

# Return of Organization Exempt From Income Tax

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

**2009**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

**A** For the **2009** calendar year, or tax year beginning **OCT 1, 2009** and ending **SEP 30, 2010**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type.  See Specific Instructions.	<b>C</b> Name of organization <b>RAILS-TO-TRAILS CONSERVANCY</b> Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>2121 WARD CT., NW 5TH FLOOR</b> City or town, state or country, and ZIP + 4 <b>WASHINGTON, DC 20037</b>	<b>D</b> Employer identification number <b>52-1437006</b>
		<b>E</b> Telephone number <b>(202) 331-9696</b>	<b>G</b> Gross receipts \$ <b>7,704,737.</b>
		<b>F</b> Name and address of principal officer: <b>KEITH LAUGHLIN</b> <b>SAME AS C ABOVE</b>	<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c) ( <b>3</b> ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>J</b> Website: ▶ <b>WWW.RAILSTOTRAILS.ORG</b>			
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶		<b>L</b> Year of formation: <b>1985</b>	<b>M</b> State of legal domicile: <b>DC</b>

**Part I Summary**

	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>DEDICATED TO PRESERVE AND TRANSFORM UNUSED RAIL CORRIDORS INTO LINEAR PARKS.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
Activities & Governance	<b>3</b> Number of voting members of the governing body (Part VI, line 1a) .....	<b>3</b>	<b>12</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) .....	<b>4</b>	<b>12</b>
	<b>5</b> Total number of employees (Part V, line 2a) .....	<b>5</b>	<b>38</b>
	<b>6</b> Total number of volunteers (estimate if necessary) .....	<b>6</b>	<b>5</b>
	<b>7a</b> Total gross unrelated business revenue from Part VIII, column (C), line 12 .....	<b>7a</b>	<b>0.</b>
	<b>b</b> Net unrelated business taxable income from Form 990-T, line 34 .....	<b>7b</b>	<b>0.</b>
	Revenue	<b>8</b> Contributions and grants (Part VIII, line 1h) .....	<b>Prior Year</b> <b>5,871,804.</b>
<b>9</b> Program service revenue (Part VIII, line 2g) .....		<b>570,999.</b>	<b>699,133.</b>
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) .....		<b>508.</b>	<b>&lt;17,604.&gt;</b>
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) .....		<b>137,368.</b>	<b>147,486.</b>
<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) .....		<b>6,580,679.</b>	<b>5,675,103.</b>
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) .....		<b>139,130.</b>	<b>488,143.</b>
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) .....			
Expenses	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) .....	<b>2,690,450.</b>	<b>2,631,774.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) .....	<b>65,000.</b>	<b>73,500.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>834,534.</b>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) .....	<b>2,732,106.</b>	<b>2,927,165.</b>
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) .....	<b>5,626,686.</b>	<b>6,120,582.</b>
	<b>19</b> Revenue less expenses. Subtract line 18 from line 12 .....	<b>953,993.</b>	<b>&lt;445,479.&gt;</b>
Net Assets or Fund Balances	<b>20</b> Total assets (Part X, line 16) .....	<b>Beginning of Current Year</b> <b>4,248,427.</b>	<b>End of Year</b> <b>3,776,008.</b>
	<b>21</b> Total liabilities (Part X, line 26) .....	<b>1,455,034.</b>	<b>1,325,920.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20 .....	<b>2,793,393.</b>	<b>2,450,088.</b>

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here	Signature of officer: Date: <b>2/9/11</b>	
	Type or print name and title: <b>Keith Laughlin, President</b>	
Paid Preparer's Use Only	Preparer's signature: Date: <b>2-7-11</b> Firm's name (or yours if self-employed), address, and ZIP + 4: <b>RUSFA, P.C.</b> <b>1899 L STREET, NW, SUITE 900</b> <b>WASHINGTON, DC 20036</b>	Check if self-employed <input type="checkbox"/> Preparer's identifying number (see instructions) EIN ▶ Phone no. ▶ <b>(202) 822-5000</b>

May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission: SEE SCHEDULE O FOR CONTINUATION RAILS-TO-TRAILS CONSERVANCY (RTC), THE NATION'S LARGEST TRAILS ORGANIZATION WITH OVER 150,000 MEMBERS AND SUPPORTERS, IS DEDICATED TO WORKING WITH COMMUNITIES TO PRESERVE AND TRANSFORM UNUSED RAIL CORRIDORS INTO LINEAR PARKS THAT ENHANCE THE HEALTH OF AMERICA'S

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No 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? [ ] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 (Code: ) (Expenses \$ 1,582,525. including grants of \$ 321,643. ) (Revenue \$ 119,060. ) DIRECT PROJECT ASSISTANCE/RESEARCH - RTC ASSISTS IN BUILDING TRAILS THROUGH A VARIETY OF PROGRAMS. OUR EARLY WARNING SYSTEM NOTIFIES COMMUNITIES AND STATE AND LOCAL AGENCIES OF UPCOMING RAILWAY ABANDONMENT. RTC PROVIDES TECHNICAL ASSISTANCE THROUGH THE TRAILDART PROGRAM THAT PROVIDES A DEVELOPMENT ASSISTANCE RESPONSE TEAM FOR RAIL-TRAIL PROJECTS AND COMPREHENSIVE RESOURCES ONLINE TO ADDRESS COMMON QUESTIONS, ISSUES AND BEST PRACTICES. A LIST SERVE IS AVAILABLE TO CONNECT TRAIL ADVOCATES, MANAGERS, AND PROFESSIONALS FROM AROUND THE COUNTRY.

