Return of Organization Exempt From Income Tax

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

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. Open to Public Inspection ► Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2018 calendar year, or tax year beginning and ending

В	Check if	C Name of organization	D Employer identifi	cation number
Г	Addr	THE VERMONT RIVER CONSERVANCY, INC.		
F	lchan	8	1 03-0	347147
占	Chan Initia return		E Telephone numbe	
F	Final	29 MAIN CODEED	(802	
_	returi termi ated	//	G Gross receipts \$	725,063.
Г	Amer	nded MONITORITED VIII OFCOS	H(a) Is this a group re	
F	returi Appli		for subordinates	
_	ltion pend	29 MAIN STREET, SUITE 11, MONTPELIER, VT 0,5	1	
ı	Tax-ex	tempt status: X 501(c)(3) 501(c) () (Insert no) 4947(a)(1) or 1527	1	list (see instructions)
		ite: WWW.VERMONTRIVERCONSERVANCY.ORG	H(c) Group exemptio	
				State of legal domicile: VT
	art I	Summary		
a)	1	Briefly describe the organization's mission or most significant activities TO PRESERV	E AND AID I	N THE
Activities & Governance		PRESERVATION OF UNDEVELOPED LAND ALONG RIVERS,		WETLANDS OF
ž.	2	Check this box if the organization discontinued its operations or disposed of more	than 25% of its net as	ssets.
Š	3	Number of voting members of the governing body (Part VI, line 1a)	3	11
S	4	Number of independent voting members of the governing body (Part VI, line 1b)	(50) 4	11
es	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a) RECEN	EU O 5	5
ž	6	Total number of volunteers (estimate if necessary)	S 6	20
Ę	7 a	Total unrelated business revenue from Part VIII, column (C), line 12	2019 J 7a	<u>75.</u>
_		Net unrelated business taxable income from Form 990-T, line 38	7b	<u> </u>
			Prior Year	Current Year
ē	8	Contributions and grants (Part VIII, line 1h)	V. 4672-556.	636,374.
enc	9	Program service revenue (Part VIII, line 2g)	0.	<u> </u>
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	37,186.	57,226.
_	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	9,911.	<u>3,429.</u>
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	719,653.	697,0 <u>2</u> 9.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	<u> </u>
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
ės	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	208,636.	225,605.
ens	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	
Expenses	þ	Total fundraising expenses (Part IX, column (D), line 25) 50,484.		
_	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	430,361.	369,015.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	638,997.	594,620.
	19	Revenue less expenses. Subtract line 18 from line 12	80,656.	102,409.
2 S			ginning of Current Year	End of Year
Net Assets or Find Balances	20	Total assets (Part X, line 16)	1,418,471.	1,627,927.
2 E	21	Total liabilities (Part X, line 26)	197,972.	380,185.
	art II	Net assets or fund balances Subtract line 21 from line 20 Signature Block	1,220,499.	1,247,742.
_		alties of perjury, I declare that I have examined this return, including accompanying schedules and statem	anto and to the heat of m	/ knowledge and holief it is
		antes or perjory, i declare that i have examined this return, including accompanying schedules and statement, and complete Declaration of propagor, (o) high than officer) is based on all information of which propagor		y knowledge and belief, it is
ıuc	, 00110	The somption propared to the p	9-18	5010
Sig	n	Signature of officer	Date	
əry Hei		STEVEN LIBBY, EXECUTIVE DIRECTOR		
16	•	Type or print name and title		
		I T	Date Check	PTIN
ai	d	Frintrype preparer's name	1/10/2019 If self-employe	-
	parer	Firm's name MUDGETT, JENNETT & KROGH-WISNER, PC	Firm's EIN	03-0340114
	Only	Firm's address P.O. BOX 937	THIII S EIN	OD ODEOTIE
	July	MONTPELIER, VT 05601-0937	Phone no / Q	02)229-9193
Ma.	the !	RS discuss this return with the preparer shown above? (see instructions)	T HORE IO. (O	X Yes No
via	y trie li	na diaduaa mia letum wiin me diedalei andwil addye (1866 matudilona)		144 1 159 110

	1990 (2018) THE VERMONT RIVER CONSERVANCY, INC. 03-034/14/ Page 2
Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission.
	TO PRESERVE AND AID IN THE PRESERVATION OF UNDEVELOPED LAND ALONG
	RIVERS, LAKES AND WETLANDS OF VERMONT; PROTECT PUBLIC ACCESS, WILDLIFE
	HABITAT, SCENIC NATURAL BEAUTY, AND ECOLOGICAL INTEGRITY.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
_	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	106.056
44	(Code) (Expenses \$ 436,276. including grants of \$) (Revenue \$) MANAGEMENT OF CONSERVATION PROJECTS. THE NEGOTIATION FOR RIGHTS,
	THAT OTHER NON-PROFIT ORGNIZATIONS OR GOVERNMENTS CAN CONTROL THEIR USE
	AND PRESERVE THE WILDLIFE HABITAT, NATURAL COMMUNITIES, AND
	BIODIVERSITY ALONG RIVERS AND STREAMS. THE GOAL IS TO PROTECT THE LANDS
	ALONG THESE WATERS OF VERMONT FOR RECREATION, EDUCATION, AND AESTHETIC
	ENJOYMENT.
4b	(Code) (Expenses \$
	<u> </u>
4c	(Code) (Expenses \$
4d	Other program services (Describe in Schedule O)
	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	Total program service expenses ► 436,276.

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Form 990 (2018) THE VERMONT RIVER CONSERVANCY, INC. Part IV Checklist of Required Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	ļ
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	١.	1	7,
	public office? If "Yes," complete Schedule C, Part I	3_	ļ	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	١.		.
_	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		₩
	Similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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	х	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	- '-	1	
Ŭ	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	_		 -
•	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?		ĺ	
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments · other securities in Part X, line 12 that is 5% or more of its total	}		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		v	
120	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
120	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		x
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	120		
~	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	x	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 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? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	, , , , , , , , , , , , , , , , , , , ,	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			x
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	,	Λ

THE VERMONT RIVER CONSERVANCY, INC. 03-0347147 Form 990 (2018) Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on 22 X Part IX, column (A), line 29 If "Yes," complete Schedule I, Parts I and III 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 Х 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete X 24a Schedule K If "No." go to line 25a 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 24c any tax-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I Х 25a b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Х 25b Schedule L. Part I Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," 26 X complete Schedule L. Part II 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member Х 27 of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV 28 instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L. Part IV 28a X A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, X director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 28c X Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation X 30 contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? Х If "Yes," complete Schedule N, Part I 31 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Х 32 Schedule N. Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х 33 sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 Part V, line 1 Х 35a 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? X 36 If "Yes." complete Schedule R. Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization X and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 37 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? 38 Note, All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Part V Check if Schedule O contains a response or note to any line in this Part V Yes No

la	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable
ь	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming
	(gambling) winnings to prize winners?

