** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

Department of the Treasury

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

Do not enter social security numbers on this form as it may be made public.

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

2017 Open to Public Inspection

OMB No. 1545-0047

For the 2017 calendar year, or tax year beginning OCT 1, 2017 2018 and ending SEP 30, Check if applicables C Name of organization D Employer identification number Address change RAILS-TO-TRAILS CONSERVANCY Name change 52-1437006 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Final return 2121 WARD COURT, NW, 5TH FLOOR 202-331-9696 termi ated 15,292,272. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended Ireturn WASHINGTON, DC 20037 H(a) Is this a group return Applica-tion F Name and address of principal officer: CYNTHIA DICKERSON for subordinates? ____ Yes X No SAME AS C ABOVE H(b) Are all subordinates included? Yes I Tax-exempt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527 If "No," attach a list. (see instructions) J Website: ➤ WWW.RAILSTOTRAILS.ORG **H(c)** Group exemption number ▶ K Form of organization: X Corporation Trust Other > Association L Year of formation: 1985 M State of legal domicile; DC Part | Summary Briefly describe the organization's mission or most significant activities: DEDICATED TO PRESERVE AND 1 Governance TRANSFORM UNUSED RAIL CORRIDORS INTO LINEAR PARKS. Check this box In the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) 16 3 Number of independent voting members of the governing body (Part VI, line 1b) 16 59 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 25 Total number of volunteers (estimate If necessary) 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. 6,594. b Net unrelated business taxable income from Form 990-T, line 34 **Current Year** 9,189,136. 11,912,086. Contributions and grants (Part VIII, line 1h) 696,293.410,250. Program service revenue (Part VIII, line 2g) *1*** 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 125,849. 106,626. 124,026. 130,345. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 9,849,261. <u> 12,845,350.</u> 332,970. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 347,509. Benefits paid to or for members (Part IX, column (A), line 4) 0. 0. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 4,402,713. 5,006,508. 16a Professional fundraising fees (Part IX, column (A), line 11e) 98,575. 100,200. **b** Total fundraising expenses (Part IX, column (D), line 25) 4,383,576. 4,999,409. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 9,23<mark>2,3</mark>73. 10,439,087. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 616,888. 2,406,263. 19 Revenue less expenses. Subtract line 18 from line 12 5 Beginning of Current Year **End of Year** 11,416,034. 20 Total assets (Part X, line 16) 8,599,088. 1,475,543. 21 Total liabilities (Part X, line 26) 1,290,738. 22 Net assets or fund balances. Subtract line 21 from line 20 7,308,350. 9,940,491. Part II Signature Block Under penalties of perjury, declare that 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 (6ther thap officer) is based on all information of which preparer has any knowledge. Signature of officer Sign CYNTHIA DICKERSON, COO Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature P00173692 Paid RAYMOND BARBAGALLO self-employed Preparer Firm's name CHERRY BEKAERT LLP Firm's EIN 56-0574444 Firm's address 11200 ROCKVILLE PIKE, SUITE 400 **Use Only** ROCKVILLE, MD 20852 Phone no. 301-589-9000 May the IRS discuss this return with the preparer shown above? (see instructions) X Yes

	m 990 (2017) RAILS-TO-TRAILS CONSERVANCY	52-1437006	Page 2
Pa	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission: SEE SCHEDULE O		
		. ,	
_			
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.	□	चि
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O.		X No
4	Describe the organization's program service accomplishments for each of its three largest program services, as n		
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others	s, the total expenses, ar	nd
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 4,398,504. Including grants of \$ 332,970.) (Revenue TRAIL DEVELOPMENT - SINCE ITS INCEPTION, RTC HAS SUPPORTE		994.)
		GING AN EAR	τv
	· · · · · · · · · · · · · · · · · · ·	NVENTORIES AGENCIES	
	DEVELOPMENT PLANS; PROVIDING TECHNICAL ASSISTANCE FOR LOC		WIND
	DEVELOPMENT AND MANAGEMENT PROJECTS; AND OFFERING TRAININ		
	EDUCATION FOR COMMUNITIES AND TRAIL-BUILDING GROUPS.	IG AND	_
	DOCATION FOR COMMONITIED AND INAID-BUILDING GROUPS.		
	RTC'S TRAILNATION PROJECT PORTFOLIO REPRESENTS THE ORGANI	7 3 TT ON 1 C	
	LARGEST TRAIL DEVELOPMENT INITIATIVE. THESE PROJECTS ARE		
	SPUR TRAIL-NETWORK DEVELOPMENT NATIONWIDE, CHANGING THE I		
		GET PEOPLE	<u> </u>
4b	4 888 000		259 .)
40	(Code:) (Expenses \$		<u> </u>
		TC'S TRAIL-	TOP
	INITIATIVES PROVIDE TIPS FOR GETTING OUT ON THE TRAIL AND		USE
		TC'S FLAGSH	TD
	INITIATIVE, TRAILLINK.COM SERVED MORE THAN 7.4 MILLION VI		
	18 CONNECTING THEM TO OVER 30,000 MILES OF TRAILS THROUGH		<u> </u>
	WEBSITE AND MOBILE APPS. RTC ALSO BUILDS SUPPORT FOR TRA		TCU
	ITS ONLINE CAMPAIGNS, QUARTERLY MAGAZINE, MONTHLY ENEWS,		
	NEWS MEDIA, PUBLICATIONS AND TRAIL EVENTS.	POCIAL MEDIA	n.,
	THE THE PARTY TO SELECTION OF THE PARTY DANGED.		
40	(Code:) (Expenses \$1, 104, 978. Including grants of \$) (Revenue	16,1	136 \
	TRAIL POLICY - RTC'S POLICY AND ADVOCACY WORK ENSURES PUB	T.TC TNVESTMI	ENT
	IN RAIL-TRAILS AT ALL LEVELS OF GOVERNMENT, FOCUSING ON	OPPORTUNITAL	ES.
	TO SUPPORT COMMUNITIES IN BUILDING CRITICAL TRAIL, BIKING	AND WALKING	<u> </u>
	INFRASTRUCTURE. RTC PROMOTES POLICIES AT THE FEDERAL AND		
	THAT MAKE TRAIL BUILDING POSSIBLE.	Parian nnvn.	<u> </u>
	The state of the s	,	
	RTC IS A LEADER IN THE FIGHT TO PROTECT THE FEDERAL TRANS	IDODUATION TO THE TRANSPORT	
	ALTERNATIVES PROGRAM (TAP), WHICH IS THE LARGEST SOURCE O	F FINDING E	OR .
	TRAIL DEVELOPMENT. RTC STEADFASTLY DEFENDS THE FEDERAL R	ATTRANKTNO FO	<u> </u>
	STATUTE IN CONGRESS AND THE COURTS AS AN ESSENTIAL TOOL T		
	UNUSED RAIL CORRIDORS. RTC ALSO MONITORS LITIGATION ON C	ASES INVOLVE	TNG
	ENFORCEMENT OF FEDERAL LAWS RELATED TO RAILBANKING.	THACHA:	-1113
4d	Other program services (Describe in Schedule O.)		
	(Expenses \$ 650,870 • including grants of \$) (Revenue \$	0.)	
4e	Total program service expenses 7,931,355.	<u> </u>	
	. - - -		

Form 990 (2017) RAILS-TO-TRAILS CONSERVANCY Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	L
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			l
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	ł		
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			Ì
	If "Yes," complete Schedule D, Part IV	9_		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X		gat Andre Talah	
	as applicable.			·
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		17	
	Part VI	11a	X	
D	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X_
G	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
a	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	11c		X
u	·			X
e	Part X, line 16? If "Yes," complete Schedule D, Part IX Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	11e		
•	the organization's separate of consolidated invarious statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	444	х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f	Λ	<u> </u>
124	·	12a	x	
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	124	-22	
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
ь		170		
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign Individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		$\neg \neg$	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	x	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G. Part III	19		X
		_	222	

			Yes	_
2 0a	Tos, Complete Contended in	20a		X
b	The state of the s	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		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? If "Yes," complete			
	Schedule J	23	Х	<u> </u>
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			l
	Schedule K. If "No", go to line 25a	24a		X
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
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?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	and the state of t			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
D	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? if "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			7.7
07	complete Schedule L, Part II	26	-	X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			v
28	of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	_27		X
20	instructions for applicable filing thresholds, conditions, and exceptions):			
	A company or former officer director to the company of the company		N selle	v
h	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	28b		
·	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	200		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	28c 29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	29		
-	contributions? If "Yes," complete Schedule M	20		х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	30		
	If "Yes," complete Schedule N, Part I	31		x
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
	Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	-		
	Part V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	If "Yes" to line 35a, dld the organization receive any payment from or engage in any transaction with a controlled entity	1		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		\neg	
	If "Yes," complete Schedule R, Part V, line 2	36		х
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? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	х	ļ •