4b (Code: ) (Expenses \$ 1,099,628. including grants of \$ 149,800. ) (Revenue \$ 438,294. ) REGIONAL PROGRAMS - RTC MAINTAINS FIELD OFFICES IN THE NORTHEAST, MIDWEST, SOUTH AND WEST TO SUPPORT RAIL-TRAIL DEVELOPMENT AT THE LOCAL LEVEL. REGIONAL OFFICE ACTIVITIES INCLUDE PROMOTION OF LOCAL POLICY TO SUPPORT TRAIL BUILDING, DEVELOPMENT OF STATEWIDE TRAIL INVENTORIES AND DEVELOPMENT PLANS, TECHNICAL ASSISTANCE FOR LOCAL PROJECTS, AND TRAINING AND EDUCATION FOR COMMUNITIES AND TRAIL BUILDING GROUPS.

4c (Code: ) (Expenses \$ 870,275. including grants of \$ 16,700. ) (Revenue \$ 22,514. ) PUBLIC INFORMATION/EDUCATION - RTC PROMOTES THE BENEFITS OF RAIL TRAILS TO THE PUBLIC. RAIL TRAILS PROVIDE SAFE PLACES FOR CYCLISTS, WALKERS, RUNNERS AND ALL TRAILS USERS TO EXERCISE AND RECREATE. RTC HELPS COMMUNITIES OVERCOME SOME OF THEIR BIGGEST CHALLENGES. OFFERING ACTIVE TRANSPORTATION SOLUTIONS - TRANSPORTATION POWERED BY HUMAN ENERGY - RAIL TRAILS RELIEVE TRAFFIC CONGESTION, IMPROVE CLIMATE AND REDUCE OBESITY - MAKING COMMUNITIES HEALTHIER PLACES. RTC PROVIDES RAIL-TRAIL INFORMATION THROUGH THEIR TRAILLINK.COM WEBSITE, QUARTERLY MAGAZINE, E-NEWS, MEDIA OUTLETS AND PUBLICATIONS.

4d Other program services. (Describe in Schedule O.) (Expenses \$ 1,059,748. including grants of \$ ) (Revenue \$ 141,779. )

4e Total program service expenses \$ 4,612,176.

Part IV Checklist of Required Schedules

Table with columns for question number, question text, and Yes/No response boxes. Rows include questions 1 through 20, with sub-questions 12a and 14a/b. Responses are marked with 'X' or 'N/A'.

**Part IV Checklist of Required Schedules** (continued)

	Yes	No
21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i>		X
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 any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
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? <i>If "Yes," complete Schedule L, Part I</i>		X
26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>		X
35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36 <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	X	

Note. All Form 990 filers are required to complete Schedule O.

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
1a	16		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2a	38		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <i>Note.</i> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
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?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
6b			
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
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?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7b			
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
7c			
d	If "Yes," indicate the number of Forms 8282 filed during the year		
7d			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7e			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7f			
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
7g			
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		
7h			
8	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year? N/A		
8			
9	<b>Sponsoring organizations maintaining donor advised funds.</b>		
a	Did the organization make any taxable distributions under section 4966? N/A		
9a			
b	Did the organization make a distribution to a donor, donor advisor, or related person? N/A		
9b			
10	<b>Section 501(c)(7) organizations.</b> Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12 N/A		
10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
10b			
11	<b>Section 501(c)(12) organizations.</b> Enter:		
a	Gross income from members or shareholders N/A		
11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
11b			
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
12b			

**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.

**Section A. Governing Body and Management**

	Yes	No
1a Enter the number of voting members of the governing body		
1a		12
b Enter the number of voting members that are independent		
1b		12
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5 Did the organization become aware during the year of a material diversion of the organization's assets?		X
6 Does the organization have members or stockholders?	X	
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	X	
b Each committee with authority to act on behalf of the governing body?	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Does the organization have local chapters, branches, or affiliates?		X
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?		
10b		
11 Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	X	
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	X	
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
12b	X	
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	X	
12c	X	
13 Does the organization have a written whistleblower policy?	X	
14 Does the organization have a written document retention and destruction policy?	X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official	X	
b Other officers or key employees of the organization	X	
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 taxable entity during the year?		X
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?		
16b		

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed **AK, AL, AR, AZ, CA, CO, CT, FL, GA, HI, IL, KS**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 Own website     Another's website     Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **RAILS-TO-TRAILS CONSERVANCY - 202-331-9696**  
**2121 WARD CT., NW 5TH FLOOR, WASHINGTON, DC 20037**

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

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if the organization did not compensate any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
CHARLES MARSHALL CHAIR	2.00	X		X			0.	0.	0.	
GUY WILLIAMS VICE CHAIR	2.00	X		X			0.	0.	0.	
KATHERINE KRAFT SECRETARY	2.00	X		X			0.	0.	0.	
ROBERT CAMPBELL TREASURER	2.00	X		X			0.	0.	0.	
CHIP ANGLE BOARD MEMBER	2.00	X					0.	0.	0.	
JOE BARROW, JR. BOARD MEMBER	2.00	X					0.	0.	0.	
KATHY BLAHA BOARD MEMBER	2.00	X					0.	0.	0.	
MATTHEW COHEN BOARD MEMBER	2.00	X					0.	0.	0.	
PETER GOLDMAN BOARD MEMBER	2.00	X					0.	0.	0.	
DAVID INGEMIE BOARD MEMBER	2.00	X					0.	0.	0.	
KRISHNA MURTHY BOARD MEMBER	2.00	X					0.	0.	0.	
REBECCA RILEY BOARD MEMBER	2.00	X					0.	0.	0.	
KEITH LAUGHLIN PRESIDENT	40.00			X			178,229.	0.	23,172.	
CYNTHIA DICKERSON VP FINANCE	40.00			X			115,807.	0.	25,945.	
ANDREA BROCK VP DEVELOPMENT	40.00				X		134,024.	0.	18,109.	
KEVIN MILLS VP POLICY	40.00				X		110,779.	0.	25,633.	



