Form 990

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)

OMB No. 1545-0047 2004

► The organization may have to use a copy of this return to satisfy state reporting requirements. 2004, and ending

Open to Public inspection

Α			004 calendar year, or tax year beginning	2007, 0		we	7.7.
В	Chec	k (f cable	Please C Name of organization				yer identification number
П		ess cha	use IRS WESTERN WATERSHEDS PROJECT				02140
П	Name	e chang	e print or Number and street (or P.O. box if mail is not delivered to street addres	<b>:5</b> )			one number
П	Initia	ireturn	See PO BOX 1770				788-2290
H		return	Specific City or town, state or country, and ZIP + 4		F		method: X Cash Accrual
H		nded re	tions. HAILEY ID 83333			Oth	er (specify) ▶
H			Section 501(c)(3) organizations and 4947(a)(1) nonexempt	H 8	l are not ap	plicable	e to section 527 organizations.
أسسنا	•		charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).	H(a	) is this a grou	ib Letntu	for affiliates? Yes X No
G	Wel	osite:	▶ WESTERNWATERSHEDS.ORG		) If "Yes," ente		<del>, , , , , , , , , , , , , , , , , , , </del>
J	Ora	anizai		27 H(c	Are all affilia	tes inclu-	ded? See instructions.) Yes No
ĸ	Cha	ak ho	if the organization's gross receipts are normally not more than	ł			
	COF	222	The organization need not tile a return with the IRS; but if the organization a Form 990 Package in the mail, it should file a return without financial data.	rice			irn filed by an by a group ruling? Yes X No
	Son	evec a	tes require a complete return.		Group Exe	mption	Number >
				м			rganization is <b>not</b> required to
ŧ.	Gro	ss rec	eipts: Add lines 6b, 8b, 9b, and 10b to line 12 🕨 572, 986	6			rm 990, 990-EZ, or 990-PF).
Ē	ari	ETT	Revenue, Expenses, and Changes in Net Assets or Fund	Balar	10 <b>95</b> (See ir	rstruction	ons.)
5	art	1	Contributions, gifts, grants, and similar amounts received:				
Z		a	Direct public support	4	32,602	_	
0	1	ь	Indirect public support				
Ş		c	Government contributions (grants)		38,363		
Z		d	Total (add lines 1a through 1c) (cash \$ 381,071 noncash \$	8	9,894)	1d	470,965
S		2	Program service revenue including government fees and contracts (from Par	t VII, lin	e 93)	2	
``		3	Membership dues and assessments			3	
Ū	ļ	4	Interest on savings and temporary cash investments			4	
2		5	Dividends and interest from securities			5	44
	ļ		Gross rents				
ξ.	1	6a	Less; rental expenses			1	
ว์	Į	b	Net rental income or (loss) (subtract line 6b from line 6a)			- 6c	
-	R	C	Other investment income (describe >			7	
	HCKE KEN	7	Gross amount from sales of assets other (A) Securities	/B	Other		
	Ě	8a	than inventory		4,838	7	1
	N		Less: cost or other basis & sales expenses 89,894 8b	<del></del>	5,762	7	1
	Ě	þ	Gain of (loss) (attach schedule)#1 -497 8c		-924	7	**************************************
		C	Net gain or (loss) (combine line 8c, columns (A) and (B)).			8d	-1,421
		d	Special events and activities (attach schedule), if any amount is from gamin	a. chec	k here ▶ ☐	<u> </u>	
		9		, o	.,,,	'	
		a	Gross revenue (not including \$ of contributions reported on line 1a)				1
		L.	Less: direct expenses other than fundraising expenses. 9b			1	
		b	Net income or (loss) from special events (subtract line 9b from line 9a)			90	
		100	Gross sales of inventory, less returns and allowances 10a		,,,,,,,,,,,,	-	1
		10a b	Less: cost of goods sold			7	
			Gress profit or (leee) from sales of inventory (attach schedule) (subtract line	10b fro	m line 10a)	10c	1
		4.0	From Part VII, line 103)			11	7,742
		12	Total revenue (act thes 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)			12	477,330
-	<b>F</b>	13	Program services (164) line 44, column (B))			13	379,447
	3	MA	Manageria in and general (from line 44, column (C))			14	63,486
	E	15	Fundraising (from the st. column (D))			15	63,842
	omozm 527	1	Or has to Mates (attach schedule)			16	
	Ĕ		Total success (add lines 16 and 44, column (A))		, , , , , , , , , , ,	17	506,775
-	<u>J</u>	12	Excess or (deficit) for the year (subtract line 17 from line 12)			18	-29,445
	ASSET'S	10	Net assets or fund balances at beginning of year (from line 73, column (A)).			ļ	1,354,998
	ËE	20	Other changes in net assets or fund balances (attach explanation)				
	Ţ	24	Net assets or fund balances at end of year (combine lines 18, 19, and 20)				1,325,553
_	<u>5</u>	41	their assets of three behaviors at end of your combine and to, to, and by			1	Form 990 (0004)