Form 990 (2017) RAILS-TO-TRAILS CONSERVANCY Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V								
					Yes	No			
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	55		37 mg				
	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 re	eportal	ole gaming						
	(gambling) winnings to prize winners?			1c	X				
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1			30.09	14471			
	filed for the calendar year ending with or within the year covered by this return	2a	59						
Ь	If at least one is reported on line 2a, did the organization file all required federal employment tax return			2b	X	Filting white			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instruction								
За	Diddle and the bound of the bou			3a	X	2 %			
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule			3b	Х				
	At any time during the calendar year, did the organization have an interest in, or a signature or other a								
	financial account in a foreign country (such as a bank account, securities account, or other financial a			4a	•	х			
b	If "Yes," enter the name of the foreign country: ▶				0.377				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccoun	ts (FBAR).						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a	<u> </u>	X			
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa			5b		Х			
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c					
6a									
	any contributions that were not tax deductible as charitable contributions?	_		6a		x			
b	If "Yes," did the organization include with every solicitation an express statement that such contributi								
	were not tax deductible?		- ,	6b					
7	Organizations that may receive deductible contributions under section 170(c).								
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices p	rovided to the payor?	7a	_s	X			
b	b If "Yes," did the organization notify the donor of the value of the goods or services provided?								
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as redi	ired	7b					
	to file Form 8282?			7c		X			
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d							
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		7	7e	da alae sa a				
f									
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		99 as required?	7f 7g		Х			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				3,300	******************			
	sponsoring organization have excess business holdings at any time during the year?	•		8					
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		12/			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b					
10	Section 501(c)(7) organizations. Enter:			V. 5					
а	Initiation fees and capital contributions included on Part VIII, line 12	10a							
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b							
11	Section 501(c)(12) organizations. Enter:				19079.1 1944.1				
a	Gross income from members or shareholders	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	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form	10413)	12a	10.10 (1.114)				
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b		udipi 4	ķ497				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.								
а				13a					
	Note. See the instructions for additional information the organization must report on Schedule O.			4770.5					
b	Enter the amount of reserves the organization is required to maintain by the states in which the			346(2					
	organization is licensed to issue qualified health plans	13b							
C	Enter the amount of reserves on hand	13c							
l4a	Did the examination receive only payments for belong towning and in the table of the device of			14a		X			
	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule			14b					

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.

0	Check if Schedule O contains a response or note to any line in this Part VI					X				
Sec	tion A. Governing Body and Management									
		1	ı .		Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a		<u> </u>						
	If there are material differences in voting rights among members of the governing body, or if the governing			V. S						
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.					1				
þ	Enter the number of voting members included in line 1a, above, who are independent	1b		<u>L6</u>	20.					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with a	any other	المساف						
	officer, director, trustee, or key employee?			. 2		<u> </u>				
3	Did the organization delegate control over management duties customarily performed by or under the	e direc	supervision							
	of officers, directors, or trustees, or key employees to a management company or other person?	•••••	***************************************	3		X				
4	Did the organization make any significant changes to its governing documents since the prior Form	990 wa:	s filed?	4	1	X				
5	5 Did the organization become aware during the year of a significant diversion of the organization's assets?									
6	Did the organization have members or stockholders?			. 6		X				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint (one or							
	more members of the governing body?			. 7a		X				
Ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockho	ders, or							
	persons other than the governing body?			. 7b		X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by the	following:							
a	The governing body?			. 8a	X					
b	Each committee with authority to act on behalf of the governing body?			. 8b	X					
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be rea	iched a	t the							
	organization's mailing address? If "Yes." provide the names and addresses in Schedule O			9		X				
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	Code.)							
					Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?			. 10:	1	X				
b	If "Yes," did the organization have written policies and procedures governing the activities of such cl	napters	affiliates,			-				
	and branches to ensure their operations are consistent with the organization's exempt purposes?			. 10t	<u>.</u>					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing bod	y befor	e filing the form?	_118	X					
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.				. 6. 7					
12a	2a Did the organization have a written conflict of interest policy? If "No," go to line 13									
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise				X					
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? $y_i^{\rm uv}$	Yes," de	escribe							
	in Schedule O how this was done			120	X					
13	Did the organization have a written whistleblower policy?				X					
14	Did 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 approve	al by inc	lependent							
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
a	The organization's CEO, Executive Director, or top management official			158	X					
	Other officers or key employees of the organization									
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			100 J	163.7					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangel	ment wi	th a							
	taxable entity during the year?			16a	1	X				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua			, Ž(1)						
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	nization	s							
	exempt status with respect to such arrangements?			. 16b)	1				
<u>Sect</u>	ion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed AL, AK, AR, CA, C	:0,C	r, FL, GA, H	I,IL	,KS	, KY				
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-1									
	for public inspection. Indicate how you made these available. Check all that apply.									
	Own website Another's website X Upon request Other (explain	n in Sch	edule O)							
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co			nd finan	cial					
	statements available to the public during the tax year.		į y, - .							
20	State the name, address, and telephone number of the person who possesses the organization's bo	oks and	records:							
	CYNTHIA DICKERSON - 202-331-9696									
		037		-						

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter 0 in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization in (A)	(B)	J, <u>g</u> ,				iboi		(D)	(E)	/E\
Name and Title	Average	(C) Position						Reportable	(=) Reportable	(F) Estimated
Name and Tide	hours per			not check more than one t, unless person is both an				compensation	compensation	amount of
	week					r/trus		from	from related	other
	(list any	ector						the	organizations	compensation
	hours for	e e	92		ŀ	pa i		organization	(W-2/1099-MISC)	from the
	related	eas	truste		يو ا	Bells		(W-2/1099-MISC)		organization
	organizations below	ual fr	tional		lage	t com				and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Кеу елпріоуее	Highest compensated employee	Роттег			organizations
(1) M, KATHERINE KRAFT	5.00	_	_)	<u> </u>		-			
CHAIR		X		Х	1			0.	0.	0.
(2) JOHN RATHBONE	5.00									
VICE CHAIR		Х		X				0.	0.	0.
(3) GAIL LIPSTEIN	5.00									
SECRETARY		X		Х				0.	0.	0.
(4) TIMOTHY NOEL	5.00									
TREASURER		X		X				0.	0.	0.
(5) JOSEPH BARROW, JR.	5.00									
BOARD MEMBER		X						0.	0.	0.
(6) JON COFSKY	5.00									
BOARD MEMBER		X						0.	0.	0.
(7) ROSE M. Z. GOWEN	5.00									
BOARD MEMBER		Х						0.	0.	0.
(8) CHARLES N. MARSHALL	5.00								_	
BOARD MEMBER		X						0.	0.	0.
(9) DOUGLAS MONIESON	5.00								_	
BOARD MEMBER		X						0.	0.	0.
(10) FRANK MULVEY	5.00	l								_
BOARD MEMBER		X						0.	0.	0.
(11) CHIP ANGLE	5.00									•
BOARD MEMBER (12) TOM PETRI	F 00	X						0.	0.	0.
BOARD MEMBER	5.00	х						ا م	0	0
(13) REBECCA RILEY	5.00	Λ		_	_			0.	0.	0.
BOARD MEMBER	3.00	Х							^	0
(14) VANESSA GARRISON	5.00	4		-				0.	0.	0.
BOARD MEMBER	3.00	x						0.	0.	0
(15) NOEL KEGEL	5.00	Α.			-			. 0 •	U •	0.
BOARD MEMBER	3.00	X						0.	0.	0.
(16) JAMES SALLIS	5.00							3.	<u> </u>	<u></u>
BOARD MEMBER		x		İ				0.	0.	0.
(17) KEITH LAUGHLIN	40.00			\dashv				- 3.		<u> </u>
PRESIDENT				x		1		228,377.	0.	33,759.