**Part VIII Statement of Revenue**

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a Federated campaigns	1a 362,985.					
	b Membership dues	1b 2,243,995.					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f 2,239,108.					
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f		4,846,088.				
Program Service Revenue	2 a <b>CONTRACTS</b>	Business Code 900099	482,165.	482,165.			
	b <b>MEETINGS AND EVENTS</b>	900099	216,968.	216,968.			
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		699,133.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		17,757.			17,757.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		7,695.			7,695.	
	6 a Gross Rents	(i) Real					
		(ii) Personal					
		b Less: rental expenses					
		c Rental income or (loss)					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	(i) Securities	1970939.				
		(ii) Other					
		b Less: cost or other basis and sales expenses	2006300.				
		c Gain or (loss)	<35,361.>				
	d Net gain or (loss)		<35,361.>			<35,361.>	
	8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses	b				
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	a	45,848.					
	b Less: cost of goods sold	b 23,334.					
	c Net income or (loss) from sales of inventory		22,514.	22,514.			
Miscellaneous Revenue		Business Code					
11 a <b>SUBLEASE RENTAL</b>	900099	81,946.			81,946.		
b <b>LIST RENTAL</b>	900099	24,460.			24,460.		
c <b>REIMBURSED EXPENSES</b>	900099	10,871.			10,871.		
d All other revenue							
e Total. Add lines 11a-11d		117,277.					
12 Total revenue. See instructions.		5,675,103.	721,647.	0.	107,368.		

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	488,143.	488,143.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	343,774.	196,102.	124,636.	23,036.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,799,708.	1,514,632.	169,262.	115,814.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	102,255.	80,132.	6,894.	15,229.
9 Other employee benefits	218,824.	179,160.	16,218.	23,446.
10 Payroll taxes	167,213.	119,706.	17,798.	29,709.
11 Fees for services (non-employees):				
a Management				
b Legal	59,528.	58,815.	713.	
c Accounting	26,363.		26,363.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	73,500.			73,500.
f Investment management fees				
g Other	267,692.	249,080.	18,612.	
12 Advertising and promotion	5,449.	2,470.	2,979.	
13 Office expenses	803,428.	589,838.	191,368.	22,222.
14 Information technology	64,521.	52,880.	6,837.	4,804.
15 Royalties				
16 Occupancy	536,463.	50,586.	485,877.	
17 Travel	236,578.	207,281.	11,519.	17,778.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	28,500.	28,500.		
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	68,686.	1,868.	66,818.	
23 Insurance	25,993.	3,673.	22,320.	
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a LIST MANAGEMENT SERVICE	308,829.	201,589.	18,383.	88,857.
b FUNDRAISING POSTAGE	226,317.			226,317.
c FUNDRAISING PRINTING	153,299.			153,299.
d MERCHANDISE COSTS	91,590.	63,256.	7,854.	20,480.
e STAFF DEVELOPMENT	23,929.	22,879.	625.	425.
f All other expenses		501,586.	<521,204.>	19,618.
25 Total functional expenses. Add lines 1 through 24f	6,120,582.	4,612,176.	673,872.	834,534.
26 Joint costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation	1,537,214.	573,559.	129,390.	834,265.

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing .....	12,011.	1	5,101.
	2	Savings and temporary cash investments .....	1,146,165.	2	1,056,823.
	3	Pledges and grants receivable, net .....	1,106,087.	3	499,790.
	4	Accounts receivable, net .....	219,183.	4	323,500.
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L .....		6	
	7	Notes and loans receivable, net .....		7	
	8	Inventories for sale or use .....	36,053.	8	53,687.
	9	Prepaid expenses and deferred charges .....	50,733.	9	54,247.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	10a 891,950.		
	b	Less: accumulated depreciation .....	10b 343,010.		
			614,484.	10c	548,940.
	11	Investments - publicly traded securities .....	1,033,384.	11	1,203,593.
	12	Investments - other securities. See Part IV, line 11 .....		12	
	13	Investments - program-related. See Part IV, line 11 .....		13	
	14	Intangible assets .....		14	
15	Other assets. See Part IV, line 11 .....	30,327.	15	30,327.	
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	4,248,427.	16	3,776,008.	
Liabilities	17	Accounts payable and accrued expenses .....	750,727.	17	563,763.
	18	Grants payable .....	4,762.	18	4,762.
	19	Deferred revenue .....	65,750.	19	
	20	Tax-exempt bond liabilities .....		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .....		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		22	
	23	Secured mortgages and notes payable to unrelated third parties .....		23	
	24	Unsecured notes and loans payable to unrelated third parties .....		24	
	25	Other liabilities. Complete Part X of Schedule D .....	633,795.	25	757,395.
	26	<b>Total liabilities.</b> Add lines 17 through 25 .....	1,455,034.	26	1,325,920.
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets .....	652,075.	27	1,280,790.
	28	Temporarily restricted net assets .....	1,512,240.	28	540,220.
	29	Permanently restricted net assets .....	629,078.	29	629,078.
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds .....		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund .....		31	
	32	Retained earnings, endowment, accumulated income, or other funds .....		32	
33	<b>Total net assets or fund balances</b> .....	2,793,393.	33	2,450,088.	
34	<b>Total liabilities and net assets/fund balances</b> .....	4,248,427.	34	3,776,008.	

**Part XI Financial Statements and Reporting**

- 1** Accounting method used to prepare the Form 990:  Cash  Accrual  Other \_\_\_\_\_  
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant? .....
- b** Were the organization's financial statements audited by an independent accountant? .....
- c** If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .....
- If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- d** If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both:  
 Separate basis  Consolidated basis  Both consolidated and separate basis
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. ....