Form **990** (2018)

2018) THE VERMONT RIVER CONSERVANCY, INC.

Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V

			Yes	No
2a	, , ,			
	filed for the calendar year ending with or within the year covered by this return	<u> </u>		
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 (see instructions)			
3а	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	ļ	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	<u>3b</u>	<u> </u>	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	ŀ		·
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	 	X
b	· · · · · · · · · · · · · · · · · · ·			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	├	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	-	X
_	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
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 as charitable contributions?	6a		X
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	oa		
U	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		_	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		_x
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required		_	
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d .			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 <u>e</u>		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			1
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter. Initiation fees and capital contributions included on Part VIII, line 12			
	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1		ļ
	Section 501(c)(12) organizations. Enter	1		
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against	1		i 1
-	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.]
a	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O			}
b	Enter the amount of reserves the organization is required to maintain by the states in which the			[
	organization is licensed to issue qualified health plans			}
	Enter the amount of reserves on hand			 '
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			v
	excess parachute payment(s) during the year?	15		<u>X</u>
	If "Yes," see instructions and file Form 4720, Schedule N	40		l
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<u> </u>
	If "Yes," complete Form 4720, Schedule O		000	

THE VERMONT RIVER CONSERVANCY, INC. 03-0347147 Form 990 (2018) Part VI 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. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 11 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule 0. 11 b Enter the number of voting members included in line 1a, above, who are independent 1h Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, or trustees, or key employees to a management company or other person? 3 Х 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? Х 5 X 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X 7b persons other than the governing body? Did the organization contemporaneously document the meetings hold or written actions undertaken during the year by the following: X 8a a The governing body? X Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) No_ Yes 10a X 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b X 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c X 13 13 Did the organization have a written whistleblower policy? X Did the organization have a written document retention and destruction policy? 14 14 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? Х 15a The organization's CEO, Executive Director, or top management official X 15b Other officers or key employees of the organization 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 with a Х 16a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's 16b exempt status with respect to such arrangements? Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website ____ Another's website X Upon request Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records
__

05602

RICHARDA ERICSON - 802-229-0820

29 MAIN STREET, SUITE 11, MONTPELIER

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Form	990	(2018)	

THE VERMONT RIVER CONSERVANCY, INC.

03-0347147

Page 7

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

. Employees, and Independent Contractors

Check if Schedule O contains a	a response or note to an	y line in this Part VII
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Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"

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- 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

Check this box if neither the organization r	or any related	orga	anıza	tion	cor	npe	nsat	ated any current officer, director, or trustee						
(A) (B)				((C)			(D)	(E)	(F)				
Name and Title	Average	Position (do not check more than one						Reportable	Reportable	Estimated				
	hours per	box	box, unless person is both an officer and a director/trustee)				h an	compensation	compensation	amount of				
	week	├─	cer an	0 2 0	recic	Trus	Tee)	from	from related	other				
	(list any	iecto						the	organizations	compensation				
	hours for related	5	22		ĺ	zated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization				
	organizations	ruste	ī		8	npen		(44.2/1099-141130)		and related				
	below	la i	tona	_	9	st co	<u> </u>			organizations				
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Forme							
(1) TINO O'BRIEN	1.00	Ţ												
CHAIRMAN		X		X			L.	0.	0.	0.				
(2) KATE MCCABE	1.00													
VICE CHAIR		X		X		<u> </u>	<u> </u>	0.	0.	0.				
(3) DAVE HAJDASZ	1.00								_	_				
TREASURER		X		X				0.	0.	0.				
(4) MATISSE BUSTOS-HAWKES	1.00									•				
SECRETARY		Х		X				0.	0.	0.				
(5) JEFF NELSON	1.00	l								•				
TRUSTEE		Х				_	<u> </u>	0.	0.	0.				
(6) KYLE LANDIS-MARINELLO	1.00									•				
TRUSTEE	1 - 2 - 2	Х					<u> </u>	0.	0.	0.				
(7) ROBERT HYAMS	1.00									•				
TRUSTEE	1 00	X					<u> </u>	0.	0.	0.				
(8) RYAN MCCALL	1.00		ļ							0				
TRUSTEE	1 00	X	\vdash		_			0.	0.	0.				
(9) SCILLA GILBERT	1.00	,,							,	0				
TRUSTEE	1 00	Х						0.	0.	0.				
(10) SCOTT MULLER	1.00	x						0.	0.	٥				
TRUSTRE	1.00	Α	Н						0.	0.				
(11) STEPHAN SYZ TRUSTEE	1.00	x		ľ				0.	0.	0.				
(12) STEVE LIBBY	40.00	Α		_		-	_							
EXECUTIVE DIRECTOR	40.00			X				93,500.	0.	0.				
EARCOITVE DIRECTOR								33,300.		<u> </u>				
							_							
	<u> </u>	·				Ш								