Page 8 Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (A) (B) (C) (D) (E) (F) Position Name and title Average Reportable Reportable Estimated (do not check more than one hours per box, unless person is both an officer and a director/trustee) compensation compensation amount of week from from related other (list any ndividual trustee or director the organizations compensation hours for (W-2/1099-MISC) organization from the related (W-2/1099-MISC) organization organizations and related below organizations line) (18) CYNTHIA DICKERSON 40.00 CHIEF OPERATING OFFICER 166,503. 0. 29,729. (19) KEVIN MILLS 40.00 SENIOR VP POLICY X 149,052. 0. 28,185. (20) MARY O'CONNOR 40.00 VP DEVELOPMENT X 147,332. 0. 25,556. (21) LIZ THORSTENSEN 40.00 VP TRAIL DEVELOPMENT X 141,392. 0. 13,706. (22) BRANDI HORTON 40.00 VP OF COMMUNICATION X 122,106 0. 22,298. (23) MARIANNE FOWLER 40.00 SENIOR STRATEGIST POLICY ADVOCACY 106,776. 0. 18,018. 1,061,538. 1b Sub-total 0. 0. c Total from continuation sheets to Part VII, Section A 0. 1,061,538. d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 8 Yes No Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual X 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual X 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes." complete Schedule J for such person X Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
PRODUCTION SOLUTIONS, 1953 GALLOWS RD,		
SUITE 600, VIENNA, VA 22182	DIRECT MAIL SERVICES	409,082.
PROLIST, 8341 BEECHCRAFT AVENUE,	FULLFILLMENT	
GAITHERSBURG, MD 20879	SERVICES	333,217.
GENERAL SYSTEMS CORPORATION	DATA MGMT AND	
8787 BRANCH AVENUE #183, CLINTON, MD 20735	PROGRAMMING	269,813.
THE SCOTT GROUP, 348 THOMPSON CREEK, SUITE		· · · · · · · · · · · · · · · · · · ·
136, STEVENSVILLE, MD 21666	DIRECT MAIL SERVICES	245,263.
MKDM, 612 EAST JEFFERSON STREET,		
CHARLOTTESVILLE, VA 22902	FUNDRAISING SERVICES	222,838.
 Total number of independent contractors (Including but not limited to those liste \$100,000 of compensation from the organization 	d above) who received more than	

		Check if Schedule O conta	ains a response	or note to any lin	e in this Part VIII	***************************************		
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
to to	1	a Federated campaigns	1a	171,957.				
Contributions, Gifts, Grants and Other Similar Amounts		b Membership dues	1b	3,220,568.				
ع بن ع		c Fundraising events						
E A		d Related organizations						
2,E		e Government grants (contribution	······					
8 S		f All other contributions, gifts, grant						
Ē		similar amounts not included abov		8,519,561.				
語る		Noncash contributions included in lines 1		129,777.				
툿		h Total. Add lines 1a-1f			11,912,086.			
<u> </u>		TO TO THE PARTY OF		Business Code	i			
•	2	a CONTRACT REVENUE		900099	266,105.	266,105.	rendir i emiliani di di dise	
Program Service Revenue		b MEETING AND EVENTS		900099	216,692.	216,692.		
ě e		G TRAILINK PRODUCTS		900099	213,496.	213,496.		
E S		G		300033	213,430,	213,470.		
ga Re		a						-
Ĕ		# All address to the second to						
-		f All other program service rever			606 000			
_	_	g Total. Add lines 2a-2f			696,293.		<u> </u>	<u> </u>
	3	Investment income (including of			104 600			404 500
		other similar amounts)		104,680.			104,680.	
	4	Income from investment of tax		-	45 004			45.00
	5	Royalties			16,291.			16,291.
	_		(i) Real	(ii) Personal				
	6		8,992.					
		b Less: rental expenses	0.					
		c Rental income or (loss)	8,992.					
		d Net rental income or (loss)	<u></u>		8,992.			8,992.
	7	a Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	2,430,664.					
		b Less: cost or other basis						机石油基基基件
		and sales expenses	2,428,718.					
		c Gain or (loss)						
		d Net gain or (loss)	• • • • • • • • • • • • • • • • • • • •	<u></u>	1,946.			1,946.
ē	8	 a Gross income from fundraising 	events (not					
		including \$	of					
8		contributions reported on line 1	Ic). See					
) ,		Part IV, line 18	a					
Other Reven		b Less: direct expenses	b					
ျ		c Net income or (loss) from fundr	aising events	>				
	9 :	a Gross income from gaming act	ivities. See		141, 141 A A			1. (1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
		Part IV, line 19	а					
		b Less: direct expenses	b					
	,	c Net income or (loss) from gamin	ng activities			Angely 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	/····	to activity a salamental and activities and a
	10	a Gross sales of inventory, less re	eturns					
		and allowances		53,300.				
	.	b Less: cost of goods sold	ь	18,204.				
		c Net income or (loss) from sales	of inventory	>	35,096.	35,096.		e i e i wa walio ka izi i Zirize i
		Miscellaneous Revenue		Business Code				
1	11 :			900099	50,750.			50,750.
		- <u> </u>			,			
		e						_
ļ	,	d All other revenue	_	900099	19,216.			19,216.
ĺ		- Takal Adaliber de de d			69,966.	No. of the second		
	12	Total revenue. See instructions.	***************************************		12,845,350.	731,389.	0.	201,875.
	: =	- Site 16464RE COG HISTI RELIGIES			,0=0,000.	,51,503,	٠,	E01,0/3.

Form 990 (2017) RAILS-TO-TRAILS CONSERVANCY Part IX Statement of Functional Expenses

Sect	ion 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respo			mplete column (A).	X
	not include amounts reported on lines 6b, 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 domestic organizations				
	and domestic governments. See Part IV, line 21	332,970.	332,970.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	481,019.	297,439.	137,195.	46,385.
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	3,506,095.	3,039,107.	240,401.	226,587.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	223,827.	181,947.	16,528.	25,352.
9	Other employee benefits	500,821.	391,443.	49,683.	59,695.
10	Payroll taxes	294,746.	237,018.	23,535.	34,193.
11	Fees for services (non-employees):				
а	Management	F0 440	50 440		
Ь	Legal	58,112.	58,112.	26 222	
_	Accounting	26,933.	10.050	26,933.	
d	Lobbying	18,258.	18,258.		100 000
•	Professional fundralsing services. See Part IV, line 17	100,200.			100,200.
f	Investment management fees				
g	,	1 100 410	001 540	154 060	26 604
	column (A) amount, list line 11g expenses on Sch 0.)	1,192,412.	981,548.	174,260.	36,604. 2,294.
	Advertising and promotion	163,102. 2,226,947.	155,848.	4,960.	2,294.
13	Office expenses	4,446,947.	1,132,201.	334,842.	759,904.
14	Information technology				
15	Royaltles	533,666.	72 200	161 166	
16	Occupancy	466,374.	72,200. 335,585.	461,466.	26 200
17	Travel	400,374.	333,363.	94,400.	36,389.
18	Payments of travel or entertainment expenses				
40	for any federal, state, or local public officials	24,995.	24,995.		
19	Conferences, conventions, and meetings	44,333.	44,333.		
20	Payments to affiliates				<u> </u>
21 22	Depreciation, depletion, and amortization	69,658.	368.	69,290.	
23	Insurance	37,976.	5,568.	32,408.	<u> </u>
23 24	Other expenses. Itemize expenses not covered	37,310.	5,500.	J2,400.	
	above. (List miscellaneous expenses in line 24e. If line				
	24e amount exceeds 10% of line 25, column (A)				
2	amount, list line 24e expenses on Schedule 0.) LIST MANAGEMENT SERVICE	180,976.	151,318.	10,622.	19,036.
b	INDIRECT COST ALLOCATIO	100,570.	515,430.	-561,372.	45,942.
c			313/130.	301/3/21	45/544
q					* 180 11
	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	10,439,087.	7,931,355.	1,115,151.	1,392,581.
26	Joint costs. Complete this line only if the organization		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	_,,	
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here X If following SOP 98-2 (ASC 958-720)	1,390,849.	766,683.	195,392.	428,774.
	N (Mac app-720)	-,000,040.	,00,000.		5 000 (co.17)