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



Form 990 (2004) WESTERN WATERSHEDS PROJECT 94-3202140 Page 2

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

	Functional Expenses Instructions.)		/A\ ''' - 1 - 1	/mx Program	(C) Management	/D\ =
	t include amounts reported on line 6b, 5b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program	(C) and general	(D) Fundraising
22	Grants and allocations (attach schedule)					
	(cash \$ noncash \$)	22				
23	Specific assistance to individuals (attach schedule)	23				
24	Benefits paid to or for members (attach schedule)	24				<del></del>
25	Compensation of officers, directors, etc	25	20,625	20,625		
26	Other salaries and wages	26	163,278	92,706	44,437	26,135
27	Pension plan contributions	27				
28	Other employee benefits	28	317	317		
29	Payroll taxes	29	16,346	14,071	2,582	-307
30	Professional fundraising fees	30				
31	Accounting fees ,	31	2,800	100	2,700	
3 <b>2</b>	Legal fees	32	50,028	50,028		
33	Supplies	33	17,787	15,683	53	2,051
34	Telephone	34	10,876	10,876		
35	Postage and shipping	35	10,176	7,169	66	2,941
36	Occupancy	36	20,230	16,884	3,346	
37	Equipment rental and maintenance	37	3,141	3,141		
38	Printing and publications	38	33,290	19,312		13,978
39	Travel	39	11,998	9,971		2,027
40	Conferences, conventions, and meetings	40	749	129		620
41	Interest	41	3,607	234	3,373	
42	Depreciation, depletion, etc. (attach schedule)	42	6,302	6,302		
43	Other expenses not covered BANK CHARCES	43a	1,811	73	1,738	
	CONTRACT SERVICES	43b	62,870	45,357	2,531	14,982
	INSURANCE	43c	14,044	11,561	1,941	542
	MISCELLANEOUS	43d	2,592	1,000	719	873
	See attachment 8	43e	53,908	53,908		
44	Total functional expenses (add lines 22 through 43). Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	506,775	379,447	63,486	63,842
Are	t Costs. Check Lif you are following SOP 98-2.  any joint costs from a combined educational campaign as," enter (i) aggregate amount of these joint costs \$	and fun	draising solicitation	reported in (B) Prog	ram services? >	Yea X No
H Y	the amount allocated to Management and general \$		and th	v) the amount alloca	tod to Eurodrainina	
	rt III Statement of Program Service Acco	molis				***************************************
			hmonte (Secino		ted to rundialsings	
Whe	it is the organization's primary exempt purpose? 🕨	שם		tructions.)		
Serv 4947	rganizations must describe their exempt purpose achieved, publications issued, etc. Discuss achievements that 7(a)(1) nonexempt charitable trusts must also enter the a	ement are not mount	OTECT & RE in a clear and concern measurable. (Section of grants and allocated and allocated in the context of grants and grants	tructions.) STORE WATE DISSE manner. State the top 501(c)(3) and (4) at the top to the to the trans.)	RSHEDS ne number of clients organizations and	
serv 4947	at is the organization's primary exempt purpose? rganizations must describe their exempt purpose achieved, publications issued, etc. Discuss achievements that 7(a)(1) nonexempt charitable trusts must also enter the a	ement are not mount	OTECT & RE in a clear and concern measurable. (Section of grants and allocated and allocated in the context of grants and grants	tructions.) STORE WATE DISSE manner. State the top 501(c)(3) and (4) at the top to the to the trans.)	RSHEDS ne number of clients organizations and	
a	RESTORATION & EDUCATION - RE SELF-SUSTAINING NATIVE HABIT	ements are not mount STO	OTECT & RE is in a clear and cond measurable. (Section of grants and allocate RE GREENFI ON-SITE	tructions.) STORE WATE USE manner. State to DESCRIPTION 501(c)(3) and (4) Utions to others.) RE PRESERV EDUCATION	RSHEDS in number of clients organizations and TE TO A OF HIGH	
a	RESTORATION & EDUCATION - RE	ements are not mount STO	OTECT & RE is in a clear and cond measurable. (Section of grants and allocate RE GREENFI ON-SITE	tructions.) STORE WATE USE manner. State to DESCRIPTION 501(c)(3) and (4) Utions to others.) RE PRESERV EDUCATION	RSHEDS in number of clients organizations and TE TO A OF HIGH	
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te: V	Mho	alance Sheets (See Specific Instructions.)  are required, attached schedules and amounts v	vithin the description	(A) Beginning of year		(B) End of year
С	οlu	mn should be for end-of-year amounts only.		52,004	45	47,962
45	C	Cash non-interest-bearing	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	48	46	79,785
46	S	Savings and temporary cash investments			T.	
47a	A	Accounts receivable	47a		47c	
b	1	ess: allowance for doubtful accounts	47b			
48a	1 F	Pledges receivable	48a		48c	
b	3 L	Less: allowance for doubtful accounts	486		49	
49	(	Grants receivable				
50	I	Receivables from officers, directors, trustees, an	a keh embiohaas		50	
	(	(attach schedule)				
512	<b>a</b> (	Other notes and loans receivable (attach schedule)	51a			
	. ;	Less: allowance for doubtful accounts			51c	4 025
1 .	b	Less; allowance for doubted accounts		5,940	52	1,035
52					53	<u></u>
53 54		Investments securities (attach schedule)	▶ ☐ Cost ☐ FMV		54	
55	•	Investments land, buildings, and				
33	·a.	equipment basis	55a	4		
-	ь	Less: accumulated depreciation (attach		ļ	55c	
		schedule)	55b		56	<del></del>
56		investments other (attach schedule)	57a  1,363,679		1	
57	a	Land, buildings, and equipment: basis #2	57a 1,363,679			
	b	Less: accumulated depreciation (attach	57b 16,117	1,359,626	57c	1,347,562
	_	schedule)	3/0 20/22		58	
58	3	Other assets (describe	· · · · · · · · · · · · · · · · · · ·			
		Total assets (add lines 45 through 58) (must e	igual line 74)	1,417,618	59	1,476,344
59		Accounts payable and accrued expenses		32,620	60	25,791
60	-	Grants payable			61	
6		Deferred revenue	**********		62	
6:			v employees (attacii		63	27,000
'   °	•	anhadule)	,	30,000	64a	2./201
6	4a	Toy-prompt hand liabilities (attach schedule)			64b	98,000
·   -	b	Mortgages and other notes payable (attach so	hedule) , π.⊐		65	
	<b>i</b> 5	Other habilities (describe	)			
				62,620	66	150,79
6	6	Total liabilities (add lines 60 through 65) anizations that follow SFAS 117, check here	▶ X and complete lines 67			
10	Org	anizations that follow 5FA5 117, check field	- C3			3 056 356
		through 69 and lines 73 and 74. Unrestricted		1,276,746		1,256,170
F	67 ce	Temporarily restricted				07,38
N .	68 69	Permanently restricted	·	69	<u> </u>	
	Ora	panizations that do not follow SFAS 117, chec	k here ► and complete			
8		trace 70 through 74.			70	
A .	70	Control stock trust principal, or current funds	•	71		
Ā	71	Gold-in or capital surplus, or land, building, &	•	72		
	72	potained earnings, endowment, accumulated	l income, or other luttus	•	- I	
Εİ	73	Total net assets or fund balances (add line	S b/ (Utough by VI mas			<u> </u>
S		70 through 72; column (A) must equal line 19; column (B) r	pust equal line 21)	. 1,354,998		
ı				1,417,61		1,476,34

