

Form **990-EZ**

Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2009

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

▶ Sponsoring organizations of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 at the end of the year may use this form.

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

A For the 2009 calendar year, or tax year beginning January 1, 2009, and ending December 31, 20 09

- B** Check if applicable:
- Address change
 - Name change
 - Initial return
 - Terminated
 - Amended return
 - Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
7 Rivers Alliance

Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
400 Seventh Street North

City or town, state or country, and ZIP + 4
La Crosse, WI 54601

D Employer identification number
01-0938132

E Telephone number
608-787-8777

F Group Exemption Number ▶

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Accounting Method Cash Accrual
Other (specify) ▶

H Check if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF)

I Website: ▶ www.7RiversRegion.com

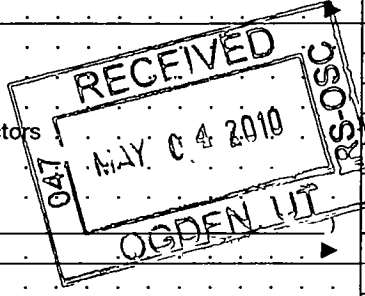
J Tax-exempt status (check only one) - 501(c) (6) ◀ (insert no) 4947(a)(1) or 527

K Check if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A Form 990-EZ or Form 990 return is not required, but if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts, if \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ **45904**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1 Contributions, gifts, grants, and similar amounts received	1	43987
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	
	4 Investment income	4	37
	5a Gross amount from sale of assets other than inventory	5a	
	b Less: cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	a Gross revenue (not including \$ _____ of contributions reported on line 1)	6a	n/a
	b Less: direct expenses other than fundraising expenses	6b	n/a
c Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	1880	
7a Gross sales of inventory, less returns and allowances	7a		
b Less: cost of goods sold	7b		
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c		
8 Other revenue (describe ▶ _____)	8		
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	45904	
Expenses	10 Grants and similar amounts paid (attach schedule)	10	
	11 Benefits paid to or for members	11	
	12 Salaries, other compensation, and employee benefits	12	2693
	13 Professional fees and other payments to independent contractors	13	9752
	14 Occupancy, rent, utilities, and maintenance	14	
	15 Printing, publications, postage, and shipping	15	616
	16 Other expenses (describe ▶ <u>Video</u>)	16	5000
	17 Total expenses. Add lines 10 through 16	17	18061
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	27843
	19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	9993
	20 Other changes in net assets or fund balances (attach explanation)	20	
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	37836



Part II Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II)

		(A) Beginning of year	(B) End of year	
22	Cash, savings, and investments	9993	22	38398
23	Land and buildings		23	
24	Other assets (describe ▶ _____)		24	
25	Total assets	9993	25	38398
26	Total liabilities (describe ▶ <u>Payroll Taxes</u>)		26	562
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	9993	27	37836

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Part III Statement of Program Service Accomplishments (See the instructions for Part III.)	Expenses (Required for section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts, optional for others)
What is the organization's primary exempt purpose? Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.	
28 _____ _____ _____ (Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	28a
29 _____ _____ _____ (Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	29a
30 _____ _____ _____ (Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	30a
31 Other program services (attach schedule) _____ (Grants \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	31a
32 Total program service expenses (add lines 28a through 31a) _____	32

Part IV List of Officers, Directors, Trustees, and Key Employees. List each one even if not compensated. (See the instructions for Part IV.)

(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 compensation	(e) Expense account and other allowances
Karen Dunn 1516 Losey Blvd., La Crosse, WI 54601	President, 1 hour	0	0	0
Christina Friederichs 859 Mankato Ave, Ste. 330, Winona, MN 55987	Vice President, .35 hour	0	0	0
Joyce Iverson 44524 Oakview Loop, Rushford MN 55974	Secretary, .35 hour	0	0	0
Dan Braund PO Box 820, La Crosse WI 54602	Treasurer, .35 hour	0	0	0
Terry Whipple PO Box 322, Camp Douglas, WI 54618	Past President, .25 hour	0	0	0
Jerry Arndt 1836 South Avenue, La Crosse, WI 54601	Director, .25 hour	0	0	0
Gary Evans 58 Johnson St, Winona, MN 55987	Director, .25 hour	0	0	0
Joe Gow 135 Graff Main Hall, La Crosse, WI 54601	Director, .25 hour	0	0	0
Jerry Hanoski PO Box 2908, La Crosse, WI 54602	Director, .25 hour	0	0	0
Jim Johnson 1250 Homer Road, PO Box 409, Winona MN 55987-0409	Director, .25 hour	0	0	0
John McHugh 16216 Oak Street, PO Box 2107, La Crosse, WI 54602	Director, .25 hour	0	0	0
Judith Ramaley PO Box 5838, Winona MN 55987-5838	Director, .25 hour	0	0	0
Lee Rasch 304 6th Street North, La Crosse, WI 54601	Director, .25 hour	0	0	0
Brent Smith 205 5th Ave. S, Ste 600, La Crosse, WI 54601	Director, .25 hour	0	0	0
Teresa Wiemerslage 21 Allamakee Street, Waukon IA 52172	Director, .25 hour	0	0	0
Cecil Wright One Organic Way, La Farge, WI 54639	Director, .25 hour	0	0	0
Ron Zeigler PO Box 684, Rushford, MN 55961	Director, .25 hour	0	0	0
Vicki Markussen 400 7th Street North, La Crosse, WI 54601	Executive Director, 20 hrs.	2411.00	0	0