Form 990 (2017)
Part X Balance Sheet

Pai	TΑ	Balance Sheet					
		Check if Schedule O contains a response or not	te to any	line in this Part X			
				***	(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			602,738.	1	382,977.
	2	Savings and temporary cash investments	2,263,922.	2	2,460,417.		
	3	Pledges and grants receivable, net			1,029,852.	3	2,907,476.
	4	Accounts receivable, net	50,557.	4	143,552		
ı	5	Loans and other receivables from current and fo					7
		trustees, key employees, and highest compensa		1.7			
ľ		Part II of Schedule L		5			
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section					
ı		employers and sponsoring organizations of sect	ion 501(c)(9) voluntary			
ø		employees' beneficiary organizations (see instr).		6			
Assets	7	Notes and loans receivable, net		*****************************		7	
₹	8	Inventories for sale or use		102,577.	8	101,534	
	9	Dona and a company of the first of the contract of the contrac		***************************************	89,482.	9	134,105
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	1,183,062. 970,343.			
1	b		10b	<u>970,343.</u>		10c	212,719
	11	Investments - publicly traded securities	4,169,355.	11	5,037,218		
ļ	12	investments - other securities. See Part IV, line 1		12			
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14	"		
	15	Other assets. See Part IV, line 11	34,279.	15	36,036		
	16	Total assets. Add lines 1 through 15 (must equi	8,599,088.	16	11,416,034.		
	17	Accounts payable and accrued expenses	704,470.	17	1,028,535.		
	18	Grants payable		18			
-	19	Deferred revenue		•••••	74,281.	19	2,419.
.	20	Tax-exempt bond liabilities		•••••		20	
	21	Escrow or custodial account liability. Complete I				21	
K	<u>22</u>	Loans and other payables to current and former	officers,	directors, trustees,			
		key employees, highest compensated employee					
Liabilities		Complete Part II of Schedule L				22	
4	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, page					
		parties, and other liabilities not included on lines	17-24).	Complete Part X of		İ	
		Schedule D			511,987.		444,589.
_	26	Total liabilities. Add lines 17 through 25			1,290,738.	26	1,475,543.
١		Organizations that follow SFAS 117 (ASC 958		here 🕨 🔼 and		h ivi	
8		complete lines 27 through 29, and lines 33 an					
	27	Unrestricted net assets			4,167,788.	27	4,522,908.
	28				2,485,484.	28	4,599,255
2	29				655,078.	29	818,328.
		Organizations that do not follow SFAS 117 (As					
5		and complete lines 30 through 34.					
3	30	Capital stock or trust principal, or current funds		30			
ž	31	Paid-in or capital surplus, or land, building, or eq				31	
Net Assets of Fund balances	32	Retained earnings, endowment, accumulated in				32	0.010.101
	33	Total net assets or fund balances			7,308,350.	33	9,940,491.
\perp	34	Total liabilities and net assets/fund balances			8,599,088.	34	11,416,034.

Both consolidated and separate basis

2c X

Form 990 (2017)

X

X Separate basis

Consolidated basis

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

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.

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

review, or compilation of its financial statements and selection of an independent accountant?

SCHEDULE A

Department of the Treasury

Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public inspection

Name of the organization

Employer Identification number

		RAIL	S-TO-TRAIL	S CONSERVANC	Y			5	2-1437006		
Pa	rt I	Reason for Public	Charity Status (All organizations must co	omplete thi	s part.) Se	e instructions				
The 1 2 3 4	organ	ization is not a private found A church, convention of ch A school described in sect A hospital or a cooperative A medical research organiz	lation because it is: (aurches, or association tion 170(b)(1)(A)(ii). (hospital service orga	For lines 1 through 12, c on of churches described (Attach Schedule E (Forn anization described in se	heck only d I in sectio n 990 or 99 ection 170	one box.) n 170(b)(1 00-EZ).) (b)(1)(A)(ii	I)(A)(I). I).		the hospital's name,		
5		city, and state: 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 7 8	X	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)									
9		An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:									
10		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.)									
11 12		An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.									
а		Type I. A supporting orgative supported organization. You must c	anization operated, s on(s) the power to req	upervised, or controlled gularly appoint or elect a	by its supp	orted orga	anization(s), ty	pically by g			
b		Type II. A supporting org control or management o organization(s). You mus	f the supporting orga	anization vested in the sa							
C		Type III functionally inte its supported organization						y integrate	d with,		
d		Type III non-functionally that is not functionally int requirement (see instruction	/ Integrated. A supp egrated. The organiz	orting organization oper ation generally must sat	ated in con sfy a distri	nection w bution req	rith its support uirement and				
е		Check this box if the orga functionally integrated, or	anization received a v	written determination from	n the IRS t	that it is a		, Type III			
f	Ente	r the number of supported o		many minage and a support	ig organiza						
g		lde the following information					***************************************				
	L			CHECK BERTARING STREETS	(iv) is the organ in your governin Yes	nization listed na document? No			(ATTEN ENGLEMENT AND ENGLES FOR THE STREET		
				THE RESIDENCE MEMBERS AND ADDRESS OF THE PERSON OF THE PER	105	140					
				-111							
					7 . 1				·		

Schedule A (Form 990 or 990-EZ) 2017 RAILS-TO-TRAILS CONSERVANCY 52-1437 Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	7082199.	8598477.	7885203.	9189136.	11912086.	44667101.
2	Tax revenues levied for the organ-					1	
	ization's benefit and either paid to						÷
	or expended on its behalf						
3	The value of services or facilities				-		
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	7082199.	8598477.	7885203.	9189136.	11912086.	44667101.
5	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)						3784972.
	Public support. Subtract line 5 from line 4.	4.6.7		\$10			40882129.
	tion B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	7082199.	8598477.	7885203.	9189136.	11912086.	<u>44667101.</u>
8	Gross income from Interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	177,973.	133,113.	175,414.	142,027.	129,963.	758,490.
9	Net income from unrelated business				u		
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)	42,990.	29,106.	78,868.	41,694.	69,966.	262,624.
	Total support. Add Ilnes 7 through 10						45688215.
	Gross receipts from related activities,	•	,	•••••			<u>,796,162.</u>
13	First five years. If the Form 990 is for		first, second, third	d, fourth, or fifth tax	x year as a sectior	501(c)(3)	
Sec	organization, check this box and stop tion C. Computation of Public	here	nentage			<u></u>	>
						· I	00 10
	Public support percentage for 2017 (li					14	89.48 %
	Public support percentage from 2016					15	92.98 %
	33 1/3% support test - 2017. If the o						
	stop here. The organization qualifies a						
	33 1/3% support test - 2016. If the o						`
	and stop here. The organization quali		· · · -	***************************************			
	10% -facts-and-circumstances test						•
	and if the organization meets the "fact						► [
	meets the "facts-and-circumstances" t					7 ! !: dE !	
	10% -facts-and-circumstances test						
	more, and if the organization meets th organization meets the "facts-and-circ						` . —
10	Private foundation. If the organization	TOTAL HOL CHECK & C	OX ON IINO 13, 168	, 100, 1/a, or 1/b	, check this box at	iu see instructions	

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support	and the product contra	proto i di c ii.,	•••			
Cale	endar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and				1 1		
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						_
_	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
•	ization's benefit and either paid to						
	or expended on its behalf	·					
5	The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
_	·						
	Total. Add lines 1 through 5		-				
7a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
D) Amounts included on lines 2 and 3 received from other than disqualified persons that						
	exceed the greater of \$5,000 or 1% of the		1				
	amount on line 13 for the year						
C	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support		-		-1		
	ndar year (or fiscal year beginning in) 🕨	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties.						
	and income from similar sources	·					
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975		<u> </u>				
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b, whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain						
	or loss from the sale of capital						
13	assets (Explain in Part VI.)					- "	-
	First five years. If the Form 990 is for	the organization's	s first second thir	d fourth or fifth to	av vear as a soction	n 501(a)(3) araani-a	tion
••					-	n 50 r(c)(3) organiza	
Sec	tion C. Computation of Public	c Support Per	centage	· · · · · · · · · · · · · · · · · · ·		***************************************	
	Public support percentage for 2017 (II			olumn (f))		15	<u>~</u>
						16	%
Sec	tion D. Computation of Inves	tment Income	Percentage			1 10 1	
	Investment income percentage for 20			ne 13. column (fil)		17	<u></u>
18	investment income percentage from 2					18	%
-	33 1/3% support tests - 2017. If the						
	more than 33 1/3%, check this box an						is uor
l							
U	33 1/3% support tests - 2016. If the						
	line 18 is not more than 33 1/3%, chec Private foundation, If the organization						
20			cov on IIne 1/1 10:	a ar iun abaaktk	un DAY ARD AGA IRA	TRIATIANA	