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

Form 990 (2004)	WESTERN WAT	ER	SHEDS PROJ	IECI	94-3202140	Page 4
Part IV-A	Reconciliation of Reve Financial Statements w Return (See Specific Instruc	nu /ith	e per Audited Revenue per		Reconciliation of Expenses per A Financial Statements with Expens Return	udited
per audited fir	gains s \$ ces ies \$ prior \$	а	N/A	(2)	Total expenses and losses per audited financial statements	
	not on line a: penses in 990 \$	b		c d (1)	Standard St	

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated; see Specific

0

Add amounts on lines (1) and (2) . . . .

Total expenses per line 17, Form 990

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (if not paid, enter -0)	(D) Contributions to employee benefit plans & deferred comp.	(E) Expense account and other allowances
DEBRA ELLERS	PRESIDENT			
BOISE ID	20	0		
DONALD W JOHNSON	VICE PRESIDENT			
CARLTON WA	20	0		
GENE BRAY	SECRETARY/TREAS			
MERIDIAN ID	30	0		
JONATHAN H MARVEL	EXECUTIVE DIR.			
HAILEY ID	40	15,833		
JOHN CARTER	DIRECTOR			
MENDON UT	40	4,792		
KELLEY WESTON	DIRECTOR			
HAILEY ID	5	0		
LOUISE WAGENKNECHT	DIRECTOR			
LEADORE ID	20	0		
	. ]			

Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? . . . . > Yes If "Yes," attach schedule -- see Specific Instructions.

Form 990 (2004)

TWF 12284

Add amounts on lines (1) and (2) . . . .

(line c plus line d).....

Total revenue per line 12, Form 990

	90 (2004) WESTERN WATERSHEDS PROJECT 94-3202140	<del></del>		ge <b>3</b>
orm 99	90 (2004) WESTERN WAIERDIEDS		Yes	No
Part		76	<del></del>	X
6 0	old the organization engage in any activity not previously reported to IRS711 Test, analysis determined to the IRS7,	77		X
7 V	Vere any changes made in the organizing or governing document		1	s.r
	tool arranged by the second of \$4,000 or more dilitid the Aest covered by the second of the second o	78a	777	<u> </u>
78a 🛚	of the organization have unrelated business gross income of \$1,000 or make a statement of "Yes," has it filed a tax return on Form 990-T for this year?	<del></del>	$A \setminus V$	<del></del>
		79	······································	X
79 \	Was there a liquidation, dissolution, termination, of substantial confidence and investment of granization and the dissolution with a statewide or nationwide organization) through common as the organization related (other than by association with a statewide or nationwide organization) through common as the organization related (other than by association with a statewide or nationwide organization) through common as the organization related (other than by association with a statewide or nationwide organization) through common as the organization related (other than by association with a statewide or nationwide organization).	1		<u> </u>
30a	s the organization related (other than by association with a stateward of hallottened by a state	80a		<u>x</u> _
ſ	nembership, governing bodies, trustees, onlicers, etc., to any other states	1		
b	f "Yes," enter the name of the organization ▶ and check whether it isexempt_ornonexempt.			1
	See line 81 instructions 81a N/A	. [		
		81b		X_
		Ì		
32a	Did the organization receive donated services of the use of materials, equipment of the services of the use of materials, equipment of the services of the use of materials, equipment of the services of the use of materials, equipment of the services of the use of materials, equipment of the use o	82a	<u>X.                                    </u>	<del> </del>
	substantially less than fair rental value?  If "Yes," you may indicate the value of these items here. Do not include this amount  N/A			l
b	If "Yes," you may indicate the value of these items here. By not include this annual set of the set			1
	as revenue in Part I or as an expense in Part II. (See instructions if r at tit.)  Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	<del></del>	—
вза	Did the organization comply with the public inspection requirements for retaining to quid pro quo contributions?	<u> </u>	<u>X</u>	-
b	Did the organization comply with the disclosure requirements retaining to data pro quo successful to the organization solicit any contributions or gifts that were not tax deductible?	84a		X
84a			L.	<u>,</u>
ď	If "Yes," did the organization include with every solicitation an expression tax deductible?		N/2	
			N/I	
85	501(c)(4), (5), or (6) organizations, a Were substantially all does not be substantially all doe	85b	N/I	<del>[1</del> ]
b	Did the organization make only in-house lobbying expenditures of \$2,000 or lobbying ex			
	If "Yes" was answered to eitner aba of each total			1
	walver for proxy tax owed for the prior year.  Dues, assessments, and similar amounts from members	<b>-</b> }		1
C		₹		Į
d	Section 162(e) lobbying and political expenditures.  Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices.  85e N/F	<b>-</b>		ŧ
е			L.,	
f		85g	N/	4-
g	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f to its  If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its		L.,	, ,
h			N/	귝.
				į
86	Stot(c)(7) orgs. Enter: a initiation fees and capital contributions included a N/2 Stot (c)(7) orgs. Enter: a initiation fees and capital contributions included a N/2 Stot (c)(7) orgs. Enter: a initiation fees and capital contributions included a N/2 Stot (c)(7) orgs. Enter: a initiation fees and capital contributions included a N/2 Stot (c)(7) orgs. Enter: a initiation fees and capital contributions included a N/2 Stot (c)(7) orgs. Enter: a initiation fees and capital contributions included a N/2 Stot (c)(7) orgs. Enter: a initiation fees and capital contributions included a N/2 Stot (c)(7) orgs. Enter: a initiation fees and capital contributions included a N/2 Stot (c)(7) orgs. Enter: a initiation fees and capital contributions included a N/2 Stot (c)(7) orgs. Enter: a initiation fees and capital contributions included a N/2 Stot (c)(7) orgs. Enter: a initiation fees and capital contributions included a N/2 Stot (c)(7) orgs. Enter: a initiation fees and capital contributions included a N/2 Stot (c)			1
b	Gross receipts, included on line 12, for public use of club facilities.  501(c)(12) orgs. Enter: a Gross income from members or shareholders	A:		1
87		_		Ī
þ		Δ		Ī
				į
88		-	L	1
		88	X	
			-	
89a	501(c)(3) organizations. Enter: Amount of tax imposed on the organization N/A; section 4955 ► N/A; section 4911 ► N/A; section 4912 ► N/A; section 4911 ► N/A; sectio	A		1
			-	ļ
b	501(c)(3) and 501(c)(4) orgs. Did the organization engage in any occurry and prior year? If "Yes," attach during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach		.	l,
	during the year or did it become aware of an excess benefit transaction from a prior year.  a statement explaining each transaction	89	<u>b</u>	X
			24	12
Ç	sections 4912, 4955, and 4958			$\frac{A}{A}$
	sections 4912, 4955, and 4958  Enter: Amount of tax on line 89c, above, reimbursed by the organization			/A
•			N	/A
90:				
ı		3-22	<u> 290</u>	· · · · · · · · · · · · · · · · · · ·
91	The books are in care of DONATHAN IT TANK DONATHAN TO THE BOOK STREET TO THE BOOK STREET TO THE BOOK STREET TO THE BOOK STREET TO THE BOOKS ARE IN CARE OF THE BOOKS ARE OF THE BOOKS ARE IN CARE OF			
	Located at PO BOX 1770 HATLEY IDAHO  Section 4947(a)(1) nonexempt charitable trusts filling Form 990 in lieu of Form 1041 Check here  92		<del></del>	
92	Section 4947(a)(1) nonexempt chargable trusts minig rount each management of tax-exempt interest received or accrued during the tax year			
	and enter the amount of tax-exempt interest received of aborded daring and	Fo	rm 9	90 (