	Yes	No
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>		X
<b>3b</b>		

Form 990 (2009)

**SCHEDULE A**  
(Form 990 or 990-EZ)

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2009**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

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

Name of the organization **RAILS-TO-TRAILS CONSERVANCY** Employer identification number **52-1437006**

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2  A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I      b  Type II      c  Type III - Functionally integrated      d  Type III - Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f  If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box \_\_\_\_\_
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? <b>11g(i)</b>		
(ii) A family member of a person described in (i) above? <b>11g(ii)</b>		
(iii) A 35% controlled entity of a person described in (i) or (ii) above? <b>11g(iii)</b>		
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2009

**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.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	5610046.	4953461.	5364504.	5871804.	4846088.	26645903.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3	5610046.	4953461.	5364504.	5871804.	4846088.	26645903.
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						969,190.
<b>6 Public support.</b> Subtract line 5 from line 4.						25676713.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>7</b> Amounts from line 4	5610046.	4953461.	5364504.	5871804.	4846088.	26645903.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	297,199.	267,410.	200,784.	121,462.	131,858.	1018713.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	36,095.	17,295.	21,652.	12,965.	10,871.	98,878.
<b>11 Total support.</b> Add lines 7 through 10						27763494.
<b>12</b> Gross receipts from related activities, etc. (see instructions)					12	3,627,901.
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2009 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	92.48	%
<b>15</b> Public support percentage from 2008 Schedule A, Part II, line 14	<b>15</b>	91.63	%
<b>16a 33 1/3% support test - 2009.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>			
<b>b 33 1/3% support test - 2008.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
<b>17a 10% -facts-and-circumstances test - 2009.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
<b>b 10% -facts-and-circumstances test - 2008.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>			

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</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 .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>13 Total support</b> (Add lines 9, 10c, 11, and 12.)						

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>	%
<b>16</b> Public support percentage from 2008 Schedule A, Part III, line 15 .....	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>	%
<b>18</b> Investment income percentage from 2008 Schedule A, Part III, line 17 .....	<b>18</b>	%

**19a 33 1/3% support tests - 2009.** If the organization did not check the box 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 and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests - 2008.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

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

OMB No. 1545-0047

**2009**

Name of the organization

Employer identification number

RAILS-TO-TRAILS CONSERVANCY

52-1437006

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ \_\_\_\_\_

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

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

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

Name of organization <b>RAILS-TO-TRAILS CONSERVANCY</b>	Employer identification number <b>52-1437006</b>
--	---

**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1		\$ <u>200,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2		\$ <u>100,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
3		\$ <u>321,401.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
4		\$ <u>100,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization  <b>RAILS-TO-TRAILS CONSERVANCY</b>	Employer identification number  <b>52-1437006</b>
--	---

**Part II Noncash Property** (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

**COPY**

Name of organization  <b>RAILS-TO-TRAILS CONSERVANCY</b>	Employer identification number  <b>52-1437006</b>
--	---

**Part III** Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

**(e) Transfer of gift**

**Transferee's name, address, and ZIP + 4**

**Relationship of transferor to transferee**


(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

**(e) Transfer of gift**

**Transferee's name, address, and ZIP + 4**

**Relationship of transferor to transferee**


(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

**(e) Transfer of gift**

**Transferee's name, address, and ZIP + 4**

**Relationship of transferor to transferee**


(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

**(e) Transfer of gift**

**Transferee's name, address, and ZIP + 4**

**Relationship of transferor to transferee**


**Political Campaign and Lobbying Activities**  
For Organizations Exempt From Income Tax Under section 501(c) and section 527

**2009**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization is described below.**  
▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <p align="center"><b>RAILS-TO-TRAILS CONSERVANCY</b></p>	Employer identification number <p align="center"><b>52-1437006</b></p>
--	---

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ..... ▶ \$ \_\_\_\_\_
- 3 Volunteer hours ..... \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No
- 4a Was a correction made? .....  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file Form 1120-POL for this year? .....  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2009 LHA

**COPY**

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A** Check  if the filing organization belongs to an affiliated group.  
**B** Check  if the filing organization checked box A and "limited control" provisions apply.

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) .....		6,600.													
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....		44,891.													
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....		51,491.													
<b>d</b> Other exempt purpose expenditures .....		5,995,591.													
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....		6,047,082.													
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.		452,354.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.			
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....		113,089.													
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....		0.													
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....		0.													
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....			<input type="checkbox"/> Yes <input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**  
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

**Lobbying Expenditures During 4-Year Averaging Period**

Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
<b>2a</b> Lobbying nontaxable amount	482,905.	440,390.	430,654.	452,354.	1,806,303.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					2,709,455.
<b>c</b> Total lobbying expenditures	39,193.	41,442.	51,385.	51,491.	183,511.
<b>d</b> Grassroots nontaxable amount	120,726.	110,098.	107,664.	113,089.	451,577.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					677,366.
<b>f</b> Grassroots lobbying expenditures			6,600.	6,600.	13,200.

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers? .....			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .....			
<b>c</b> Media advertisements? .....			
<b>d</b> Mailings to members, legislators, or the public? .....			
<b>e</b> Publications, or published or broadcast statements? .....			
<b>f</b> Grants to other organizations for lobbying purposes? .....			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....			
<b>i</b> Other activities? If "Yes," describe in Part IV .....			
<b>j</b> Total. Add lines 1c through 1i .....			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	<b>1</b>	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	<b>2</b>	
<b>3</b> Did the organization agree to carryover lobbying and political expenditures from the prior year? .....	<b>3</b>	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."**

<b>1</b> Dues, assessments and similar amounts from members .....	<b>1</b>	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year .....	<b>2a</b>	
<b>b</b> Carryover from last year .....	<b>2b</b>	
<b>c</b> Total .....	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	<b>3</b>	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? .....	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions) .....	<b>5</b>	

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

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**Schedule D**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**RAILS-TO-TRAILS CONSERVANCY**

Employer identification number

**52-1437006**

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate contributions to (during year) .....		
3 Aggregate 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 funds are the organization's property, subject to the organization's exclusive legal control? <input type="checkbox"/> Yes <input type="checkbox"/> No		
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No		

**Part II Conservation Easements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or pleasure)  Preservation of an historically important land area

Protection of natural habitat  Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06 .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ \_\_\_\_\_

4 Number of states where property subject to conservation easement is located ▶ \_\_\_\_\_

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?  Yes  No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ \_\_\_\_\_

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ \_\_\_\_\_

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?  Yes  No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1 ..... ▶ \$ \_\_\_\_\_

(ii) Assets included in Form 990, Part X ..... ▶ \$ \_\_\_\_\_

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items:

a Revenues included in Form 990, Part VIII, line 1 ..... ▶ \$ \_\_\_\_\_

b Assets included in Form 990, Part X ..... ▶ \$ \_\_\_\_\_

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
a Public exhibition
b Scholarly research
c Preservation for future generations
d Loan or exchange programs
e Other
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

Part IV Escrow and Custodial Arrangements. Complete if organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?
b If "Yes," explain the arrangement in Part XIV and complete the following table:
c Beginning balance
d Additions during the year
e Distributions during the year
f Ending balance
2a Did the organization include an amount on Form 990, Part X, line 21?
b If "Yes," explain the arrangement in Part XIV.