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No
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9b 9c		
9b 9c		
9b 9c 10a		
9b 9c		

	edule A (Form 990 or 990-EZ) 2017 RAILS-TO-TRAILS CONSERV		5	2-1437006 Page 6
1	Typo in troit, unotionally integrated oco(u)(o) cupper in			
1	Check here if the organization satisfied the Integral Part Test as a qualifyir other Type III non-functionally integrated supporting organizations must contain the content of the content	_		art VI.) See instructions. A
Sect	ion A - Adjusted Net Income	ompiete ((A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	1.		
	instructions for short tax year or assets held for part of year);			
a	Average monthly value of securities	1a		
	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other			
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035	6		
7	Recoverles of prior-year distributions	7		· · · · · · · · · · · · · · · · · · ·
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net Income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax Imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional	lly Integra	ted Type III supporting organ	nization (see

Schedule A (Form 990 or 990-EZ) 2017

instructions).

	edule A (Form 990 or 990-EZ) 2017 RAILS-TO-TRAI			2-1437006 Page 7
	tion D - Distributions	yayloy Gupporting Orga	inizations (continued)	Ourse and Value
1	Amounts paid to supported organizations to accomplish ex	emnt nurnoses		Current Year
2	Amounts paid to perform activity that directly furthers exem			
-	organizations, in excess of income from activity	pt purposes or supported		
3	Administrative expenses paid to accomplish exempt purpos	es of supported organization		
4	Amounts paid to acquire exempt-use assets	ies of eapported organization	<u>. </u>	
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.		10102	
8	Distributions to attentive supported organizations to which t	the organization is responsive	· ·	
_	(provide details in Part VI). See instructions.	and digameason to responding	,	
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount		·-····································	
		(i)	(11)	(iii)
Sect	tion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2017	Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reason-			
	able cause required- explain in Part VI). See Instructions.			
3	Excess distributions carryover, if any, to 2017			
8				
b	From 2013			
C	From 2014			
d	From 2015			
0	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			-
į	Carryover from 2012 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.	R. His XII - Hand		
7	Excess distributions carryover to 2018. Add lines 3]			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2013			
b	Excess from 2014	1. 이 당 된 기고 하고 본모했다.		[55: 10] 범인 [50] 이 화장이다.

Schedule A (Form 990 or 990-EZ) 2017

c Excess from 2015
 d Excess from 2016
 e Excess from 2017

Schedule A (Form 990 or 990-EZ) 2017 RAII	LS-TO-TRAILS	CONSERVANCY	52-1437006 Page 8
Part VI Supplemental Information Part IV, Section A, lines 1, 2, 3b, 3	Provide the explanation ic, 4b, 4c, 5a, 6, 9a, 9b, 9d nd 3; Part IV, Section E, lii	is required by Part II, line 10; c, 11a, 11b, and 11c; Part IV, nes 1c, 2a, 2b, 3a, and 3b; Pa	Part II, line 17a or 17b; Part III, line 12; Section B, lines 1 and 2; Part IV, Section C, art V, line 1; Part V, Section B, line 1e; Part V,
SCHEDULE A, PART II, LIN	IE 10, EXPLANA	ATION FOR OTHER	INCOME:
REIMBURSED EXPENSES	Ţ		
		•••	<u> </u>
2013 AMOUNT: \$ 42,990.		<u> </u>	
2014 AMOUNT: \$ 29,106.			
2015 AMOUNT: \$ 78,868.	***		·
2016 AMOUNT: \$ 41,694.			
2017 AMOUNT: \$ 50,750.			
MISCELLANEOUS INCOME			
2017 AMOUNT: \$ 19,216.			
····			
		***	- 44
			•
		W. W	**************************************
•			
			
		·	

Schedule B

(Form 990, 990-EZ, or 990-PF

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Employer identification number RAILS-TO-TRAILS CONSERVANCY 52-1437006 Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 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 filling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules X For an organization described in section 501(c)(3) 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)(v)), that checked Schedule A (Form 990 or 990 EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filling Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled 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. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year _______ > \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't 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 its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF). LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Name of organization

Employer identification number

RAILS-TO-TRAILS CONSERVANCY

52-1437006

Part I	Contributors (see instructions). Use duplicate copies of Part I if a	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2 -		\$ 300,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3 -		\$ 250,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4 -		<u>2,000,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

RAILS-TO-TRAILS CONSERVANCY

52-1437006

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See Instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Name of organization Employer identification number RAILS-TO-TRAILS CONSERVANCY 52-1437006 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. 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 info. once.) Use duplicate copies of Part III if additional space is needed. (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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (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

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-9047

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, Ilne 3, or Form 990-EZ, Part V, 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," on 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," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

•	Section 501(c)(4), (5), or (6) organiza	ations: Complete Part III.			
Nan	ne of organization			Emp	loyer identification number
		TO-TRAILS CONSERY			<u>52-1437006</u>
Pa	irt I-A Complete if the or	ganization is exempt und	der section 501(c)	or is a section 527 or	ganization.
2	Provide a description of the organi Political campaign activity expendi Volunteer hours for political campa	itures		> \$	<u> </u>
Pa	rt I-B Complete if the or	ganization is exempt une	der section 501(c)	(3).	
1	Enter the amount of any excise tax				
	Enter the amount of any excise tax				
3	If the organization incurred a section	on 4955 tax, did it file Form 472	0 for this year?		Yes No
4a	Was a correction made?			***************************************	Yes No
<u>_b</u>	If "Yes," describe in Part IV.				
		ganization is exempt une			
	Enter the amount directly expende				
2	Enter the amount of the filing organ		•		
_	exempt function activities				
3	Total exempt function expenditures line 17b			•	
4	Did the filing organization file Form	4400 BOL for this year?			
	Enter the names, addresses and er				
Ŭ	made payments. For each organiza				
	contributions received that were pr	romptly and directly delivered to	a separate political org	anization, such as a separat	e segregated fund or a
	political action committee (PAC). If	additional space is needed, pro	vide information in Part	t 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 Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2017

Schedule C (Form 990 or 990-EZ) 2017	RAILS-	TO-TR	AILS CONSER	VANCY	52-1	437006 Page 2
Part II-A Complete if the org	ganizatio	n is exe	mpt under section	1 501(c)(3) and file	ed Form 5768 (ele	ction under
A Check 🕨 🔲 if the filing organiza	ation belong	s to an aff	iliated group (and list in	Part IV each affiliated	group member's name	e, address, EIN,
expenses, and sha						
B Check 🕨 🔛 if the filing organize	ation checke	ed box A a	nd "limited control" pro	visions apply.		
	its on Lobb ditures" me		nditures ınts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence publi	c opinion (grass roots lobbying)		101,499.	
b Total lobbying expenditures to infl	-	, ,			102,990.	
c Total lobbying expenditures (add I	***		- · · · · · · · · · · · · · · · · · · ·		204,489.	
d Other exempt purpose expenditur					10,134,404.	
e Total exempt purpose expenditure	10,338,893.					
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.					666,945.	
If the amount on line 1e, column (a)	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 \$1,00	0,000	\$100,00	00 plus 15% of the exc	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5						
Over \$1,500,000 but not over \$17	,000,000	\$225,00	00 plus 5% of the exces	ss over \$1,500,000.		
Over \$17,000,000		\$1,000,	000.			
g Grassroots nontaxable amount (er	ter 25% of	ine 1f)			166,736.	
h Subtract line 1g from line 1a. If zer				***************************************	0.	
I Subtract line 1f from line 1c. If zero	• -			***************************************	0.	
j If there is an amount other than ze	-		line 1i, did the organiza	ation file Form 4720		<u> </u>
reporting section 4911 tax for this						Yes No
(Some organizations t	hat made a	section 5	eraging Period Under 01(h) election do not l ate instructions for lin	nave to complete all o	of the five columns be	
	Lobb	ying Expe	nditures During 4-Yea	r Averaging Period		-
Calendar year (or fiscal year beginning in)	(a) 2	014	(b) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount	553	,951.	592,110.	611,619.	666,945.	2,424,625.
b Lobbying ceiling amount (150% of line 2a, column(e))						3,636,938.
c Total lobbying expenditures	211	,808.	132,772.	210,622.	204,489.	759,691.
d Grassroots nontaxable amount	138	,488.	148,028.	152,905.	166,736.	606,157.
e Grassroots ceiling amount (150% of line 2d, column (e))						909,236.
f Grassroots lobbying expenditures	45	,243.	88,696.	111,572.	101,499.	347,010.