rm 990 (2004) Part VII   Analysis of Income-Produc	ing Activitie	S (See Specific Institu	Eveluded	by section 512, 513, or \$14	(E)
lote: Enter gross amounts unless	9 Ullielated Data lado and		(C)	(D)	Related or exempt
therwise indicated.	(A) Business	(B)	Excl.	Amount	function income
3 Program service revenue:	code	Amount	code		
a b					
					······································
C					
d					
f Medicare/Medicald payments					<u></u>
g Fees & contracts from govt. agencies					<u>,</u>
Limiting 9 pagegements					
the manufacture of the second service of the				44	
			14	44	
	**************************************				
a debt-financed property					
b not debt-financed property					· · · · · · · · · · · · · · · · · · ·
" " " and from personal property					
				1 101	
Other Investment income			18	-1,421	
Gain or (loss) from sales of assets of that that the come or (loss) from special events	´				
101 Net income or (loss) from special cross profit/(loss) from sales of Inventory					
					7,742
103 Other revenue: a DRECERVE					7,744
bGREENFIRE PRESERVE	•				
С	-				
d	_	·····			1
	i i	1			7 742
•			0	-1,377	
•			<u>o                                    </u>		
Subtotal (add columns (B), (D), and (E))  Total (add line 104, columns (B), (D), and (	E))				6,365
Subtotal (add columns (B), (D), and (E))  Total (add line 104, columns (B), (D), and ( Note: Line 105 plus line 1d, Part I, should equal II	E))	ine 12, Part I.	vemnt P	urnoses (See Specific	6,365
Subtotal (add columns (B), (D), and (E))  Total (add line 104, columns (B), (D), and ( Note: Line 105 plus line 1d, Part I, should equal the Part VIII Relationship of Activities	E))	ine 12, Part I.  mpilshment of E	xempt P	urnoses (See Specific	6,365
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Subtotal (add columns (B), (D), and (E))  105 Total (add line 104, columns (B), (D), and (Note: Line 105 plus line 1d, Part I, should equal the Part VIII Relationship of Activities  Line No. Explain how each activity for which is organization's exempt purposes (other 103B INCOME FROM ACTIVITY PUBLIC ABOUT WATER:  Part IX Information Regarding Tax  Name, address, and EIN of corporation, partnership, or disregarded entity  VALLEY SUN LLC	to the Accordance is reported to the	ine 12, Part I.  compilshment of E  ted in column (E) of P  viding funds for such p  TH THE PRIMA  OTECTION AND  diaries and Disre  Nature of act  PLAND OWNER  A	xempt P art VII conti urposes). ARY PU HABI garded I vities	Purposes (See Specific ributed importantly to the RPOSE OF EDUCTAT RESTORAT!  Entitles (See Specific In (D) Total income 7,742	6,365  Instructions.) accomplishment of the CATING THE CON.  Instructions.)  End-of-year assets  1,340,000  Specific Instructions.)
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Subtotal (add columns (B), (D), and (E))  105 Total (add line 104, columns (B), (D), and (Note: Line 105 plus line 1d, Part I, should equal II  Part VIII Relationship of Activities  Line No. Explain how each activity for which I organization's exempt purposes (other public ABOUT WATER:  Part IX Information Regarding Tax  (A)  Name, address, and EIN of corporation, partnership, or disregarded entity  VALLEY SUN LLC  Part X Information Regarding Trax  (a) Did organization, during the year, receive	to the Accordance in the Accordance is reported in the Accordance is reported in the Accordance in the Accordance is reported in the Accordance in the Accor	ine 12, Part I.  complishment of Exted in column (E) of Policing funds for such part of the THE PRIMADITECTION AND COLOR OF THE PRIMADITECTION OF TH	xempt P art VII control urposes). RY PU HABI yities  sonal Be personal be	Purposes (See Specific ributed importantly to the RPOSE OF EDUCTAT RESTORAT:  Intitles (See Specific In (D) Total income 7,742  nefit Contracts (See on a personal benefit contract?.	6,365  Instructions.) accomplishment of the CATING THE TON.  Structions.) End-of-year assets 1,340,000  Specific Instructions.) Intract? Yes X N
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#### SCHEDULE A (Form 990 or 990-EZ)

## Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No. 1545-0047

2004

Department of the Treasury Internal Revenue Service

Supplementary information — (See separate Instructions.) ► MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

Employer Identification number Name of the organization 94-3202140 WESTERN WATERSHEDS PROJECT Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees Part I (See the instructions, List each one, If there are none, enter "None.") (e) Expense account and other allowances (d) Contributions to empl. benefit plans & deferred compensation (b) Title and average hours (a) Name and address of each employee paid more (c) Compensation per week devoted to position than \$50,000 NONE Total number of other employees paid over Compensation of the Five Highest Paid Independent Contractors for Professional Services \$50,000. (See the instructions. List each one (whether individuals or firms). If there are none, enter "None.") Part II (c) Compensation (a) Name and address of each independent contractor paid more than \$50,000 (b) Type of service LAURENCE J LUCAS 50,000 LEGAL SERVICES BOISE IDAHO 83701 Total number of others receiving over \$50,000 for Schedule A (Form 990 or 990-EZ) 2004 professional services ......

Scheo	iule A	(Form 990 or 990-EZ) 2004 WESTERN WATERSHEDS PROJECT 34-3202110	Τ.,	T
Pai	t III	Statements About Activities (See the instructions.)	Yes	No
1	attem	g the year, has the organization attempted to influence national, state, or local legislation, including any apt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid (Must equal amounts on line 38, curred in connection with the lobbying activities > \$		X
	Part \ Orga organ	VI-A, or line I of Part VI-B.)  Inizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other inizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the large activities.		
2	Durir subs taxab bene	ng the year, has the organization, either directly or indirectly, engaged in any of the following acts with any stantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any bie organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal efficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)# 5		Z-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
a b c d	Lenc	nishing of goods, services, or facilities?		X X X
e 3a	Do y you	determine that recipients quality to receive payments.).	a b	X X
b 4a b	Did	you maintain any separate account for participating donors where donors have the right to provide details and the right to provide details are right to provide detai	a b	X
Pi	art is	Reason for Non-Private Foundation Status (See the Instructions.)		
The 5 6 7 8 9		nization is not a private foundation because it is: (Please check only ONE applicable box.)  A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).  A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)  A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).  A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).  A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's nan and state		
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit of the desired by a governmental unit		i(iv).
118		An organization that normally receives a substantial part of its support from a governmental unit of from the governmental uni		
11b 12	Ø	A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and ground receipts from activities related to its charitable, etc., 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 acq organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)	uired b	ls / the
13		An organization that is not controlled by any disqualified persons (other man outlinears) managers) and described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2).	90	_
		Provide the following information about the supported organizations. (See the instructions.)  (b) Line num	ber	<del>.</del>
		(a) Name(s) of supported organization(s) from abo		~-
				_
		1 Section 500(eV4) (See the instructions.)		<u></u>

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

	You may use the worksheet in	(a) 2003	(b) 2002	(c) 2001	(d) 2000	(e) Total
	ar year (or fiscal year beginning in)  Gifts, grants, and contributions received. (Do not include unusual	488,742	363,857	341,747	250,372	1,444,718
	grants, See line 28.)	1007.				
16	Mambership fees received Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose					
18	Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1875.		521	1,750	1,876	4,147
19	Net income from unrelated business activities not included in ine 18					
20	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22	Other income. Attach a schedule. Do not include gain or (loss) fram sale of capital assets	5,636	5,386	87,629		98,651 1,547,516
23	Total of lines 15 through 22	494,378	369,764	431,126		
24	Line 23 minus line 17	494,378	369,764	431,126		
25	Enter 1% of line 23	4,944	3,698	4,311		37/3
26		Hann 40 or 11:	a Enter 2% of amoun	t in column (e), line 24	20	1 21/23
žu b		e about the name of	and amount contribute	ed by each person (of	her than a	1
			NI WANDON TOTAL OILS IUL	SOME BURNING FOOD OF		b N/A
			VAULTAIDEN, CHIBERR	INTER CI CO DI DICCO CITO	}	34/3
_		'a\/4\ toet: Enter line 24	4. column (8)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	C N/A
C -		e) for lines: 18		19		
d	Add: Altibalis from Column (	22		26b	▶ 26	
	market and the company of the compan	io lino 28d total)				ie N/A
e	Public support (line 25c military  Public support percentage	///	ANDROAD BY BOOK 1900 (		1	of N/A s
<del>f</del> 27	Organizations described or person," prepare a list for you not file this list with you	I line 12: a Fo	r amounts included in name of, and total arr	nounts received in eac each year:	h year from, each "di	squamou poroon.
#7			15E 000 0	თ+\ 23	, 215 (2000)	175,692
ŧ	For any amount included in show the name of, and amount (Include in the list organization computing the difference be	ine 17 that was receiv unt received for each to ons described in lines tween the amount rec	ed from each person ( year, that was more the 5 through 11, as well a sived and the larger ar	other than "disqualine an the <b>larger</b> of (1) th as individuals.) <b>Do no</b> t nount described in (1)	t file this list with you or (2), enter the sun	ur return. After n of these differences (th
	excess amounts) for each ye (2003)	(2002)	(2	001)	(2000)	
	c Add: Amounts from column	(e) for ilnes: 15	1,444,718	16		7c   1,444,718
,	c Add: Amounts from column 17 d Add: Line 27a total	20		21	., 💆 🙎	
	d Add: Line 27a total	567,159	and line 27b total			
						7e 877,559
		へんへいのし チャッチ・ピッキッチ ロカンコ	ent from ilha 23. COIU!!	111 (8), , , ,	_ ,	27g 56.71
						27h 0.27
	g Public support percentage h Investment income percei	stano (line 18 columi	n (e) (numerator) divi	160 by 1100 til (nem	grants during 2000 t	

Unusual Grants: For an organization described in line 10, 11, or 12 that received any unusual grants during 2000 through 2003, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the 28 nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