Part V Other Information (Note the statement requirements in the instructions for Part V.)

		Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity		✓
34	Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes	✓	
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
a	Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements?		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?		
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		✓
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a _____		
b	Did the organization file Form 1120-POL for this year?		✓
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return?		✓
b	If "Yes," complete Schedule L, Part II and enter the total amount involved		
39	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on line 9		
b	Gross receipts, included on line 9, for public use of club facilities		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:		
	section 4911 ▶ _____ ; section 4912 ▶ _____ ; section 4955 ▶ _____		
b	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		✓
c	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 ▶ _____		
d	Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization ▶ _____		
e	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T.		✓
41	List the states with which a copy of this return is filed. ▶ Wisconsin		
42a	The organization's books are in care of ▶ Western Technical College Telephone no. ▶ 6087859594 Located at ▶ 400 7th Street North, La Crosse, WI ZIP + 4 ▶ 54601		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		✓
	If "Yes," enter the name of the foreign country: ▶ _____		
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		
c	At any time during the calendar year, did the organization maintain an office outside of the U.S.?		✓
	If "Yes," enter the name of the foreign country: ▶ _____		
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 —Check here ▶ <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43 _____		
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
45	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓

Part VI Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only. All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46-49b and complete the tables for lines 50 and 51.

- | | | | | |
|------------|--|------------|--------------------------|-------------------------------------|
| 46 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I | 46 | <input type="checkbox"/> | <input type="checkbox"/> |
| 47 | Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II | 47 | <input type="checkbox"/> | <input type="checkbox"/> |
| 48 | Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 48 | <input type="checkbox"/> | <input type="checkbox"/> |
| 49a | Did the organization make any transfers to an exempt non-charitable related organization? | 49a | <input type="checkbox"/> | <input type="checkbox"/> |
| b | If "Yes," was the related organization a section 527 organization? | 49b | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
- 50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None "

(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
None				

f Total number of other employees paid over \$100,000 ▶ _____

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving ▶ _____

Under penalties of perjury, I declare that I have examined this return, including attachments, if any, and believe that it is true, correct, and complete. Declaration of preparer (other than the taxpayer) is based on all information of which preparer has any knowledge.

Sign Here

▶ Daniel D Braund
Signature of officer

▶ Dan Braund, Treasurer
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ _____

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ _____

May the IRS discuss this return with the preparer shown above? See instructions.

ARTICLES OF INCORPORATION
OF
7 RIVERS ALLIANCE, INC.

(Nonstock Corporation)

Executed by the undersigned for the purpose of forming a Wisconsin nonstock corporation under Chapter 181 of the Wisconsin Statutes hereby adopt(s) the following Articles of Incorporation.

ARTICLE 1

Name of Corporation/Registered Office

The name of the corporation shall be 7 Rivers Alliance, Inc. The corporation's registered office is located at 400 Seventh Street North, La Crosse, Wisconsin, 54601.

ARTICLE 2

Purpose

This corporation is formed as a business league exclusively for the promotion of common business interests within the meaning of section 501(c)(6) of the Internal Revenue Cod, as amended from time to time, or the corresponding provisions of any future United States internal revenue laws. The specific purpose of the Corporation shall include, but not be limited to, promoting collaboration between communities, organizations, and individuals to improve economic development within the region.

ARTICLE 3

Status of Corporation

Section 3.1 The corporation shall be nonstock, and no dividends, liquidating dividends, or distributions shall be declared or paid to any private individual or officer or director of the Corporation.

Section 3.2 No part of the net earnings or net income of the Corporation shall inure to the benefit of any private individual or officer or director of the Corporation; provided, however, that such a person may receive reasonable compensation for personal services rendered that are necessary to carrying out the exempt purposes of the Corporation.

Section 3.3 The income of the Corporation for each taxable year to which the determination applies shall be distributed at such time and in such manner as not to subject it to tax under Section 4942 (or corresponding future provisions) of the Internal Revenue Code, as amended; and during each taxable year to which the determination applies, the Corporation shall not engage in any act of self-dealing, or retain any excess business holdings, or make any taxable expenditures as defined in Section 4941(d), 4943(c) and 4945(d), respectively (or corresponding

future provisions), of the Internal Revenue Code, as amended, or make any investments in a manner as to subject it to tax under Section 4944 (or corresponding future provisions) of the Internal Revenue Code, as amended.