rai	T VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees			ghe	st C	Compensated Employe	es (continued)				
	· (A)	(B)		(C)					(D)	(E)			(F)	
	Name and title Average				Pos			one	Reportable	Reportable	•	Es	timate	ed
	hours per			(do not check more than one box, unless person is both an					compensation	compensation				of
		week	officer and a director/trustee)						from	from related				
		(list any hours for	recto						the	organization			pensa	
		related	ğ	98			sated		organization	(W-2/1099-MI	5C)		om th	
		organizations	ruste	First		្នូ	nade		(W-2/1099-MISC)			· •	anızat d relat	
		below	Individual trustee or director	Institutional trustee	_	ngloy	ist co	, s					anızatı	
		line)	Į į	listi.	Officer	Key employee	Highest compensated employee	Į į						-
			_	Ē	Ť	<u> </u>	1	Ť				_		
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			<u></u>	L		L	<u></u>							
			<u> </u>				L	<u>L</u>						
		<u> </u>	L											
1b	Sub-total							ightharpoonup	93,500.		0.			0.
C	Total from continuation sheets to Part VI	I, Section A						>	0.		0.			0.
<u>d</u>	Total (add lines 1b and 1c)							<u> </u>	93,500.		0.			0.
2	Total number of individuals (including but n	ot limited to th	ose	liste	d at	oove	e) wł	no re	eceived more than \$100	,000 of reportab	le			
	compensation from the organization												-	0
													Yes	No
3	Did the organization list any former officer,		iste	e, ke	y en	nplo	yee	, or l	highest compensated e	mployee on			-	
	line 1a? If "Yes," complete Schedule J for s										1	3		<u>X</u> _
4	For any individual listed on line 1a, is the su									the organization				
	and related organizations greater than \$150											4		<u> </u>
5	Did any person listed on line 1a receive or a	-				-		elat	ed organization or indivi	dual for services	i	_	-	
	rendered to the organization? If "Yes," com	plete Schedule	e J f	or st	ıch j	oers	on					5	1	<u> </u>
	tion B. Independent Contractors			<u> </u>		_		-		0100000 (
1	Complete this table for your five highest co										pens	ation f	rom	
	the organization Report compensation for	ine calendar y	ear e	endi	ng w	/ith	or w	itnir J		ear.				
	(A) Name and business	address	NT/	יזאר	7				(B) Description of s	ervices	C	(C omper		n
			TAC	<u>N</u> E	<u> </u>			+	= 5561,61161.01.01					
								-	· · · · · · · · · · · · · · · · · · ·		-			
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								_						
2	Total number of independent contractors (ii	ncludina but n	ot lir	nite	d to	thos	se lis	sted	above) who received m	ore than				
_	\$100,000 of compensation from the organiz	-				(_							
									····					

Check if Schedule O contains a response or note to any line in this Part VIII (D) Revenue excluded from tax under (C) Related or Unrelated Total revenue exempt function business revenue revenue Contributions, Gifts, Grants and Other Similar Amounts Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c 1d d Related organizations 171,636. e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above 464,738 30,368 g Noncash contributions included in lines 1a-1f \$ 636,374 h Total. Add lines 1a-1f Business Code Program Service f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and 3 52,683. other similar amounts) 52,683. Income from investment of tax-exempt bond proceeds 4 5 Royalties (i) Real (II) Personal 75. 6 a Gross rents 0. b Less rental expenses 75. c Rental income or (loss) 75. 75. d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other assets other than inventory 28,913. b Less: cost or other basis 24,370 and sales expenses 4,543. c Gain or (loss) 4,543 d Net gain or (loss) 4,543. 8 a Gross income from fundraising events (not Other Revenue including \$ ____ of contributions reported on line 1c). See 6,973 Part IV, line 18 b Less direct expenses 3,664 3,309 309. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 а b Less. direct expenses b c Net income or (loss) from gaming activities ▶ 10 a Gross sales of inventory, less returns 45 and allowances 0. b Less. cost of goods sold 45 45 c Net income or (loss) from sales of inventory Miscellaneous Revenue **Business Code** 11 a b d All other revenue e Total. Add lines 11a-11d 697,029. 4,588 55,992. 75. Total revenue See instructions

THE VERMONT RIVER CONSERVANCY, INC. 03-0347147 Page 10 Form 990 (2018) 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). Check if Schedule O contains a response or note to any line in this Part IX (C) Management and (D) Fundraising Do not include amounts reported on lines 6b. Total expenses Program service 7b. 8b. 9b. and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals See Part IV. line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 93,500. 66,619 15,194. 11,687. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 27,161 47,220 25,970. 100,351 Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 15,721 6,566. 5,885 3,270. Other employee benefits 9 16,033. 7,687. 5,162 3,184. 10 Payroll taxes Fees for services (non-employees) 38,538 113,638. 75,100 a Management 468. 468. Legal c Accounting 17,299. 17,299 d Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 1,055 189 866. 12 Advertising and promotion 2.777. 8,806. 13,425. 1,842. Office expenses 13 897. 3,340. 5,818. 1,581 14 Information technology 15 Royalties 16 Occupancy 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 8,997 14,951 150 24,098. 19 Conferences, conventions, and meetings 1,588. 1,588 20 Interest

138

7,788.

181,657.

594,620.

1,445.

598.

0.

1,115.

178,483

95,380

436,276

50,484.

175.

138.

6,673.

3,174

1,270.

-95,380.

107,860.

598.

Payments to affiliates

c MISCELLANEOUS

e All other expenses

Insurance

Depreciation, depletion, and amortization

Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)

ь MEMBERSHIPS & SUBSCRIPT

d ALLOCATION TO PROGRAMS

Total functional expenses. Add lines 1 through 24e

Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

If following SOP 98-2 (ASC 958-720)

LAND CONSERVATION

21

23

03-0347147 Page 11 Form 990 (2018) THE VERMONT RIVER CONSERVANCY, INC. Part X Balance Sheet · Check if Schedule O contains a response or note to any line in this Part X (A) Beginning of year End of year $1\overline{18,453}$. 95,027. Cash · non-interest-bearing 4,266. 2 40,391. Savings and temporary cash investments 2 140,456. 85,399. Pledges and grants receivable, net 3 3 4 Accounts receivable, net 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete 5 Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr) Complete Part II of Sch L 6 Notes and loans receivable, net 7 8 Inventories for sale or use 755. 552. 9 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other 593,054 10<u>a</u> basis Complete Part VI of Schedule D 517,919. 580,895. 12,159 10c Less accumulated depreciation 10b 667,977. 698,108. 11 Investments - publicly traded securities 11 47,331. 48,869. 12 Investments - other securities See Part IV, line 11 12 13 13 Investments · program-related See Part IV, line 11 14 Intangible assets 14 Other assets See Part IV, line 11 15 15 1,627,927. 1.418.471. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 23,487. 17 45,928 Accounts payable and accrued expenses 17 18 18 Grants payable 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons 22 Complete Part II of Schedule L 125,000. 125,000. Secured mortgages and notes payable to unrelated third parties 23 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24) Complete Part X of 209,257. 49,485. Schedule D 380,185. 197,972. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 587,412. 580,753. Unrestricted net assets 27 476,298. 467,415. 28 28 Temporarily restricted net assets 172,331. 184,032. Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 31 31 Paid-in or capital surplus, or land, building, or equipment fund

> 1,627,927. Form 990 (2018)

1,247,742.

32

'33

1,220,499.

418,471

32

33

Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances

Total liabilities and net assets/fund balances

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

3b

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(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.

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

OMB No 1545-0047

Inspection

Name of the organization

Employer identification number 03-0347147 THE VERMONT RIVER CONSERVANCY, INC.