Table with 2 columns: Description, Amount. Rows: 1c, 1d, 1e, 1f

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows: 1a-1g

- 2 Provide the estimated percentage of the year end balance held as:
a Board designated or quasi-endowment
b Permanent endowment
c Term endowment

- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
(i) unrelated organizations
(ii) related organizations
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
4 Describe in Part XIV the intended uses of the organization's endowment funds.

Table with 2 columns: Yes, No. Rows: 3a(i), 3a(ii), 3b

Part VI Investments - Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows: 1a-1e, Total



**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	5,675,103.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	6,120,582.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	<445,479.>
4	Net unrealized gains (losses) on investments	4	102,174.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	102,174.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	<343,305.>

**Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

1	Total revenue, gains, and other support per audited financial statements	1	6,342,879.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	102,174.
b	Donated services and use of facilities	2b	542,268.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	23,334.
e	Add lines 2a through 2d	2e	667,776.
3	Subtract line 2e from line 1	3	5,675,103.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	5,675,103.

**Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

1	Total expenses and losses per audited financial statements	1	6,686,184.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	542,268.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	23,334.
e	Add lines 2a through 2d	2e	565,602.
3	Subtract line 2e from line 1	3	6,120,582.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	6,120,582.

**Part XIV Supplemental Information**

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART V, LINE 4: DURING THE YEAR ENDED SEPTEMBER 30, 1997, THE**

**CONSERVANCY ESTABLISHED THE LANGDON GATES BURWELL ENDOWMENT FUND (FUND 1).**

**THIS FUND WAS ESTABLISHED WITH A GIFT OF STOCK VALUED AT \$334,645 AT THE**

**DATE OF THE GIFT. THE DONOR STIPULATED THAT THE PRINCIPAL BE INVESTED IN**

**PERPETUITY BUT THIRTY YEARS FROM THE DATE OF THE GIFT, THE FUND WILL**

**REVERT TO THE GENERAL ENDOWMENT OF THE CONSERVANCY.**

**DURING THE YEAR ENDED SEPTEMBER 30, 1998, THE CONSERVANCY ESTABLISHED THE**

**Part XIV** Supplemental Information (continued)

WYSS ENDOWMENT FUND (FUND 2). THIS FUND WAS ESTABLISHED WITH A GIFT OF CASH OF \$250,000.

IN ACCORDANCE WITH THE DONOR'S INSTRUCTIONS, EARNINGS ON FUND 1 ARE AVAILABLE TO SUPPORT GENERAL OPERATIONS OF THE CONSERVANCY. FOR INVESTMENT EARNINGS ON FUND 2, THE DONOR RECOMMENDED THAT HALF OF THE ANNUAL EARNINGS FROM THE ENDOWMENT BE USED FOR GENERAL OPERATING EXPENSES AND THE OTHER HALF BE USED TO INCREASE THE ENDOWMENT, WITH AN ALLOWANCE FOR THE BOARD OF DIRECTORS OF THE CONSERVANCY TO OVERRIDE THIS PROVISION. THE CONSERVANCY'S BOARD OF DIRECTORS RESOLVED IN PRIOR YEARS THAT ALL INVESTMENT EARNINGS ON FUND 2 BE CONSIDERED UNRESTRICTED AND AVAILABLE TO SUPPORT GENERAL OPERATIONS.

PART X: THE CONSERVANCY REVIEWS AND ASSESSES ALL ACTIVITIES ANNUALLY TO IDENTIFY ANY CHANGES IN THE SCOPE OF THE ACTIVITIES AND REVENUE SOURCES AND THE TAX TREATMENT THEREOF TO IDENTIFY ANY UNCERTAIN TAX POSITIONS. FOR THE YEAR ENDED SEPTEMBER 30, 2010, MANAGEMENT DID NOT IDENTIFY ANY UNCERTAIN TAX POSITIONS REQUIRING RECOGNITION OR DISCLOSURE IN THESE FINANCIAL STATEMENTS.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD: 23334.

PART XIII, LINE 2D - OTHER ADJUSTMENTS:

COST OF GOODS SOLD: 23334.

**SCHEDULE G**  
(Form 990 or 990-EZ)

**Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No. 1545-0047

**2009**

Department of the Treasury  
Internal Revenue Service

▶ Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.  
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Open To Public Inspection

Name of the organization

**RAILS-TO-TRAILS CONSERVANCY**

Employer identification number

**52-1437006**

**Part I**

**Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a  Mail solicitations
- b  Internet and email solicitations
- c  Phone solicitations
- d  In-person solicitations
- e  Solicitation of non-government grants
- f  Solicitation of government grants
- g  Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
MAL WARWICK	DIRECT MAIL CONSULTANT		X	2,224,234.	73,500.	2,150,734.
<b>Total</b>	▶			<b>2,224,234.</b>	<b>73,500.</b>	<b>2,150,734.</b>

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing.  
AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, HI, KS, KY, LA, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