•	WESTERN WATERSHEDS PROJECT 94-3202140		Pa	ge <b>4</b>
Scheo		r/2\		
Par	Private School Questionnaire (See the instructions )  (To be completed ONLY by schools that checked the box on line 6 in Part IV) PAGE A  (To be completed ONLY by schools that checked the box on line 6 in Part IV) PAGE A	1/ 2	/es	No
29	Does the organization have a racially nondiscriminatory policy terrains	29		,
	governing instrument, or in a resolution of its governing busyling toward students in all its brochures,			
30	Does the organization include a statement of its racially nondiscriminatory policy to the programs, and catalogues, and other written communications with the public dealing with student admissions, programs, and	30		
	catalogues, and other written communications with the public desired and the publi	30		
31	Has the organization publicized its racially nondiscriminatory policy thought the possibilitation program, in a way that makes			
	period of solicitation for students, or during the registration period	31		<u> </u>
	the policy known to all parts of the general community it serves:  If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.)			
	R 185, plotted			
				1
32	Does the organization maintain the following:	32a		
a	Does the organization maintain the following:  Records indicating the racial composition of the student body, faculty, and administrative staff?			
b	Records documenting that scholarships and other infaricial abolitative	32b		
	basis?	32c		
c	Copies of all catalogues, brochures, announcements, and other written admissions, programs, and scholarships?	32d		1
d	Copies of all material used by the organization or on its benefit to solicity			
	If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.)			į
	If you answered "No" to any of the above, please over the same transfer of the same transfer			
				#
33	Does the organization discriminate by race in any way with respect to:			1
	Students' rights or pnvilleges?	33a	-	
ê	Students' rights of privileges r	33b		1
1	Admissions policies?,		1	
	Employment of faculty or administrative staff?	330	4_	
,	Employment of faculty or administrative state	330	1	
	d Scholarships or other financial assistance?		1	
	# October 1971	336	B	
	e Educational policies?	331		
	1 Use of facilities?	33	-	
	Use of facilities r	33	g	
	g Athletic programs?			
	h Other extracurricular activities?	. 33	h	
	h Other extracurricular activities :			#
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			111
		_		1
		- [		Ī
	anna anna anna anna anna anna anna ann	. 3	4a	
3	4a Does the organization receive any financial aid or assistance from a governmental agency?			
	to such aid ever been revoked or suspended?	. 3	4b	,, ·
	b Has the organization's right to such all even book to the statement.  If you answered "Yes" to either 34a or b, please explain using an attached statement.		-	1
	II you also los to the sections 4.01 through 4.05 of		1	1
	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of	<u> </u>	35	

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ļ	4	工件	v	raye

•	,	WESTERN WATE	RSHEDS F	ROJE	CT 94-1	3202	140	Page 5
Schedule A (Form 990 or 990	-EZ) 2004	Electing Public C	harities (See	the ins	tructions.)		-	37 / B
Part VI-A Lobbying	Expenditures by	aligible organization that	filed Form 5768	)				N/A
(To be com	pieted ONE i by and	Misted group. Check	k ▶ b if	you che		limited	control"	provisions apply. (b)
L	zation belongs to an att imits on Lobbying	Expenditures			(a) Affiliated gro totals	up	for	be completed ALL electing ganizations
(The term	"expenditures" means	amounts paid or incurre	vina)	36				
36 Total lobbying expenditure	res to influence public o	plinion (grassroots tobb	ymg),	37				
	on to influence a tectisti	BITAG DOMA (OH GOL 10 N.A.).		38			<u> </u>	
training and the second	ree fadd ines 36 800 3	***		39				
38 Total lobbying experiorus 39 Other exempt purpose e 40 Total exempt purpose ex	xpenditures	n and 39)		40				***************************************
40 Total exempt purpose ex 41 Lobbying nontaxable arr	(penditures (and illes o	from the following table	3 <b></b>					
41 Lobbying nontaxable art	Nount, Einer the arround	e lobbylng nontaxable	amount ls					
If the amount on line 46 Not over \$500,000	205	% of the amount on line	40,,,,,,	ł				
Over \$500,000 but not a	unr e+ 000 000 \$10	0.000 plus 15% of the exces	5 over \$500,000				į.	
Over \$1,000,000 but not	Lover \$1,500,000 \$17	75,000 plus 10% of the exces	s over \$1,000,000	41		<del>77777</del> 77	+	
Over \$1,500,000 but not	t over \$17,000,000 \$22	25,000 plus 5% of the excess	over \$1,500,000					
	12	,000,000		42			[	
	(antar 25% at III	ne 41)		43				
- 17	- oc Cator D- Mine &	2 15 (1)(/)() () ((((() ((() (() (() (() (() ((						
43 Subtract line 42 from line 44 Subtract line 41 from line	ne 38. Enter -0- if line 4	is more than line 38.		<u> </u>				
								M. 14 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Caution: If there is an a	amount on either line 43	or line 44, you must file r Averaging Perio	d Under Se	ction 5	01(h)			
	4-Yea	tion 501(b) election	i do not have to	COLLIDIO	te all of the five	column	s below	
(Some or	rganizations that made	266 1116 11131 9000114						
		Lobbying Exper	nditures During	4-Year	Averaging Per	riod		
		(b)	(c)		(d)			(a) Total
Calendar year (or fiscal	(a) 2004	2003	2002		200	1		10100
year beginning in) ▶					ļ			
45 Lobbying nontaxable amount				<del></del>		<del>, , , , , , , , , , , , , , , , , , , </del>		
46 Lobbying celling								
amount (150% of line 45(e))	٠.							
47 Total lobbying								
expenditures								
48 Grassroots			1					
nontaxable amount			100000000000000000000000000000000000000	777157		HACE WAS SITTLE		
49 Grassroots ceiling amount (150%		•						
of line 48(e))							ļ	
50 Graseroots lobbying								
expenditures	ulas Activity by N	onelecting Public	Charitles					
				See the	instructions.)	1 1		
	t at who man't tr	influence national, sixiu	Of JODGE JOBIGIAN		ding any	Yes	No	Amount
								<del></del>
a Volunteers		in the in own areas for		through				
	and the state of t	STERRING BLEEKLOUIGES I VE	101.00	-				
		UNIC						
e Publications, or pu	iblished or broadcast st	latements,			*****			
		government officials, or						
							<u> </u>	
Total lobbying exp	oenditures (Add illies C	a statement giving a deta	ailed description	of the l	obbying activitie	39.		- 000 TO 000 TO 00
****	THE SOON CONVERTE	Forms (Software Only) - 200-	• TW		Sch	hedule	A (Form	1990 or 990-EZ) 20
JVA 4 990A56	TWF 8920 Copyright I	Carrier American Co. C. C. C.						