Pa	rt I	Reason for Public (Charity Status (/	All organizations must co	omplete th	ıs part.) Se	ee instructions						
'ne	organi	zation is not a private found	ation because it is. (For lines 1 through 12, o	heck only	one box)							
1	_	A church, convention of chi					- 1						
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ))											
3		A hospital or a cooperative											
4		A medical research organiz						the hospital's name.					
4	ш		ation operated in col	ijanotion with a nospital	described	J 111 300010	11 17 O(B)(1)(A)(III): Cittor	the troopital o training					
_		city, and state			d ar an ara	tod by a a	averamental unit describ	and in					
5	ш	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)(ıv). (Complete Part II)											
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).											
7	LX	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). (Co	omplete Part II)										
8		A community trust describe											
9	Ш	An agricultural research org	janization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a land-grant	college					
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the	name, city	, and state of the colleg	e or					
		university											
10		An organization that norma	lly receives (1) more	than 33 1/3% of its sup	port from	contributi	ons, membership fees, a	nd gross receipts from					
		activities related to its exen	npt functions - subject	ct to certain exceptions,	and (2) no	more tha	n 33 1/3% of its support	from gross investment					
		income and unrelated busin											
		See section 509(a)(2). (Cor		•									
11		An organization organized a	•	vely to test for public sa	fety See	section 50	09(a)(4).						
12		An organization organized a						purposes of one or					
		more publicly supported or											
		lines 12a through 12d that											
а		Type I. A supporting orga						aivina					
-		the supported organization											
				_	a majority .	01 1110 0110		apportg					
		organization. You must of Type II. A supporting organization.	•		tion with it	e cupport	ed organization(s), by ha	vina					
D													
		control or management o			anie perso	ons mai co	millor of manage the sup	ported					
		organization(s). You mus	•				and functionally intograt	ad weth					
С		Type III functionally inte						su willi,					
		its supported organization						t(a)					
d	L	Type III non-functionally											
		that is not functionally int	•	•	-			iveness					
		requirement (see instructi											
е		Check this box if the orga					Type I, Type II, Type III						
		functionally integrated, or	• •	nally integrated support	ing organi	zation							
f		r the number of supported o	-										
9		ide the following information Name of supported	n about the supporte	d organization(s) (iii) Type of organization	I (iv) is the orga	inization listed	(v) Amount of monetary	(vi) Amount of other					
	(1	organization	(11) (11)	(described on lines 1-10	in your govern	I	support (see instructions)	support (see instructions)					
				above (see instructions))	Yes	No	,						
		 											
		_											
					 								
													
						I							

Schedule A (Form 990 or 990 EZ) 2018 THE VERMONT RIVER CONSERVANCY, INC. 03-0347147 Page 2

Part II 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 or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Sec	Section A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received (Do not]]			
	include any "unusual grants ")	477,086.	900,994.	470,788.	672,556.	636,374.	3157798.	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	477,086.	900,994.	470,788.	672,556.	636,374.	<u>3157798.</u>	
5	The portion of total contributions			,	:	:		
	by each person (other than a							
	governmental unit or publicly					i		
	supported organization) included							
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)						119,008.	
	Public support. Subtract line 5 from line 4					. <u>. </u>	<u>3038790.</u>	
Sec	ction B. Total Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	. (f) Total	
7	Amounts from line 4	477,086.	900,994.	470,788.	672,556.	636,374.	3157798.	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources	18,584.	24,424.	23,403.	37,133.	52,683.	<u>156,227.</u>	
9	Net income from unrelated business							
	activities, whether or not the				1			
	business is regularly carried on					75.	<u>75.</u>	
10	Other income. Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part VI)						2244400	
	Total support. Add lines 7 through 10	· · ·				l	3314100.	
	Gross receipts from related activities,	•	•		Į	12	1,279.	
13	First five years. If the Form 990 is for	•	first, second, thir	d, fourth, or fifth ta	ax year as a section	n 501(c)(3)	<u> </u>	
Ser	organization, check this box and stop ction C. Computation of Publ	here ic Support Per	rcentage					
	Public support percentage for 2018 (I			oluma (fl)		14	91.69 %	
	Public support percentage for 2018 (I		•	oami (I))	ŀ	15	$\frac{91.69}{93.24}$ %	
	33 1/3% support test - 2018. If the co			n line 13 and line 1	ا ۲۰ م ۱/۵% میس			
ıva	stop here. The organization qualifies				1- 13 30 1/3/8 OF II	ioro, origon triis bu	►X	
h	33 1/3% support test - 2017. If the c		•		line 15 is 33 1/20/	or more check th		
b	and stop here. The organization quali				mie 13 i3 33 1/370	or more, check th		
17-	10% -facts-and-circumstances test	• •			13 16a or 16h a	nd line 1/1 ie 100/	or more	
17 d	and if the organization meets the "fac							
	meets the "facts-and-circumstances"					c villow the organ	<u> </u>	
h	10% -facts-and-circumstances test	•	•	• •	~	7a and line 15 is:	10% or	
D	more, and if the organization meets the	•						
	organization meets the "facts-and-circ				•		▶□	
18	Private foundation. If the organization		•	•				
	· ···ate roundation. II tile organizatio	in did not crittch a l	200 OH III IO 10, 100	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	, or look it its box a	occ manuchons		

Schedule A (Form 990 or 990-EZ) 2018	HE VERMON	T RIVER (CONSERVANC	Y, INC.	03-03/4	7147 Page 3
Part III Support Schedule for	-				/	
(Complete only if you checked			organization failed	to qualify under F	Part II If the ofgani	zation fails to
gualify under the tests listed Section A. Public Support	below, please comp	plete Part II)				
	(-) 0014	(h) 2015	(2) 2016	(d) 2017	(e)/2018	(f) Total
Calendar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e)/2016	(I) Iotal
1 Gifts, grants, contributions, and	-					
membership fees received (Do not					/	
include any "unusual grants ")			ļ		 / 	
2 Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-				/		
iness under section 513						
4 Tax revenues levied for the organ-				/		
ization'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						
7a Amounts included on lines 1, 2, and				/		
3 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				<i>,</i>		
c Add lines 7a and 7b			/			
8 Public support. (Subtract line 7c from line 6)			/			
Section B. Total Support			/			
Calendar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9 Amounts from line 6			1			
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources			,			
b Unrelated business taxable income			1			
(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 VI) 13 Total support (Add lines 9, 10c, 11, and 12)		j j				
14 First five years. If the Form 990 is for	or the organization's	s first, second/thi	rd, fourth, or fifth ta	ax year as a section	on 501(c)(3) organiz	zation,
check this box and stop here		/	<u> </u>	<u> </u>		▶ □
Section C. Computation of Pub	lic Support Pe	rcentage/				
15 Public support percentage for 2018		,	column (f))		15	%
16 Public support percentage from 201		- 1			16	%
Section D. Computation of Inve)			
17 Investment income percentage for 2					17	%
18 Investment income percentage from		,			18	%
19a 33 1/3% support tests - 2018. If the			on line 14, and line	15 is more than	33 1/3%, and line	17 is not
more than 33 1/3%, check this box a						ightharpoons
b 33 1/3% support tests - 2017. If the						and
line 18 is not more than 33 1/3%, ch		,				ightharpoons
20 Private foundation. If the organization		· 1				
		1				