Schedule C (Form 990 or 990-EZ) 2017 RAILS-TO-TRAILS CONSERVANCY 52-1437006 Page 3 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)).

1 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: a Volunteers? b Paid staff or management (Include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?	Yes	1				
local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?		No	5	Amount		
or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?						
a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?					in the state of th	
b Paid staff or management (Include compensation in expenses reported on lines 1c through 1i)? c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?						
c Media advertisements? d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?					Na. (1)	
d Mailings to members, legislators, or the public? e Publications, or published or broadcast statements?	:					
4 6						
& Cuanta ta athau aggregations for labaria a great						
f Grants to other organizations for lobbying purposes?						
g Direct contact with legislators, their staffs, government officials, or a legislative body?					_	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?						
i Other activities?						
j Total. Add lines 1c through 1i						
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?						
b If "Yes," enter the amount of any tax incurred under section 4912						
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			2		<u> </u>	
d 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)(8	ō), or	sec	tion		
501(c)(6).						
		_		Yes	No	
1 Were substantially all (90% or more) dues received nondeductible by members?		L	1			
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2			
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the Part III-B Complete if the organization is exempt under section 501(c)(4), section	prior year?	?	3			
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "I answered "Yes." 1 Dues, assessments and similar amounts from members			1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political						
expenses for which the section 527(f) tax was paid).	ш					
a Current year		-	20			
b Carryover from last year			2a 2b			
b Carryotor non-rate your			2c			
		├				
c Total						
c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		```` 	3			
c Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess			3			
 a Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 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 policy conditions part year? 	itical					
 c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess 	itical		4 5			

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Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

RAILS-TO-TRAILS CONSERVANCY

Employer identification number 52-1437006

Pa	rt I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v		
	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a	5 0	
	for charitable purposes and not for the benefit of the donor of	- · ·	
D -	impermissible private benefit?		Yes No
Pai	The second of th		Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
	Preservation of land for public use (e.g., recreation or e	· -	torically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	led conservation contribution in the form	1 : 1
	day of the tax year.		Held at the End of the Tax Year
a	Total number of conservation easements		2a
b			
	Number of conservation easements on a certified historic stru		
ď	Number of conservation easements included in (c) acquired a		ıre
_	listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	organization during the tax
	year >		
4	Number of states where property subject to conservation eas		
5	Does the organization have a written policy regarding the peri		· — — — — — — — — — — — — — — — — — — —
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, l	handling of violations, and enforcing cons	servation easements during the year
-	Amount of company to be a manifesting to the state of the	Haran again tage and a tage of	
7	Amount of expenses incurred in monitoring, inspecting, hand > \$	ling of violations, and enforcing conserva	tion easements during the year
8			(L) (A) (P) (I)
٠	Does each conservation easement reported on line 2(d) above	•	
9	and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation	on accompate in its revenue and evenue	etatement and belongs short and
•	include, if applicable, the text of the footnote to the organization	· · · · · · · · · · · · · · · · · · ·	
	conservation easements.	ion s illandia: statements that describes	the organization's accounting for
Par		Art. Historical Treasures, or Ot	her Similar Assets
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under SFAS 116 (AS		nent and halance sheet works of art
	historical treasures, or other similar assets held for public exh		
	the text of the footnote to its financial statements that describ		nde di public service, provide, ili r-ait XIII,
b	If the organization elected, as permitted under SFAS 116 (AS		and halance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:	doanon, or research in landierance of pur	sile service, provide the following arrivalits
	-		L ¢
	701 A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
2	If the organization received or held works of art, historical trea	scurse or other similar assets for financia	
-	the following amounts required to be reported under SFAS 11		i gaii, piovide
а	December to the body of the Cook B. INDUR. 4	· -	* ¢
	Assets included in Form 990 Part Y		

(1) Federal income taxes
(2) DEFERRED LEASE INCENTIVE 169,306.
(3) DEFERRED RENT 275,283.
(4)
(5)
(6)
(7)
(8)
(9)

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

(b) Eden value
(b) Eden value
(b) Eden value
(b) Eden value
(c) Eden value
(d) Eden value
(

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

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 AND INCLUDES AN ADDITIONAL \$44,433 IN ACCUMULATED INVESTMENT EARNINGS, WHICH ARE ALSO CONSIDERED PERMANENTLY RESTRICTED. THE DONOR STIPULATED THAT THE PRINCIPAL BE INVESTED IN PERPETUITY; HOWEVER, THIRTY YEARS FROM THE DATE OF THE GIFT, THE FUND WILL REVERT TO RTC'S GENERAL ENDOWMENT.

DURING THE YEAR ENDED SEPTEMBER 30, 1998, RTC ESTABLISHED THE WYSS ENDOWMENT FUND (FUND 2). THIS FUND WAS ESTABLISHED WITH A GIFT OF CASH OF \$250,000.

RTC HAS RECEIVED \$26,000 IN CONTRIBUTIONS TO ITS GENERAL ENDOWMENT DURING THE YEARS ENDING SEPTEMBER 2011-2016.

DURING THE YEAR ENDED SEPTEMBER 30, 2018, RTC ESTABLISHED THE KEITH

LAUGHLIN LEGACY ENDOWMENT FUND. RTC'S BOARD OF DIRECTORS ESTABLISHED THIS

FUND TO HONOR THE 18 YEARS OF SERVICE OF ITS PRESIDENT KEITH LAUGHLIN.

THE BOARD MADE PERSONAL PLEDGES IN EXCESS OF \$500,000, OF WHICH \$163,250

WAS PERMANENTLY RESTRICTED.

IN ACCORDANCE WITH THE DONOR'S INSTRUCTIONS, EARNINGS ON FUND 1 ARE

AVAILABLE TO SUPPORT RTC'S GENERAL OPERATIONS. UNDER RTC'S ENDOWMENT

SPENDING POLICY, EARNINGS ON THIS FUND, UP TO 5% OF FUND 1'S MARKET VALUE

AS OF THE PRIOR YEAR, ARE CONSIDERED AVAILABLE FOR CURRENT OPERATIONS.

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 TO OVERRIDE THIS PROVISION. IN PRIOR YEARS,

RTC'S BOARD OF DIRECTORS RESOLVED THAT ALL OF THE INVESTMENT EARNINGS ON

FUND 2 BE CONSIDERED UNRESTRICTED AND AVAILABLE TO SUPPORT GENERAL

OPERATIONS. UNDER RTC'S ENDOWMENT SPENDING POLICY, EARNINGS ON FUND 2, UP

TO 5% OF FUND 2'S MARKET VALUE AS OF THE PRIOR YEAR, ARE CONSIDERED

AVAILABLE FOR CURRENT OPERATIONS.

IN ACCORDANCE WITH THE DONOR'S INSTRUCTIONS, EARNINGS ON FUND 3 ARE

AVAILABLE TO SUPPORT RTC'S GENERAL OPERATIONS. UNDER RTC'S ENDOWMENT

SPENDING POLICY, EARNINGS ON THIS FUND, UP TO 5% OF FUND 3'S MARKET VALUE

SCHEDULE G

Department of the Treasury

Internal Revenue Service

Part

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ 照顾www.irs.gov/Form990 for the latest Instructions.