WESTERN	WATERSHED	S PROJECT	94-3202140
			hine With Nonch

	(Farma 000 at 000 E7)	2004	WESTERN	WATERSHE!	DS P	ROJECT	94-320214	£0	Page 6
	(Form 990 or 990-EZ)	2004 2004	efers To a	nd Transaction	ns and	Relations	ships With Non	charita	ble
Part VII	··· • • • • • • • • • • • • • • • • • •	iwatiana /Cant	ha inetriotione	1					
51 Did t	- reporting organization	directly or indire	ctiv engage in :	any of the following	g with a	ny other orga	nization described it	n section	501(c) of
the C	ode (other than section	501(c)(3) organiz	ations) or in se	ction 527, relating	to bourk	cal organizatio	ns?		,
a Trans	ofore from the reporting i	organization to a l	noncharitable e	exempt organizatio	n or.				Yes No
715	Cach							51a(i)	X
(I)	Other assets							a(ii)	X
h Othe	r transactions:								l L.
as.	Sales or exchanges of a	assets with a none	:haritable exem	pt organization				b(l)	X X
711)	Purchases of assets fro	m a nonchantable	exempt organ	ization				b(II)	X
AUIV	Rental of facilities, equil	oment, or other as	sets					P(111)	X
(10)	Reimbursement arrange	ements			<i></i> .	,,,	,	b(lv)	X
4.0	Loans or loan quarante	es						b(v)	<del>                                     </del>
6.45	Portormance of service	s or membership	or fundraising :	solicitations ,				b(vl)	<del>\</del>
		at maked liste c	ther accets of	naid employees .				C eleatrolise	
		hava in Waa P car	nalete the follo	wina schedule. Co	olumn (D	i) snould alwa	AS 200M the ion the	ikei vaiut	trancaction
200	de other assets or servi	ces given by the	reporting organ	nization. It the orga	ınızanon	Leceived ress	Hall Ian Hance va	iue ili aliy	fratioaction
or st	naring arrangement, sho	w in column (d) t	ne value of the	goods, other asse	ts, or se	rvices receive			
(a)	(b)	•	(a)		1		( <b>d)</b> ers, transactions, & :	sharing a	rrandements
Line no.	Amount involved			pt organization	Descri	JUDII OI II AITOI	Sto, Harioacaono, et		
7,5,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		SECTION 1	V/A		<del> </del>				<u></u>
					<u> </u>			·····	
					<del>- </del>				
					-				TECHNICAL
					<b>-</b>				
					<u> </u>				
					<del> </del>				
					<del> </del>				
					-				
					<b>-</b>				
			1	And to one or mor	n tev-e	rempt organiz	ations described in		
52a is t	l he organization directly of tion 501(c) of the Code	or indirectly affiliat	ed with, or rela	in eartion 527?	6 (CC) 0/			►   Yes	s X No
sec	tion 501(c) of the Code	(other than section	n soricital) or	111 35011011 021 1					<b></b>
b If "	Yes," complete the follow	ving scheaule:		(b)	T		(c)		
	(2)	V	Type of	organization	1	Ε	escription of relation	nship	
2500	Name of organizat	uon .	1,000,	0.94.112					
SECT	ION N/A								
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AVL	4 990A56 TWF 8921	Copyright For	ms (Software Only	y) - 2004 TW			Schedule A (For	m 990 or	990-EZ) 2004

- - --

# SCHEDULE OF LAND, BUILDING & EQUIPMENT

tachment	2: page 1 - 990				
pen to Public Ispection	For calendar year 2004 or tax pe	riod beginning	, and endi	ng Employer ident	Ification Number
one of Organizati	on TERSHEDS PROJECT			94-320214	.0
<del></del>		Cost or	Accumulated	Book Value	Fair Market Value (Form 990-PF only)
	cription of Property	Other Basis 1,340,000	Depreciation	1,340,000	(, (, (, (, (, (, (, (, (, (, (, (, (, (
LAND - GRE VEHICLES EQUIPMENT	ENFIRE RANCH	10,500 13,179	7,258 8,859	3,242 4,320	
					,
				1 5 5 5 6	<u> </u>
	T	otal 1,363,679	16,117	1,347,56	4_EOGF