**Part II Fundraising Events.** Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	<b>1</b> Gross receipts .....				
	<b>2</b> Less: Charitable contributions .....				
	<b>3</b> Gross income (line 1 minus line 2) .....				
Direct Expenses	<b>4</b> Cash prizes .....				
	<b>5</b> Noncash prizes .....				
	<b>6</b> Rent/facility costs .....				
	<b>7</b> Food and beverages .....				
	<b>8</b> Entertainment .....				
	<b>9</b> Other direct expenses .....				
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) .....				( )
	<b>11</b> Net income summary. Combine line 3, column (d), and line 10 .....				( )

**Part III Gaming.** Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	<b>1</b> Gross revenue .....				
	<b>2</b> Cash prizes .....				
Direct Expenses	<b>3</b> Noncash prizes .....				
	<b>4</b> Rent/facility costs .....				
	<b>5</b> Other direct expenses .....				
Revenue	<b>6</b> Volunteer labor .....	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	<b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) .....				( )
	<b>8</b> Net gaming income summary. Combine line 1, column (d), and line 7 .....				( )

**9** Enter the state(s) in which the organization operates gaming activities: \_\_\_\_\_

**a** Is the organization licensed to operate gaming activities in each of these states? .....

**b** If "No," explain:

\_\_\_\_\_

**10a** Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? .....

**b** If "Yes," explain:

\_\_\_\_\_

**11** Does the organization operate gaming activities with nonmembers? .....

**12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? .....

	Yes	No
<b>9a</b>		
<b>10a</b>		
<b>11</b>		
<b>12</b>		

**13** Indicate the percentage of gaming activity operated in:

- a** The organization's facility ..... 

<b>13a</b>	%
<b>13b</b>	%
- b** An outside facility .....

**14** Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_  
 Address ▶ \_\_\_\_\_

**15a** Does the organization have a contract with a third party from whom the organization receives gaming revenue? ..... **15a**

- b** If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ \_\_\_\_\_ and the amount of gaming revenue retained by the third party ▶ \$ \_\_\_\_\_ .
- c** If "Yes," enter name and address of the third party:

Name ▶ \_\_\_\_\_  
 Address ▶ \_\_\_\_\_

**16** Gaming manager information:

Name ▶ \_\_\_\_\_  
 Gaming manager compensation ▶ \$ \_\_\_\_\_  
 Description of services provided ▶ \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- Director/officer       Employee       Independent contractor

**17** Mandatory distributions:

- a** Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ..... **17a**
- b** Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ \_\_\_\_\_

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.

OMB No. 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**RAILS - TO - TRAILS CONSERVANCY**

Employer identification number  
**52-1437006**

**Part I General Information on Grants and Assistance**

**1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

**2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANTHRACITE SCENIC TRAILS P.O. BOX 212 DALLAS, PA 18612	23-2754520	501(C)(3)	5,000.	0.			TRAIL DEVELOPMENT
BEACON HOUSE 601 EDGEWOOD STREET, NE, SUITE 15 WASHINGTON, DC 20017	52-1773366	501(C)(3)	5,000.	0.			TRAIL DEVELOPMENT
BRONX RIVER ALLIANCE 1 BRONX RIVER PARKWAY BRONX, NY 10462	75-3001587	501(C)(3)	15,000.	0.			TRAIL DEVELOPMENT
CASEY TREES 1123 11TH STREET, NW WASH, DC 20001	31-7664440	501(C)(3)	18,000.	0.			TRAIL DEVELOPMENT
COOPER'S FERRY DEVELOPMEN 2 RIVERSIDE DRIVE, SUITE 501 CAMDEN, NJ 08103	52-1333968	501(C)(3)	75,000.	0.			TRAIL DEVELOPMENT
FRIENDS OF BLOOMINGDALE 120 S. LASALLE ST., 2000 CHICAGO, IL 60603	20-0400052	501(C)(3)	12,500.	0.			TRAIL DEVELOPMENT

**2** Enter total number of section 501(c)(3) and government organizations **11.**

**3** Enter total number of other organizations **3.**

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

Schedule I (Form 990) 2009

**Part III** Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

**Part IV** Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: RTC PROVIDES GRANTS TO TRAIL ORGANIZATIONS OR MUNICIPALITIES WHO NEED TO MAKE PERMANENT IMPROVEMENTS TO THEIR TRAILS. IMPROVEMENTS COMPLETED THROUGH THE PROGRAM REPRESENT VALUE TO THE TRAIL EITHER BY INCREASING LENGTH OR BY NEW CONSTRUCTION THAT MAKES THE TRAIL MORE USABLE. GRANTEE'S ARE IDENTIFIED BY RTC AND ARE INVITED TO SUBMIT A PROPOSAL. EACH PROPOSAL IS EVALUATED BASED ON THE GUIDELINES OF THE GRANT PROGRAM AND RTC DETERMINES AWARD RECIPIENTS. A FINAL REPORT IS REQUIRED FROM EACH RECIPIENT ORGANIZATION.

Name of the organization

**RAILS-TO-TRAILS CONSERVANCY**

Employer identification number  
**52-1437006**

**Part I** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIENDS OF CALUMET-SAG 9 WEST HUBBARD ST STE 402 CHICAGO, IL 60610	26-1193252	501(C)(3)	17,500.	0.			TRAIL DEVELOPMENT
LA COUNTY BICYCLE COALITION 634 S. SPRING ST #821 LOS ANGELES, CA 90014	95-4845170	501(C)(3)	5,000.	0.			TRAIL DEVELOPMENT
PARTNERSHIP FOR SMARTER GROWTH 2319 E. BROAD STREET RICHMOND, VA 23223	31-1777101	501(C)(3)	5,000.	0.			TRAIL DEVELOPMENT
SCHUYLKILL RIVER DEVELOPMENT CORPORATION - 2929 ARCH STREET, 13TH FLOOR - PHILADELPHIA, PA 19104	23-2690558	501(C)(3)	20,000.	0.			TRAIL DEVELOPMENT
SUSTAINABLE SOUTH BRONX 890 GARRISON AVENUE, 4TH FLOOR BRONX, NY 10474	22-3626871	501(C)(3)	15,000.	0.			TRAIL DEVELOPMENT
TOWN OF EATONVILLE P.O. BOX 309 EATONVILLE, WA 98328	91-6001423		221,607.	0.			TRAIL DEVELOPMENT
TREASURER OF MONTGOMERY COUNTY 1 MONTGOMERY PLAZA NORRISTOWN, PA 19404	23-6003126		5,000.	0.			TRAIL DEVELOPMENT
WASHINGTON AREA BICYCLIST 2599 ONTARIO ROAD, NW WASHINGTON, DC 20009	23-7305477	501(C)(3)	5,000.	0.			TRAIL DEVELOPMENT