ARTICLE 4
Directors and Members

The corporation will have members with the rights and privileges as set forth in the bylaws of the corporation.

The number of Directors constituting the Board of Directors shall 8 to 18 as dictated by the Board of Directors. The names and addresses of the initial Board of Directors shall be:

<u>Last Name</u>	<u>First Name</u>	<u>Address</u>
Whipple	Terry	P.O. Box 322, Camp Douglas, WI 54618
Arendt	Jerry	1910 South Avenue, La Crosse, WI 54601
Dunn	Karen	1516 Losey Blvd., La Crosse, WI 54601
Iverson	Joyce	P.O. Box 232, Caledonia, MN 55921
Braund	Dan	P.O. Box 820, La Crosse, WI 54602
Cunningham	Rusty	400 So. 3 rd St., La Crosse, WI 54601
Friederichs	Christina	859 Mankato Ave., Suite 330, Winona, MN 55987
Gallagher	Jan	120 Wimberly Hall, La Crosse, WI 54601
Gow	Joe	135 Graff Main Hall, La Crosse, WI 54601
Hanoski	Jerry	P.O. Box 2908, La Crosse, WI 54602
Johnson	Jim	1250 Homer Road, Winona, MN 55987-0409
Ramaley	Judith	P.O. Box 5838, Winona, MN 55987-5838
Rasch	Lee	304 6 th Street North, La Crosse, WI 54601
Smith	Brent	P.O. Box 1626, La Crosse, WI 54602-1626
Wiemerslage	Terry	21 Allamakee Street, Waukon, IA 52172
Wright	Cecil	One Organic Way, LaFarge, WI 54639
Ziegler	Ron	P.O. Box 684, Rushford, MN 55961

ARTICLE 5
Officers

The officers of the Corporation shall consist of a president, a vice president, a secretary, a treasurer and such other officers as may be deemed necessary from time to time by the Board of Directors. The offices of secretary and treasurer may be combined by the affirmative vote of a majority of the Board of Directors. The terms of office, qualifications, and method of election of officers shall be specified in the Bylaws.

ARTICLE 6

Liability of Directors and Officers; Indemnification

No person shall be liable to the Corporation for any loss or damage caused by any action taken or admitted to be taken by such person in his or her capacity as a director, officer, agent or employee of the Corporation if the person is acting in good faith and in a manner the person reasonably believed to be in the best interests of the Corporation. The bylaws may provide for indemnification of directors, officers, agents and employees of the Corporation in a manner not inconsistent with the laws of the State of Wisconsin.

ARTICLE 7

Amendment

These Articles of Incorporation may be amended by the directors of the Corporation by such vote as may at the time be required by the Wisconsin Nonstock Corporation Law, provided that no amendment shall substantially change the original purposes of the Corporation.

ARTICLE 8

Debt Obligations and Personal Liability

No member, officer or Director of this corporation shall be personally liable for the debts or obligations of this corporation of any nature whatsoever, nor shall any of the property of the members, officers or Directors be subject to the payment of the debts or obligations of this corporation.

ARTICLE 9

Dissolution

Upon the time of dissolution of the corporation, assets shall be distributed by the Board of Directors, after paying or making provisions for the payment of all debts, obligations, liabilities, costs and expenses of the corporation, to such organization or organizations as the board of directors shall determine which are then qualified for exemption from federal income tax under sections 501(c)(3) or 501(c)(6) of the Code or to the federal government, or to a state or local government, for a public purpose.

ARTICLE 11

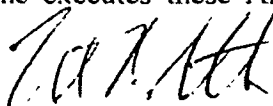
Name and Address of Registered Agent

The name and address of the initial registered agent of the Corporation is.

The name and address of each incorporator of this corporation is:

Brent P. Smith P.O. Box 1626, La Crosse, WI 54602-1626

The undersigned incorporator certifies both that he executes these Articles for the purposes herein



Brent P. Smith

STATE OF WISCONSIN)
)ss.
LA CROSSE COUNTY)

This instrument was acknowledged before me, this 31st day of December, 2009, by Brent P. Smith, to me known to be the person who executed the foregoing instrument.



Notary Public, La Crosse County, State of Wisconsin
My Commission: 07-11-2011

These articles were drafted by:
Brent P. Smith
JOHNS, FLAHERTY & COLLINS, S.C.
205 5th Avenue South, Suite 600
La Crosse, WI 54602-1626
(608) 784-5678
e-mail: brent@johnsflaherty.com