explanations and copies of all relevant documents. Has organization or any of its officers, directors, employees, or fundraisers:

A. Been found to have engaged in unlawful practices in the solicitation of contributions or administration of charitable assets or been enjoined from soliciting contributions or are such proceedings pending in this or any other jurisdiction? Yes No

B. Had its registration or license to solicit contributions denied, suspended, or revoked by any governmental agency? Yes No

C. Entered into any legally enforceable agreement such as an assurance of voluntary compliance or discontinuance with any District Attorney, Office of Attorney General, or local or state governmental agency?
Yes No

I certify that the information provided in this registration, including all statements and documentation, is true and correct. I understand that the falsification of any statement or documentation is subject to criminal penalties for unsworn falsifications pursuant to 18 Pa. C.S. § 4904.

David R Hawk, Treasurer
Signature of Chief Fiscal Officer

Date 1/28/05

DAVID R HAWK
Type or Print Name and Title of Chief
Fiscal Officer

[Signature]
Signature of Another Authorized Officer

Date 2/7/05

THOMAS AZAWIS LONE - PRESIDENT
Type or Print Name and Title of
Another Authorized Officer

Officers

Tom Zawislak, President
120 Great Circle Rd
Landenberg, PA 19350

Edward J. O'Donnell Vice-President
103 Saint Regis Dr
Newark, DE 19711

Andrea S. Withers Secretary
255 Buttonwood Rd
Landenberg, PA 19350

David R. Hawk Treasurer
1928 15-1/2 St
Rock Island, IL 61201

PENNSYLVANIA PUBLIC DISCLOSURE FORM BCO-23

ORGANIZATION NAME:	<u>WHITE CLAY WATERSHED ASSOCIATION</u>		
CERTIFICATE NUMBER:	<u>12791</u>	FOR FISCAL YEAR ENDED:	<u>9/30/2009</u>

Part I: Gross Contributions

1) General Contributions	1	456.60
2) Gross Receipts from Special Events	2	287.00
3) Contributions from Affiliates	3	
4) Contributions Received from Federated Fundraising Organizations	4	
5) Receipts from Membership Dues in Excess of Bona Fide Dues	5	455.00
6) Gross Contributions (add lines 1 through 5)	6	1198.60

Part II: Other Income

7) Program Service Revenues	7	
8) Bona Fide Membership Dues and Assessments	8	
9) Government Grants and Contracts	9	
10) Miscellaneous Income	10	259.42
11) Total Income (add lines 6 through 10)	11	1458.02

Part III: Expenses

12) Program Services	12	5372.17
13) Administrative Expenses	13	1825.00
14) Fundraising Expenses	14	
15) Payments to Affiliated Organizations	15	
16) Other Expenses from Special Events (other than fundraising expenses)	16	306.40
17) Miscellaneous Expenses	17	36.20
18) Total Expenses (add lines 12 through 17)	18	7539.77

Part IV: Net Assets

19) Excess or (Deficit) for the Year (subtract line 18 from line 11)	19	(6081.75)
20) Net Assets or Fund Balances at Beginning of Year	20	27,219.33
21) Other Changes in Net Assets or Fund Balances (attach explanation)	21	1479.00
22) Net Assets or Fund Balances at End of Year (combine lines 19, 20, and 21)	22	22,616.58

(See Next Page for "Salaries and Expense Allowance Statement")

Explanation for "Other Changes in Net Assets or Fund Balances, line 21:

In previous years, the value of our inventory (tshirts and watershed maps) had not been included in our net asset reporting. \$1479 represents an estimate of the value of this inventory at the beginning of the fiscal year.