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

Schedule I-1 (Form 990) 2009

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

**2009**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

Open to Public Inspection

▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury  
Internal Revenue Service

Name of the organization

RAILS-TO-TRAILS CONSERVANCY

Employer identification number

52-1437006

**Part I Questions Regarding Compensation**

	Yes	No
<b>1a</b> Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<b>b</b> If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain .....	<b>1b</b>	
<b>2</b> Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? .....	<b>2</b>	
<b>3</b> Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply. <input type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations <input type="checkbox"/> Written employment contract <input type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
<b>4</b> During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
<b>a</b> Receive a severance payment or change-of-control payment? .....	<b>4a</b>	X
<b>b</b> Participate in, or receive payment from, a supplemental nonqualified retirement plan? .....	<b>4b</b>	X
<b>c</b> Participate in, or receive payment from, an equity-based compensation arrangement? .....	<b>4c</b>	X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
<b>Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.</b>		
<b>5</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
<b>a</b> The organization? .....	<b>5a</b>	X
<b>b</b> Any related organization? .....	<b>5b</b>	X
If "Yes" to line 5a or 5b, describe in Part III.		
<b>6</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
<b>a</b> The organization? .....	<b>6a</b>	X
<b>b</b> Any related organization? .....	<b>6b</b>	X
If "Yes" to line 6a or 6b, describe in Part III.		
<b>7</b> For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III .....	<b>7</b>	X
<b>8</b> Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III .....	<b>8</b>	X
<b>9</b> If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....	<b>9</b>	

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

Schedule J (Form 990) 2009

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use Schedule J-1 if additional space is needed.  
 For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii).  
 Do not list any individuals that are not listed on Form 990, Part VII.

**Note.** The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

(A) Name	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
KEITH LAUGHLIN	(i) 178,229.	0.	0.	8,147.	15,025.	201,401.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
ANDREA BROCK	(i) 134,024.	0.	0.	5,983.	12,126.	152,133.	0.
	(ii) 0.	0.	0.	0.	0.	0.	0.
	(i)						
	(ii)						
	(i)						
	(ii)						
	(i)						
	(ii)						
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	(i)						
	(ii)						
	(i)						
	(ii)						

SCHEDULE O  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No. 1545-0047

2009

Open to Public  
Inspection

Name of the organization

RAILS-TO-TRAILS CONSERVANCY

Employer identification number  
52-1437006

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ENVIRONMENT, ECONOMY, NEIGHBORHOODS AND PEOPLE. FOUNDED IN 1985, THE  
CONSERVANCY IS LOCATED IN WASHINGTON, DC AND HAS FOUR REGIONAL OFFICES.  
THE CONSERVANCY'S ACTIVITIES ARE FUNDED PRIMARILY THROUGH MEMBERSHIP  
DUES AND CONTRIBUTIONS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

NATIONAL POLICY: THE CONSERVANCY PROMOTES POLICY AT THE NATIONAL AND  
STATE LEVELS TO CREATE THE CONDITIONS THAT MAKE TRAIL BUILDING  
POSSIBLE. THE CONSERVANCY IS A LEADER IN THE FIGHT TO PROTECT THE  
FEDERAL TRANSPORTATION ENHANCEMENTS PROGRAMS WHICH IS THE LARGEST  
SOURCE OF FUNDING FOR TRAIL DEVELOPMENT. THE CONSERVANCY STEADFASTLY  
DEFENDS THE FEDERAL RAILBANKING STATUTE IN CONGRESS AND THE COURTS AS  
AN ESSENTIAL TOOL TO PRESERVE UNUSED RAIL CORRIDORS. THE CONSERVANCY  
ALSO MONITORS LITIGATION ON CASES INVOLVING ENFORCEMENT OF FEDERAL LAWS  
RELATED TO RAIL BANKING.

EXPENSES \$ 663334. INCLUDING GRANTS OF \$ 0. REVENUE \$ 141779.

MEMBER PROGRAMS: IN ADDITION TO THE PROGRAMS PROVIDED TO MEMBERS  
THROUGH PUBLIC INFORMATION AND EDUCATION, THE CONSERVANCY IS ALSO  
DIGITIZING MEMBER AND CONSTITUENT INFORMATION AND TRAILS INFORMATION;  
CREATING A CENTRALIZED DATABASE THAT WILL ASSIST THE CONSERVANCY IN  
IDENTIFYING OPPORTUNITIES FOR LINKING TRAIL SYSTEMS AND CATALYZING  
SUPPORT OF TRAIL PROJECTS. OTHER ACTIVITIES INCLUDE DELIVERY OF MEMBER  
BENEFIT AND SERVICE PROGRAMS.

SCHEDULE O  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on  
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OMB No. 1545-0047

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Inspection

Name of the organization

RAILS-TO-TRAILS CONSERVANCY

Employer identification number  
52-1437006

EXPENSES \$ 391331. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

TRAIL CONSERVANCY: THE CONSERVANCY PROMOTES THE PRESERVATION OF RAIL  
CORRIDORS FOR TRAIL CREATION. THE PROGRAM GENERALLY INVOLVES THE  
ACQUISITION OF ABANDONED RAIL CORRIDORS ON BEHALF OF THE CONSERVANCY.  
THE CONSERVANCY HAS PURCHASED RAIL CORRIDORS IN APPROXIMATELY TEN  
STATES ACROSS THE COUNTRY.