# SCHEDULE OF NET GAIN/(LOSS) FROM SALE OF ASSETS OTHER THAN INVENTORY

Attachment 1: page 1 - 990 Page 1, Part I, Column B, line 8a - d Other asse

	calendar year 2004 or ta	x period beginning			B, 1:	Emplo	yer identific	cation Number
· · · · · · · · · · · · · · · · · · ·	CITEDE POLITIC	ιŢ					202140	
VESTERN WATER	Description of Prop	perty		Date			nod of	Date Sold
	·			Acquis	sition	noqe	IDICION I	
Publicly trac	led securitie	: <b>5</b> :						05-04-04
IDAHO INDEPEN	JOENT BANK	and the second s		05-04			ation	09-02-04
ELI LILLY & C	10		ļ	09-02 12-15			ation	12-15-04
ORACLE CORP	)							
Other assets	<b>:</b>							
				04-1	9-01	Don	ation	08-24-04
1996 FORD EXI	PLORER		!					
				Į.				
				Sales	Cost	or	s	pecify basis
	To Whom Sold			rice	Other			Method
•				3,318	3	,390	Acquis	sition value
MARKET			(	5,338	1 5	411	Acquis	sition value
MARKET MARKET			79	9,741	80	,093	Acquis	sition value
MAKKEL					J	-		
								wikion maluo
HAILEY AUTO	BODY			4,838	15	,715	Acqui	sition value
					1			
			-		Ì			
Improvements &	Depreciation,	Gain or loss	Source	, if received	from a pa	rtnership	, trust or cap	ital gain dividends
Sales Expense	if depreciable	Gair or noo						
		-72						
		-73 -352						
	9,953	-924						
1	1,,,,,,							
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		Employer Identification Number	D Renavment Terms					Consider and Ear Market Value of the Consideration by the Lender		THE REAL PROPERTY AND THE PROPERTY AND T			AND THE RESERVE OF THE PROPERTY OF THE PROPERT		AND THE RESERVE THE PROPERTY OF THE PROPERTY O	Total Balance Due 27,000	4_E0GR20
	and ending	Employer Ident	94-3202140	Makainy Data		4		d Ear Market Vali				بالمرسابة والمراجعة					
	!			Date of Note				Occupation on	Description								
				Palance Due 7, 000	20,000												The state of the s
7, Line 63	erlod beginning			Original Amount 27,000	20,000				Sose of Loan	CAPITAL							
- 990 Page 3, Part IV, Line 63	r Calandar was DNA or tax year D	rol Caldium your born of the pro-	PROJECT	Lender's Title	EXECUTIVE DIRECTOR					OPERATING CAPITAL				A PARTY CONTRACTOR CON	AND THE PROPERTY OF THE PROPER	A CALL AND THE REAL PROPERTY AND THE REAL PR	WIT YOU
JF LOANS - 3: page 1	,		RESHEDS		JONATHAN H MARVEL EN JONATHAN H MARVEL EN				Security Provided by Borrower		And the second s					 	WT MARK COLOR
SCHEDULE C	Open to Public	Inspection	Name of Organization		JONATHAN				Int. Rate								

Attachme Open to Public Inspection Name of Organ WESTERN WELLS FA  WELLS FA  ONA Copy	OF MORTGAGES AND OTHER NOTES PAYABLE  t 4: page 1 - 990 Page 3, Part IV, Line 64b	For Cateriors year 2001   Employer Identification Nu   94-3202140	PROJECT Original Amount Balance Due Date of Note	IK .			Relationship	Purpose of Loan Descript. & Fair Market Value of Consideration by Lenicon	GREENFIRE PROPERTY OF EMAILING CAFLIFFE				Total Balance Due 98,000	4_E0GR22	Copyright Forms (Sotiware Only) - 2004 TW L0614F
- wishing with the control of the co	- <b>-  </b> <u> </u> <u>- </u>	Inspection Name of Organization		WELLS FARGO BANK					1						Copyright Forms (Software

Form 4562

# Depreciation and Amortization (Including Information on Listed Property)

OMB No. 1545-0172

(Including Information on Listed Property) 2004 Department of the Treasury Attachment internal Revenue Service ► See separate instructions. Attach to your tax return. Sequence No. 67 Name(s) shown on return Business or activity to which this form relates Identifying number WESTERN WATERSHEDS PROJECT FOR FORM 990 94-3202140 Election To Expense Certain Property Under Section 179 Note: If you have any listed property, complete Part V before you complete Part I. 102,000 2 410,000 3 4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filling separately, 102,000 (a) Description of property (b) Cost (busn. use only) (c) Elected cost 8 Total elected cost of section 179 property. Add amounts in column (c), lines 8 and 7 ...... 8 9 Tentative deduction. Enter the smaller of line 5 or line 8 ....... 9 10 102,000 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 13 Carryover of disallowed deduction to 2005. Add lines 9 and 10, less line 12, . . . . Note: Do not use Part II or Part III below for listed property, instead, use Part V. Special Depreciation Allowance and Other Depreciation (Do not include listed property.) 14 Special depreciation allowance for qualified property (other than listed property) placed in 15 Property subject to section 168(f)(1) election (see the instructions) ...... Part III MACRS Depreciation (Do not include listed property.) (See the instructions.) 6,302 18 off you are electing under section 168(I)(4) to group any assets placed in service during the tax year into one or more general asset accounts, check here..... Section B -- Assets Placed in Service During 2004 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depr. (g) Depreciation (d) Recovery (e) (f) Method (a) Classification of property year placed in service (business/investment use period Convention deduction only -- see instructions) 3-year property 5-year property 7-year property d 10-year property 15-year property f 20-year property S/L 25-year property 25 yrs. MM S/L h Residential rental 27.5 yrs. MM S/L property 27.5 yrs. Nonresidential real 39 yrs. MM S/L property MM S/L Section C -- Assets Placed in Service During 2004 Tax Year Using the Alternative Depreciation System 20 a Class life S/L b 12-year 12 yrs. S/L c 40-year S/L 40 vrs. Summary (See the instructions.) 21 Listed property. Enter amount from line 28 ......

23 For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.

22

6,302

#### SCHEDULE OF OTHER EXPENSES Attachment 8: page 1 - 990 Page 2, Part II, Line 43 and ending Open to Public For calendar year 2004 or tax period beginning Employer Identification Number Inspection 94-3202140 Name of Organization WESTERN WATERSHEDS PROJECT (C) Management (B) Program (D) Fundraising and General (A) Total Services Other Expenses 14,047 14,047 PROFESSIONAL FEES 29,368 29,368 PROGRAM EXPENSES 3,582 3,582 PROPERTY TAX 4,905 4,905 RANCH BOOKS DISTRIBUTED 2,006 2,006 WEBSITE 53,908 53,908 Page Total 53,908 53,908 Total 4 EOGR13 Copyright Forms (Software Only) - 2004 TW L0814F

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spection		641 2004 Of tax poils			Employer Idea	ntification Number
ame of Organizat	TERSHEDS	PROJECT			94-32021	4.0 EVTOTAL
Descriptio		(A) 2003	(B) 2002	(C) 2001	(D) 2000	(E) TOTAL 87,629
EASE REFU	NDS		- 205	87,629		11,022
REENFIRE		5,636	5,386			,
			F 20	87,629		98,65
]F	PAGE TOTALS	5,636 5,636	5,38 5,38			98,65
i	TOTALS	5,636	5,30	<u> </u>		4_E00

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spection	For calendar year 2004 or tax period beginning atton		Employer Identification Number 94-3202140
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