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section .	A. All	Supporting	Organizations
-----------	--------	------------	----------------------

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes." explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

	Yes	No
		1
1		
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2		 -
3a		75 }
		* }
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4a		ļ
1b		-
4c		
Principality in 1994	uer s	
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9a		<u> </u>
9b		
9c		
		-
10a		
10b	L	

		<u>34/14</u>	: / Pa	age 5
Pa	rt IV Supporting Organizations (continued)			Τ.,
	the the appropriate accounted a suff or contribution from any of the following parents?		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
а		11a		
L	below, the governing body of a supported organization? A family member of a person described in (a) above?	11b	 	
		11c	 	
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI. stion B. Type I Supporting Organizations	110	!	J
	All of the state o		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,		ŀ	
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
_	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		-	
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		ļ	l
	supervised, or controlled the supporting organization	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	-		
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control	l		
	or management of the supporting organization was vested in the same persons that controlled or managed			 .
	the supported organization(s)	1		<u> </u>
Sec	tion D. All Type III Supporting Organizations			
	•		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax	ì		ł
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1_	ļ	ļ
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2	<u> </u>	<u> </u>
3	By reason of the relationship described in (2), did the organization's supported organizations have a		İ	1
	significant voice in the organization's investment policies and in directing the use of the organization's		ŀ	
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3	<u> </u>	<u> </u>
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instruction	s).		
а	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see in	struction.		Γ
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	ł		
	those supported organizations and explain how these activities directly furthered their exempt purposes,	1		
	how the organization was responsive to those supported organizations, and how the organization determined		 -	
	that these activities constituted substantially all of its activities	2a	<u> </u>	ļ
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement	2b		₩
3	Parent of Supported Organizations Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a	ļ	├
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard	3b	<u> </u>	Щ.

	edule A (Form 990 or 990 EZ) 2018 THE VERMONT RIVER CONSE			<u>03-0347147 Page 6</u>
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust or	n Nov 20, 1970 (explain in	Part VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must co	omplete S	ections A through E	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	on B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year).		=	
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d	·	
е	Discount claimed for blockage or other	- 1		
	factors (explain in detail in Part VI)	<u> </u>		
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		<u> </u>
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,	1 1		1
	see instructions)	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoveries of prior-year distributions	7	<u> </u>	
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on C - Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		<u> </u>
7	Check here if the current year is the organization's first as a non-functional	lly integrat	ted Type III supporting org	ganization (see

Schedule A (Form 990 or 990-EZ) 2018

instructions)

	dule A (Form 990 or 990 EZ) 2018 THE VERMONT R			3-0347147 Page 7
Sect	ion D - Distributions	<u> </u>		Current Year
1	Amounts paid to supported organizations to accomplish exe	mot purposes		
2	Amounts paid to perform activity that directly furthers exemp			
-	organizations, in excess of income from activity	A parposos or capportes		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ns	
4	Amounts paid to acquire exempt-use assets	os or oupported organization		
_ 	Qualified set-aside amounts (prior IRS approval required)		 	
6	Other distributions (describe in Part VI) See instructions	 	<u> </u>	
7	Total annual distributions. Add lines 1 through 6	····		
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
Ū	(provide details in Part VI) See instructions	ic organization is responsive		1
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
10	Line 8 amount divided by line 9 amount	(A)	(ii)	(iii)
Sect	ion E - Distribution Allocations (see instructions)	(ı) Excess Distributions	(ii) Underdistributions Pre-2018	Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6		<u> </u>	
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required explain in Part VI) See instructions			
3_	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
С	From 2015			, , , , , , , , , , , , , , , , , , , ,
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
	Carryover from 2013 not applied (see instructions)			
j	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2018 from Section D,			
	line 7· \$			į
а	Applied to underdistributions of prior years			1
	Applied to 2018 distributable amount			
	Remainder Subtract lines 4a and 4b from 4			t t
5	Remaining underdistributions for years prior to 2018, if			
	any Subtract lines 3g and 4a from line 2 For result greater			
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2018 Subtract lines 3h	· · · · · · · · · · · · · · · · · · ·		
•	and 4b from line 1 For result greater than zero, explain in			
	Part VI. See instructions			
7	Excess distributions carryover to 2019. Add lines 3			
•	and 4c			!
8	Breakdown of line 7			
	Excess from 2014	······································		<u> </u>
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018		-	
Ų	- <u>n</u> 0000 non E010	L		L

Schedule A	(Form 9 <u>90 or 990</u>	<u>-EZ) 2018 THE</u>	VERMONT	RIVER	<u>CONSERVA</u>	NCY,	INC.	03-0347147 Page 8
Part VI	Part IV, Section Ine 1, Part IV, Section D, lines	al Information A, lines 1, 2, 3b, 3 action D, lines 2 ai 5, 6, and 8; and P	1. Provide the e c, 4b, 4c, 5a, 6, nd 3. Part IV. Se	xplanations re , 9a, 9b, 9c, 11 ection E, lines	quired by Part II a, 11b, and 11c 1c, 2a, 2b, 3a, a	l, line 10, P c, Part IV, S ind 3b, Part	ection B, lines 1 t V, line 1, Part V	17b, Part III, line 12, and 2; Part IV, Section C, Section B, line 1e; Part V,
	(See instructions	3.)						
								
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SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

THE VERMONT RIVER CONSERVANCY, INC.