EXPENSES \$ 5083. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 6: ANY PERSON WHO HAS AN HONEST  
INTEREST IN CONSERVING AND PRESERVING LINEAR PARKS AND IN RAILS-TO-TRAILS  
CONVERSIONS AND WHO SUBSCRIBES TO THE PURPOSES OF RTC SHALL BE ELIGIBLE TO  
BE AN INDIVIDUAL MEMBER OF RTC.

FORM 990, PART VI, SECTION B, LINE 11: THE FINANCE COMMITTEE OF  
RAILS-TO-TRAILS CONSERVANCY WILL REVIEW THE DRAFT 990 BEFORE PRESENTATION  
TO THE FULL BOARD. EACH MEMBER OF THE BOARD OF DIRECTORS WILL RECEIVE A  
COPY OF THE FORM 990 PRIOR TO THE SUBMISSION OF THE FORM TO THE INTERNAL  
REVENUE SERVICE. THE AUDITORS WILL PRESENT THE 990 AT THE BOARD OF  
DIRECTORS MEETING IN EARLY FEBRUARY OF EACH YEAR. RTC WILL NOT FILE THE  
FORM 990 UNTIL THE BOARD FORMALLY APPROVES SUCH FILING AT THE FEBRUARY  
BOARD MEETING.

FORM 990, PART VI, SECTION B, LINE 12C: RTC HAS A CONFLICT OF INTEREST  
POLICY AND FORM THAT EACH BOARD MEMBER IS REQUIRED TO COMPLETE ANNUALLY. TO  
IMPLEMENT THIS POLICY, BOARD MEMBERS SUBMIT ANNUAL REPORTS ON THE CONFLICT

SCHEDULE O  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No. 1545-0047

2009

Open to Public  
Inspection

Name of the organization

RAILS-TO-TRAILS CONSERVANCY

Employer identification number

52-1437006

OF INTERST FORMS AT THE FEBRUARY BOARD MEETING AND, IF NOT PREVIOUSLY  
DISCLOSED, WILL MAKE DISCLOSURE BEFORE ANY RELEVANT BOARD OR COMMITTEE  
ACTION. THESE REPORTS WILL BE REVIEWED BY THE BOARD OR AN APPOINTED  
COMMITTEE OF THE BOARD, WHICH WILL ATTEMPT TO RESOLVE ANY ACTUAL OR  
POTENTIAL CONFLICT(S) AND, IN THE ABSENCE OF RESOLUTION, REFER THE MATTER  
TO THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 15: COMPENSATION FOR THE PRESIDENT IS  
SET BY THE EXECUTIVE COMMITTEE OF RTC'S BOARD OF DIRECTORS BASED ON AN  
ANNUAL PERFORMANCE REVIEW, COMPARISON TO OTHER ENVIRONMENTAL NONPROFIT CEO  
COMPENSATION AS REPORTED IN THEIR 990'S, AND IN THE CONTEXT OF RTC'S  
OVERALL OPERATING BUDGET. DOCUMENTATION OF THESE PROCEDURES AND RESULTING  
CHANGES IN COMPENSATION ARE PREPARED BY THE BOARD CHAIR AND FORWARDED TO  
HUMAN RESOURCES FOR INCLUSION IN THE PRESIDENT'S PERSONNEL FILE.

COMPENSATION FOR KEY EMPLOYEES IS SET BY THE PRESIDENT. NEW HIRES'  
COMPENSATION IS DETERMINED BY BENCHMARKING SIMILAR POSITIONS IN OTHER  
ENVIRONMENTAL NONPROFIT ORGANIZATIONS OF SIMILAR SCOPE AND SIZE. DEPENDING  
ON THE RECRUITING TECHNIQUE, THIS ANALYSIS MAY BE PREPARED BY A PERSONNEL  
RECRUITING AGENCY OR COLLECTED BY RTC'S HUMAN RESOURCES DEPARTMENT.  
COMPENSATION IS ADJUSTED ANNUALLY BASED ON AN ANNUAL PERFORMANCE REVIEW  
CONDUCTED BY THE PRESIDENT AND IN CONTEXT WITH THE SALARY POOL AVAILABLE IN  
RTC'S OVERALL OPERATING BUDGET FOR THE UPCOMING FISCAL YEAR.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AK, AL, AR, AZ, CA, CO, CT, FL, GA, HI, IL, KS, KY, LA, MA, MD, ME, MI, MN, MS, NC, NH, NJ, NM, NY

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

Schedule O (Form 990) 2009

932211  
02-03-10

SCHEDULE O  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990

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

OMB No. 1545-0047

2009

Open to Public  
Inspection

Name of the organization

RAILS-TO-TRAILS CONSERVANCY

Employer identification number  
52-1437006

OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

FORM 990, PART VI, SECTION C, LINE 19: RTC'S GOVERNING DOCUMENTS INCLUDING  
THE ANNUAL REPORT, FORM 990, AUDITED FINANCIAL STATEMENTS, CONFLICT OF  
INTEREST POLICY AND FORM 1023 ARE AVAILABLE TO THE PUBLIC UPON REQUEST.  
COPIES WILL BE PROVIDED IMMEDIATELY IN THE CASE OF IN-PERSON REQUESTS.  
REQUESTS RECEIVED BY WRITTEN, PHONE, FAX OR E-MAIL MEANS WILL BE HONORED BY  
DIRECTING THE REQUESTORS TO RTC'S WEBSITE. THREE YEARS OF 990'S, AUDITED  
FINANCIAL STATEMENTS AND ANNUAL REPORTS CAN BE FOUND ON RTC'S WEBSITE IN  
ADOBE FORMAT. RTC RESERVES THE RIGHT TO CHARGE A REASONABLE COPYING FEE  
PLUS ACTUAL POSTAGE FOR MULTIPLE COPIES REQUESTED FROM THE SAME INDIVIDUAL  
OR RELATED GROUP OF INDIVIDUALS.