OMB No. 1545-0047

2017

Open to Public Inspection

Employer identification number

Name of the organization

RAILS-TO-TRAILS CONSERVANCY 52-1437006

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

Indicate whether the organization raised funds through any of the following activities. Check all that apply. X Mail solicitations e X Solicitation of non-government grants X Internet and email solicitations Solicitation of government grants X Phone solicitations Special fundraising events X In-person solicitations 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? X Yes □ No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundralser have custody or control of contributions? (v) Amount paid (vI) Amount paid (I) Name and address of individual (iv) Gross receipts to (or retained by) (II) Activity to (or retained by) or entity (fundraiser) from activity fundraiser organization listed in col. (i) MKDM - 301 EAST MARKET ST Yes No CHARLOTTESVILLE, VA 22902 2,487,263. DIRECT & EMAIL CONSULTING X 2,587,463, 100,200. Total 2 587 463 100,200 2,487,263, 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing. AL, AK, IL, 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" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. 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) 1 Gross receipts 2 Less: Contributions Gross income (line 1 minus line 2) 4 Cash prizes Noncash prizes Direct Expenses Rent/facility costs Food and beverages Entertainment Other direct expenses 10 Direct expense summary. Add lines 4 through 9 in column (d) ▶ Net income summary. Subtract line 10 from line 3, column (d) Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, Ilne 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes % Yes % Volunteer labor Nο No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming Income summary. Subtract line 7 from line 1, column (d) Enter the state(s) in which the organization conducts gaming activities: a Is the organization ilcensed to conduct 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: _

Schedule G (Form 990 or 990-EZ) 2017 RAILS-TO-TRAILS CONSERVANCY

52-1437006 Page 2

Sch	edule G (Form 990 or 990-EZ) 2017 RAILS-TO-TRAILS CONSERVANCY	52-14:	37006	Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	No
	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?	Г	Yes	No
10	Indicate the percentage of gaming activity conducted in:		195	NO
		١.	_	
	The organization's facility		3a	<u>%</u>
	An outside facility		3b	<u>%</u>
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?	C	Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amou	ınt		
	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:			
	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
a		Г	Yes	☐ No
L	retain the state gaming license?	<u>L</u>		110
D	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	ıne		
Da	organization's own exempt activities during the tax year \$\bigs\\$ \$\text{tIV} \text{Supplemental Information.} Provide the explanations required by Part I, line 2b, columns (iii) and (v): and Pa		0.01.45	<u> </u>
Fa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	ırt III, Iines	9, 96, 10	Jb, 15b,
~~				
SCI	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAL:	SERS:		
				
(I) NAME OF FUNDRAISER: MKDM			
` _				
(I) ADDRESS OF FUNDRAISER: 301 EAST MARKET ST, CHARLOTTESVILL	E, VA	229	02
וגק	RT I, LINE 2B, COLUMN (V):			
	TE TE TO CONTINUE VVII			
IN	ADDITION TO THE RETAINER FEE OF \$100,200.00 PAID FOR PROFES	SSION	<u> </u>	
SEI	RVICES, MKDM WAS ALSO PAID \$122,638.00 FOR REIMBURSEMENT OF	COMCI	राज्य	
	SIGN, WRITING, COPYEDITING, AND LAYOUT OF CAMPAIGNS.	COMCI		
,	,, oor restrate, rate millor or craft 11101101			

Schedule G Part IV	(Form 990 Suppler	or 990-EZ) nental infor	RAII mation	S-TO-	TRAILS	CONSERVANCY	•	52-1437006	Page 4
		TO MKDM							
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									_
								u 1800	
	- <u>-</u>	•	<u> </u>						

SCHEDULE I (Form 990)

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

15,000

0.

Name of the organization

RAILS-TO-TRAILS CONSERVANCY

General Information on Grants and Assistance

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and t criteria used to award the grants or assistance?

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

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of (e) Amount of (g) Descr valuation (book, or government (if applicable) cash grant non-cash noncash a: FMV, appraisal, assistance other) BIKEMORE 2209 MARYLAND AVENUE 45-5428628 501C3 BALTIMORE, MD 21218 0 5,000 BIKE EAST BAY 466 WATER STREET OAKLAND, CA 94607 94-2585652 501C3 7,000 0. MARIN COUNTY BICYCLE COALITION 733 CENTER BLVD. FAIRFAX, CA 94930 68-0419394 501C3 5 000 0. NATIONAL ROAD HERITAGE CORRIDOR 65 WEST MAIN STREET, #103 UNIONTOWN, PA 15401 25-1713208 501C3 14,500. 0. CITY OF BROWNSVILLE P.O. BOX 911 BROWNSVILLE, TX 78520 74-6000422 31,760 0,

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

31-6000175

3 Enter total number of other organizations listed in the line 1 table

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

732101 11-01-17

CITY OF DAYTON

DAYTON, OH 45401

101 WEST THIRD STREET P.O. BOX 22

Schedule I (Form 990) RAILS-TO-TRAILS CONSERVANCY

(a) Nama and address of	(L) FIN	(-) IDC	4.D.A.			
(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) Descr non-cash a
CYCLES OF CHANGE						
1246 23RD AVENUE	:					
OAKLAND, CA 94606	11-3821114	501C3	5,000.	0,		_
DELAWARE & LEHIGH NATIONAL						
2750 HUGH MOORE PARK ROAD						
EASTON, PA 18042	23-2977618	501C3	7,500.	0.		
FRIENDS OF CLARE COUNTY PARKS &				į		
RECREATION - P.O. BOX 274 - CLARE.						
MI 48617	26-0540601	50103	5,000.	0.		
			3,000.			
GEARIN' UP BICYCLES						
314 RANDOLPH PLACE, NE						
WASHINGTON, DC 20002	45-4857730	501C3	12,000.	0.		
GREATER MILWAUKEE COMMITTEE						
247 FRESHWATER WAY, SUITE 400						
MILWAUKEE, WI 53204	39-0749512	501C3	6,000.	0.		
				-		
PARKS AND TRAILS NEW YORK						
29 ELK STREET	14 1853485	F04 = 3	45.00			
ALBANY, NY 12207	14-1753475	501C3	15,000.	0.	·	
ROCK ISLAND RAIL CORRIDOR						
AUTHORITY - 415 E. 12TH STREET -						
KANSAS CITY, MO 64106	44-6000524		25,000	0.		
SOLUMINA din COMBRITTIN					-	
SOUTHEAST COMMUNITY 3323 EASTERN AVENUE, SUITE 200						
BALTIMORE, MD 21224	52-1034466	50103	5,000,	o.		
	22 1024400		3,000,	· · ·		
SOUTHWEST RENEWAL FOUNDATION OF						
HIGH POINT 501 WEST HIGH AVENUE						
- HIGH POINT, NC 27260	45-4840804	501C3	10,000.	0.		

732241 04-01-17 Schedule I (Form 990) RAILS-TO-TRAILS CONSERVANCY

(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) Desc non-cash a
MONTGOMERY PARKS FOUNDATION 9500 BRUNETT AVENUE	52-1788782	E0102	F 000			
SILVER SPRING, MD 20901	52-1788782	501C3	5,000.	0,		
TRANSFORMCA 436 14TH STREET, SUITE 600	70 1501570	F01.02	5 000			
OAKLAND, CA 94612	72-1521579	501C3	5,000.	0,		1
WEST CREEK CONSERVANCY 1440 ROCKSIDE ROAD, SUITE 329						
CLEVELAND, OH 44134	34-1859046	501C3	16,000.	0.		ļ .
WESTERN NEW YORK LAND CONSERVANCY P.O. BOX 471						
EAST AURORA, NY 14052	22-3160426	501C3	10,000.	0.		
RUTHERFORD CITY GOVERNMENT 174 FAIRGROUND ROAD						
SPINDALE, NC 28160	56-6000337		30,348.	0.		ļ
DALLAS COUNTY CONSERVATION BOARD 14581 K AVENUE						
PERRY, IA 50220	42-6004172		15,000.	0.		
NEW JERSEY BIKE & WALK COALITION 551 VALLEY ROAD, SUITE 140					·	
UPPER MONTCLAIR, NJ 07043	23-4648049	501C3	7,500.	0.		
	"-	- "				

732241 04-01-17

Schedule I (Form 990) (2017) RAILS-TO-TRAILS	CONSERVA	ANCY		
Part III Grants and Other Assistance to Domestic Individuals. Part III can be duplicated if additional space is needed.	. Complete if the	e organization answ	ered "Yes" on Form 9	90, Part IV, line 22.
(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)
Part IV Supplemental Information. Provide the information requ	l uired in Part I, lin	e 2; Part III, column	(b); and any other ad	ditional information.
PART I, LINE 2:				
RTC PROVIDES GRANTS TO TRAIL ORGANI	ZATIONS	OR MUNICIE	PALITIES WHO	O NEED TO
MAKE PERMANENT IMPROVEMENTS TO THEI				
				ENGTH OR BY
NEW CONSTRUCTION THAT MAKES THE TRA	AIL MORE	USABLE. GI	RANTEES ARE	INDENTIFIED
BY RTC AND ARE INVITED TO SUBMIT A	PROPOSA	L. EACH PE	ROPOSAL IS	EVALUATED
BASED ON THE GUIDELINES OF THE GRAN	IT PROGRA	M AND RTC	DETERMINES	AWARD
RECIPIENTS. A FINAL REPORT IS REQUI	RED FROM	EACH REC	PIENT ORGAL	NIZATION.