Employer identification number 03-0347147

Pa	rt I Organizations Maintaining Donor Advise	ed Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advised	d funds
	are the organization's property, subject to the organization's	s exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a		sed only
	for charitable purposes and not for the benefit of the donor	or donor advisor, or for any other purpose co	onferring
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, Pa	nt IV, line 7
1	Purpose(s) of conservation easements held by the organizat	tion (check all that apply)	
	X Preservation of land for public use (e.g., recreation or	education) Preservation of a histor	ically important land area
	X Protection of natural habitat	Preservation of a certifi	ed historic structure
	X Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	ified conservation contribution in the form of	a conservation easement on the last
	day of the tax year	1	Held at the End of the Tax Year
а	Total number of conservation easements		2a 62
b	Total acreage restricted by conservation easements		2b 973.00
С	Number of conservation easements on a certified historic st	ructure included in (a)	2c 0
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic structur	e
	listed in the National Register		2d 0
3	Number of conservation easements modified, transferred, re	eleased, extinguished, or terminated by the o	organization during the tax
	year ▶2_		
4	Number of states where property subject to conservation ea	asement is located >2_	
5	Does the organization have a written policy regarding the pe	eriodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements	ıt holds?	X Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting	, handling of violations, and enforcing conse	rvation easements during the year
	▶ <u>491</u>		
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and enforcing conservation	on easements during the year
	▶\$ <u>15,552.</u>		
8	Does each conservation easement reported on line 2(d) abo	ve satisfy the requirements of section 170(h)(4)(B)(ı)
	and section 170(h)(4)(B)(ii)?		☐ Yes ☐ No
9	in Part XIII, describe how the organization reports conservation	tion easements in its revenue and expense s	statement, and balance sheet, and
	include, if applicable, the text of the footnote to the organization	ation's financial statements that describes th	ne organization's accounting for
	conservation easements		
Pa	rt III Organizations Maintaining Collections o		ner Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under SFAS 116 (A		
	historical treasures, or other similar assets held for public ex	thibition, education, or research in furtherand	ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	ribes these items	
b	If the organization elected, as permitted under SFAS 116 (A		
	treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of publ	ic service, provide the following amounts
	relating to these items		
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial	gaın, provide
	the following amounts required to be reported under SFAS	116 (ASC 958) relating to these items	
а	Revenue included on Form 990, Part VIII, line 1		> \$
h	Assets included in Form 990. Part Y		▶ €

-		MONT RIVER							7 Page 2
Pa	rt III Organizations Maintaining C								
3	Using the organization's acquisition, accessi	on, and other record	is, check any of the	e following th	at are a s	significant	use of its	collection	items
	(check all that apply).								
а	Public exhibition d Loan or exchange programs								
b	Scholarly research	е	· L Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	n how they further	the organizat	ion's exe	empt purp	ose in Par	t XIII.	
5	During the year, did the organization solicit of	r receive donations	of art, historical tre	asures, or oth	ner sımıla	ır assets	_	_	
_	to be sold to raise funds rather than to be ma				_			_ Yes	No_
Pai	rt IV Escrow and Custodial Arran reported an amount on Form 990, Pa		ete if the organizati	on answered	"Yes" or	n Form 990	0, Part IV,	line 9, or	
1a	Is the organization an agent, trustee, custod	an or other intermed	diary for contribution	ns or other a	ssets no	t included			
	on Form 990, Part X?							Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table					_	
								Amount	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					1e			
f	Ending balance					1f_			
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or o	custodial acc	ount liab	ılıty?	L_	Yes	U No
	If "Yes," explain the arrangement in Part XIII								
Pai	t V Endowment Funds. Complete	f the organization an		orm 990, Par	t IV, line	10.			
	_	(a) Current year	(b) Prior year	(c) Two yea	irs back	(d) Three			years back
1a	Beginning of year balance	401,466,	353,082	. 34	1,357,	1	71,024.		161,379,
b	Contributions					1	69,402.		
C	Net investment earnings, gains, and losses	-7,050.	48,384	. 1	1,725.		931.		9,645,
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs						-		
	Administrative expenses								
	End of year balance	394,416,	401,466		3.082.	3	41,357.		171,024,
2	Provide the estimated percentage of the curr	-	=	a)) held as					
	Board designated or quasi-endowment	53.34	_%						
	Permanent endowment ► 44.08	% 2%							
С		2.58 %							
0-	The percentages on lines 2a, 2b, and 2c sho								
за	Are there endowment funds not in the posse	ssion of the organiza	ation that are held	and administ	erea for t	ine organiz	zation	F.	Van Na
	by								Yes No
	(i) unrelated organizations (ii) related organizations							3a(i)	X
h	If "Yes" on line 3a(ii), are the related organizations	tions listed as requi	red on Schedule B')				3a(iı) 3b	 _
4	Describe in Part XIII the intended uses of the	•		•				<u> </u>	
	t VI Land, Buildings, and Equipm		William Tallas	-					
L	Complete if the organization answered). Part IV. line 11a.	See Form 99	0. Part X	. line 10			
	Description of property	(a) Cost or o		t or other		ccumulate	ed	(d) Book	value
		basis (investr	1-7	(other)		preciation		,_,	
1a	Land	<u> </u>		30,266.				580	,266.
	Buildings	1							<u></u>
	Leasehold improvements								
	Equipment			12,788.		12,1	59.		629.
	Other								
	. Add lines 1a through 1e (Column (d) must e	qual Form 990, Part	X, column (B), line	10c)				580	,895.

Complete if the organization answered "Yes" (a) Description of security or category (including name of security)	(b) Book value			Cost or end-of-year market value
	(b) DOOK Value	·	27 01.104 01 Valuation	Joseph Grand Grand Valle
(1) Financial derivatives (2) Closely-held equity interests				
(3) Other				······································
(A)				
(B)				
(C)				
(D)				
(E)	***			
(F)				
(G)				
(H)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)				
Part VIII Investments - Program Related.				
Complete if the organization answered "Yes"	on Form 990, Part I	V, line 11c S	ee Form 990, Part X, II	ne 13.
(a) Description of investment	(b) Book value			Cost or end-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total (Col. (b) must equal Form 990, Part X, col (B) line 13.)				
Part IX Other Assets.				
Complete if the organization answered "Yes"	on Form 990, Part I	V, line 11d S	ee Form 990, Part X, II	
(a)	Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	e 15)		- .	
Part X Other Liabilities.				
Complete if the organization answered "Yes"	on Form 990, Part I			art X, line 25
1. (a) Description of liability		(p) Bo	ok value	
(1) Federal income taxes				
· · · · · · · · · · · · · · · · · · ·		2	09,257.	
(2) REFUNDABLE ADVANCE				
(3)				
(3)				
(3) (4)				
(3) (4) (5)				
(3) (4) (5) (6)				
(3) (4) (5) (6) (7)			09,257.	·

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII X Schedule D (Form 990) 2018

	tule D (Form 990) 2018 THE VERMONT RIVER CONSERVAL		03-0347147 Page 4
Part		ents With Revenue per F	Return.
	* Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		T.T.
	Total revenue, gains, and other support per audited financial statements		1
	Amounts included on line 1 but not on Form 990, Part VIII, line 12	22	
	Net unrealized gains (losses) on investments	2a 2b	┥ ┃
	Donated services and use of facilities		-
	Recoveries of prior year grants	2c	-
	Other (Describe in Part XIII)	2d	2e
	Add lines 2a through 2d Subtract line 2e from line 1	•	3
			3
	Amounts included on Form 990, Part VIII, line 12, but not on line 1.	40	
	Investment expenses not included on Form 990, Part VIII, line 7b	4a	1
	Other (Describe in Part XIII)	4b	
	Add lines 4a and 4b		4c 5
	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) XXII Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses ner	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	cinto with Expenses per	, inclair.
			1
	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25		
	_	0-	1 1
	Donated services and use of facilities	2a	
	Prior year adjustments	2b	1
	Other losses	2c	
	Other (Describe in Part XIII)	2d	
	Add lines 2a through 2d		2e
	Subtract line 2e from line 1		3
	Amounts included on Form 990, Part IX, line 25, but not on line 1	1.1	
	Investment expenses not included on Form 990, Part VIII, line 7b	4a	-
	Other (Describe in Part XIII)	4b	
	Add lines 4a and 4b		46
	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) XIII Supplemental Information.		5
		N/ lune 4h and 0h Dart V lune	4 Post V Issa O Post VI
	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part I		4, Part X, line 2, Part XI,
iines 2	d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any addi	tional information	
			
PAR	T II, LINE 5:		
<u>t WV</u>	I II, DINE J:		
тне	ORGANIZATION HAS A STEWARDSHIP POLICY. MO	ONTTORING IS PER	REORMED IN
11111	OXOMITERATION HAD A DIEWANDONII TODICI. IX	MITORING ID I ZI	,
ACC	ORDANCE WITH THE POLICY.		
1100	OLDINGS WITH THE TOPICI.		
PAR	T II, LINE 9:		
EAS	EMENTS ACQUIRED BY THE ORGANIZATION ARE CO	ONSERVATION EASE	EMENTS AND
REP	RESENT NUMEROUS RESTRICTIONS OVER THE USE	AND DEVELOPMENT	OF LAND NOT
		·	
OWN	ED BY THE ORGANIZATION. SINCE THESE EASEME	ENTS HAVE NO MAR	RKET VALUE, AND
THE	REFORE NO FUTURE ECONOMIC BENEFIT, THEY A	RE NOT RECORDED	AS ASSETS IN
THE	STATEMENT OF FINANCIAL POSITION. ALL EASE	EMENTS ACOUIRED	BY PURCHASE
ARE	EXPENSED IN THE STATEMENT OF ACTIVITIES.	IN ALL CASES. T	HE
ORG.	ANIZATION MONITORS ACTIVITIES ON THE LAND	AND ENFORCES RE	ESTRICTIONS.
	10-29-18		Schedule D (Form 990) 2018

Schedule D (Form 990) 2018 THE VERMONT RIVER CONSERVANCY, INC. 03-0347147 Page 5 Part XIII Supplemental Information (continued)
- Cappellional Internation (commune)
PART_V, LINE 4:
THE ORGANIZATION MAINTAINS AND MANAGES AN ENDOWMENT FUND, WHICH INCLUDES
BOTH DONOR-RESTRICTED ENDOWMENT FUNDS AND ASSETS DESIGNATED BY THE BOARD
OF DIRECTORS TO FUNCTION AS ENDOWMENTS. INVESTMENT INCOME IS INTENDED TO
SUPPORT GENERAL OPERATIONS AND SPECIFIC CONSERVATION PROJECTS.
PART X, LINE 2:
THE ORGANIZATION BELIEVES THAT IT HAS APPROPRIATE SUPPORT FOR ANY TAX
POSITIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS
THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS. THE 2017, 2016, AND 2015
TAX YEARS ARE OPEN FOR POSSIBLE EXAMINATION BY THE INTERNAL REVENUE
SERVICE.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

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

Employer identification number

	THE VERMONT	RIVER	CONSERVAN	CY, INC.	03-0	<u> 347</u>	147	
Pa	rt I Types of Property		<u> </u>					
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d Method of d noncash contrib	etermir		s
1	Art · Works of art							
2	Art - Historical treasures							
3	Art · Fractional interests		·					
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property			<u> </u>				
9	Securities - Publicly traded							
10	Securities - Closely held stock							
	-							
11	Securities - Partnership, LLC, or							
40	trust interests				<u> </u>			
12	Securities - Miscellaneous							
13	Qualified conservation contribution -			,				
	Historic structures	v	1		APPRAISAL V	7 T T T T T T T T T T T T T		
14	Qualified conservation contribution - Other	X		30,230.	APPRAISAL	/ALIO	<u> </u>	
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other							
18	Collectibles							
19	Food inventory						_	
20	Drugs and medical supplies						_	
21 .	Taxidermy				<u> </u>			
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► (<u>SKI TICKETS</u>)	X	1	138.	FAIR VALUE			
26	Other • ()							
27	Other ()							
28	Other (
29	Number of Forms 8283 received by the organiz	zation during	g the tax year for c	ontributions				
	for which the organization completed Form 828	83, Part IV, I	Donee Acknowledg	gement 29				
							Yes	No
30a	During the year, did the organization receive by	y contributio	on any property rep	orted in Part I, lines 1 throug	gh 28, that it			!
	must hold for at least three years from the date	of the initia	al contribution, and	which isn't required to be u	sed for ,			1
	exempt purposes for the entire holding period?	?				30a		X
þ	if "Yes," describe the arrangement in Part II							,
31	Does the organization have a gift acceptance p	oolicy that re	equires the review	of any nonstandard contribu	tions?	31		X
	Does the organization hire or use third parties of							
	contributions?		-			32a		X
b	If "Yes," describe in Part II							1
33	If the organization didn't report an amount in co	olumn (c) fo	r a type of propert	y for which column (a) is che	cked,			1
	describe in Part II				·	<u> </u>		,

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2018

Schedule	M (Form 990) 2018	THE VERMONT	RIVER	CONSERVANCY	, INC.	03-0347147	Page 2
Part II	Supplemental . is reporting in Part	I Information. Prove t I, column (b), the numb dditional information	de the inform per of contrib	nation required by Part I, outlons, the number of ite	lines 30b, 32b, an ems received, or a	d 33, and whether the organization of both. Also com	ation plete
							-
							
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE VERMONT RIVER CONSERVANCY, INC. **Employer identification number** 03-0347147

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
VERMONT; PROTECT PUBLIC ACCESS, WILDLIFE HABITAT, SCENIC NATURAL
BEAUTY, AND ECOLOGICAL INTEGRITY.
FORM 990, PART VI, SECTION B, LINE 11B:
THE 990 WILL BE REVIEWED BY THE EXECUTIVE DIRECTOR, ASSISTANT DIRECTOR,
COMMUNICATIONS MANAGER AND BOARD TREASURER.
FORM 990, PART VI, SECTION B, LINE 12C:
BOARD MEMBERS SIGN A CONFLICT OF INTEREST POLICY WHEN THEY JOIN THE BOARD.
IT IS FREQUENTLY DISCUSSED AT BOARD MEETINGS WHETHER THERE IS A CONFLICT OF
INTEREST WITH CERTAIN TYPES OF PROJECTS. IF THERE MIGHT BE, BOARD MEMBERS
MAY BE ASKED TO RECUSE THEMSELVES FROM VOTING ON ANY MATTERS REGARDING THE
PROJECT.
FORM 990, PART VI, SECTION B, LINE 15A:
COMPARATIVE DATA IS USED TO ESTABLISH SALARY.
FORM 990, PART VI, SECTION C, LINE 19:
UPON WRITTEN REQUEST, SOME DOCUMENTS ARE AVAILABLE ON THE ORGANIZATION'S
WEBSITE.

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Related Organizations and Unrelated Partnerships

► Attach to Form 990.

THE VERMONT RIVER CONSERVANCY, INC.

2018 Open to Public Inspection

OMB No 1545-0047

Employer identification number 03-0347147

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

Direct controlling entity ε End-of-year assets Total income Legal domicile (state or Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33 foreign country) Primary activity Name, address, and EIN (if applicable) of disregarded entity

| Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year

(a)	(q)	(2)	(p)	(e)	Œ	ō)	
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or	Exempt Code	Public charity	Direct controlling	Section 512(b)(13) controlled	12(b)(13) olled 5v?
				501(c)(3))	ì	Yes	2
VERMONT RIVERLANDS, LLC - 83-2558595							
29 MAIN STREET SUITE 11					JERMONT RIVER		
MONTPELIER VT 05602	LAND CONSERVATION	VERMONT	501(C)(3)		CONSERVANCY		×
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	ľ						
		•					

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2018

03-0347147

Page 2

Schedule R (Form 990) 2018 THE VERMONT RIVER CONSERVANCY, INC.

Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year Part III

General or Percentage managing ownership 3 Yes 9 Code V-UBI camount in box 20 of Schedule - K-1 (Form 1065) $\boldsymbol{\epsilon}$ **Disproportionate** Yes allocations? Ξ Share of end-of-year assets (a) Share of total income ε Predominant income (related, unrelated, excluded from tax under sections 512-514) e Direct controlling entity <u>©</u> (c)
Legal
domicile
(state or
foreign Primary activity æ Name, address, and EIN of related organization <u>a</u>

part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year

		5 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3											
	ز ت	512(b)(13) controlled	entity /	S L									
	3	Percentage ownership											
	(6)	Share of end-of-year	assets				:						
	ω)	Share of total									_		
	(e)	Type of entity (C corp, S corp	or trust)							•			
	(p)	rolling											
	(၁)	Legal domicile (state or	foreign country)										
iiig tie tak year	(q)	Primary activity				•							
digalizations deated as a corporation of the culling the tax year	(a)	Name, address, and EIN of related organization											

Schedule R (Form 990) 2018

Page 3

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

Note: Complete line 1 if any entity is listed in Date II III or IV of this school ile				V V
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?	is with one or more rel	ated organizations listed i	n Parts II-IV?	+-
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	`			Ta X
b Gift, grant, or capital contribution to related organization(s)				ф Ж
c Gift, grant, or capital contribution from related organization(s)				بر
d Loans or loan guarantees to or for related organization(s)				1d X
e Loans or loan guarantees by related organization(s)				1e X
f Dividends from related organization(s)				
i Exchange of assets with related organization(s)				
j Lease of facilities, equipment, or other assets to related organization(s)				1; X
k Lease of facilities, equipment, or other assets from related organization(s)				1k X
I Performance of services or membership or fundraising solicitations for related organization(s)	anization(s)			1 ×
m Performance of services or membership or fundraising solicitations by related organization(s)	ınızation(s)			tm X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	ion(s)			t X
 Sharing of paid employees with related organization(s) 				ot X
 Beimbursement paid to related organization(s) for expenses 				To T
q Reimbursement paid by related organization(s) for expenses				
r Other transfer of cash or property to related organization(s)	,			1 x x
If the answer to any of the above is "Yes," see the instructions for infor-	who must complete th	is line, including covered	mation on who must complete this line, including covered relationships and transaction thresholds	
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	ıvolved
(1)				
(2)				
(5)				
(9)				
832163 10-02-18			Schedule	Schedule R (Form 990) 2018

Part VI] Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(k) centage nership) 2018
Perc own)66 u
(j) neral or naging urtner? s No			, "		Forn
Gen O man Par Yes					е В (
(h) (i) (j) (k) Dispropor- Code V-UBI General or Percentage unitations of Schedule K-1 Ves No (Form 1065) Yes No	•				Schedule R (Form 990) 2018
opor- ate nons?					
Dispropuent tonate allocation					
(g) Share of end-of-year assets					
(f) Share of total					
(e) Are all partners sec 501(c)(3) Orgs 7 Yes No					
Are all partners sec 501(c)(3) orgs?		 		 	
(d) Predominant incomic (related, unrelated, excluded from tax unc sections 512-514)					
(c) Legal domicile (state or foreign country)					
(b) Primary activity					
(a) Name, address, and EIN of entity					

Schedule R	(Form 990) 2018	THE '	VERMONT	RIVER	CONSERVAN	NCY,	INC.	03-03	<u>47147</u>	Page 5
Part VIII	(Form 990) 2018 Supplemental Info	rmation.								-
	Provide additional inform	ation for re	sponses to qu	estions on S	chedule R See ins	structions	3			
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