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

RAILS-TO-TRAILS CONSERVANCY

Employer identification number

52-1437006

P	art Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			1,114
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these Items.			$\mathcal{L}^{\mathcal{M}}_{\mathcal{A}}$
	First-class or charter travel Housing allowance or residence for personal use	0, 1		
	Travel for companions Payments for business use of personal residence			
	Tax Indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)		MO A	
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			A. 16.
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	1.5	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the Items checked on line 1a?			·
			1949	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
_	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.		w.	
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study	25.34 (15)		
	Tompensation compensation committee Compensation survey or study Compensation survey or study X Approval by the board or compensation committee			
	Approval by the board or compensation committee	4 4 2 2 7		
	Displace the year did any name listed on Farm 200 Dark #1 Casting A. Burd and by and the file of			1
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filling			1 to 1 to 1
	organization or a related organization:		N. 12	37
a	Receive a severance payment or change-of-control payment?	_4a		X
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?			X
C	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	12.1	Х
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, dld the organization pay or accrue any compensation	4.1		
	contingent on the revenues of:			Maria.
	The organization?	5a		X_
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	4.749.1	- 115	
	contingent on the net earnings of:	1.375.4		
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7	Х	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the		. A	
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		Х
9	if "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 52 4058.6(c)2	- V-		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations. Do not list any individuals that aren't listed on Form 990, Part Vil.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E

		(B) Breakdown of	W-2 and/or 1099-MIS	(C) Retirement and other deferred	(D) Nontaxable benefits	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Deficits
(1) KEITH LAUGHLIN	(1)	228,377.	0.	0.	13,799.	19,960
PRESIDENT	(11)	0.	0.	0.	0.	0.
(2) CYNTHIA DICKERSON	(i)	161,503.	5,000.	0.	9,805.	19,924
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.
(3) KEVIN MILLS	(i)	146,552.	2,500.	0.	9,410.	18,775.
SENIOR VP POLICY	(II)	0.	0.	0.	0.	0.
(4) MARY O'CONNOR	(i)	144,832.	2,500.	0.	9,215.	16,341.
VP DEVELOPMENT	(ii)	0.	0.	0.	0.	0.
(5) LIZ THORSTENSEN	(1)	136,392.	5,000.	0.	8,365.	5,341.
VP TRAIL DEVELOPMENT	(ii)	0.	0.	0.	0.	0.
	(i)					
	(ii)					
	(i)					
	(11)					
	(1)					
	(ii)					
	(i)					
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	(ii)					
	(i)					
	(ii)					
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	(ii)					
	(i)					
	(11)					
	(i)					
	(ii)					
	(1)					1
	(0)					

Schedule					AILS-	TO-	TRZ	AILS C	ONSERV	ANC	Y			
Part III														
Provide th	e info	rmation,	explana	tion, or d	lescriptio	ns requ	uired	for Part I, I	ines 1a, 1b,	3, 4a,	4b, 4c, 5a, 5b, 6a, 6	6b, 7, an	d 8, and for Part II. A	Also complete this p
PART	I,	LINE	7:					.,						
A BON	US :	POOL	WAS	AUTI	ORIZ	ED I	BY	RTC'S	BOARD	OF	DIRECTORS	AND	ALLOCATED	то
STAFF	ВҮ	THE	PRE	SIDEN	<u> </u>			va						
		1412-1												
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SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

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

Attach to Form 990.

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

OMB No. 1545-0047

Inspection

Name of the organization

RAILS-TO-TRAILS CONSERVANCY

Employer identification number 52-1437006

Pa	rt I Types of Property				•			
		(a) Check if applicable	(b) Number of contributions or	(c) Noncash contributio amounts reported o Form 990, Part VIII, line	n Method of o			:S
1	Art - Works of art		nems contributed	TOTAL 050, I BIT VIII, IIII	7 19			
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	х	22	129.77	7. MARKET VAL	UE		
10	Securities - Closely held stock		<u></u>					
11	Securities - Partnership, LLC, or							
- "	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate - Residential					· <u>-</u>		
16	Real estate - Commercial		-					
17	Real estate - Other			· · ·				
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other							
26	Other							
27	Other ()							
28	Other (
29	Number of Forms 8283 received by the organiz	ation during	the tax year for co	ontributions				
	for which the organization completed Form 828	3, Part IV, D	Oonee Acknowledg	ement 29			0	
							Yes	No_
30a	During the year, did the organization receive by	contribution	n any property rep	orted in Part I, lines 1 th	rough 28, that It			
	must hold for at least three years from the date	of the initial	l contribution, and	which isn't required to I	oe used for	791		
	exempt purposes for the entire holding period?					30a		X_
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance p					31		X
32a	Does the organization hire or use third parties of	or related org	ganizations to solid	it, process, or sell nonc	ash			
	contributions?					32a	X	
	If "Yes," describe in Part II.						1.00	
33	If the organization didn't report an amount in co	olumn (c) for	a type of property	for which column (a) is	checked,			1.3
	describe in Part II.							

Schedule M (For	<u> </u>	J) 2017	KWTTO	-10-	TRAILS CO	N2F	RVANCY			54	<u>- т 4 °</u>	7000 F	age 2
is r	eportir	mental Ing in Part I	ı, column i	(b), the n	Provide the information of contribution.	ation r	equired by Pa the number o	t I, lines 30b f items recei	, 32b, ved, o	and 33, and w a combination	hether of bot	the organization h. Also complete	• ————————————————————————————————————
SCHEDULE	М,	LINE	32B:										·
THE ORGAL	NIZ	ATION	USES	THE	SERVICES	OF	CHAPIN	DAVIS	то	PROCESS	OR	SELL	
NON-CASH	COI	NTRIBU	JTION	s.									

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SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

RAILS-TO-TRAILS CONSERVANCY

Employer identification number 52-1437006

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE RAILS-TO-TRAILS CONSERVANCY (RTC), THE NATION'S LARGEST TRAILS
ORGANIZATION WITH MORE THAN 160,000 MEMBERS AND SUPPORTERS, IS
DEDICATED TO WORKING WITH COMMUNITIES TO PRESERVE AND TRANSFORM UNUSED
RAIL CORRIDORS INTO MULTIUSE TRAILS AND TRAIL NETWORKS, CREATING
HEALTHIER PLACES FOR HEALTHIER PEOPLE. FOUNDED IN 1985, RTC IS LOCATED
IN WASHINGTON, DC AND HAS FOUR REGIONAL OFFICES IN PENNSYLVANIA, OHIO,
CALIFORNIA AND FLORIDA. FUNDING FOR THE RTC'S ACTIVITIES COME
PRIMARILY THROUGH MEMBERSHIP DUES AND CONTRIBUTIONS.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
WHERE THEY WANT TO GO. THE HEART OF THIS WORK COMES THROUGH SMART
INVESTMENTS THAT CLOSE GAPS IN TRAIL SYSTEMS AND IMPROVE ACCESS TO
MAJOR DESTINATIONS ACROSS COMMUNITIES AND ENTIRE REGIONS. THE SCOPE OF
THIS WORK IS A PLACEMAKING STRATEGY, WITH TRAILS AS THE CATALYST. THIS
WORK IS CURRENTLY BEING IMPLEMENTED IN EIGHT PLACES ACROSS THE COUNTRY
- PLACES DIVERSE IN THEIR GEOGRAPHY, CULTURE, SIZE AND SCOPE -
SOUTHEAST WISCONSIN, THE SAN FRANCISCO BAY AREA, THE INDUSTRIAL
HEARTLAND, PHILADELPHIA, BALTIMORE, WASHINGTON, D.C., MIAMI AND SOUTH
TEXAS.
FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
MEMBER PROGRAMS - IN ADDITION TO THE PROGRAMS PROVIDED THROUGH PUBLIC
INFORMATION AND EDUCATION, RTC ALSO DIGITIZES MEMBER AND CONSTITUENT
INFORMATION AND TRAIL INFORMATION, CREATING A CENTRALIZED RESOURCE THAT
ASSISTS THE ORGANIZATION IN IDENTIFYING OPPORTUNITIES FOR LINKING TRAIL
LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2017)

SUBMIT ANNUAL REPORTS ON THE CONLFICT OF INTEREST 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:

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

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

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

Name of the organization RAILS-TO-TRAILS CONSERVANCY	Employer Identification number 52-1437006
IN THE CASE OF IN-PERSON REQUESTS. REQUESTS RECEIVED IN WR	ITING, BY PHONE,
FAX OR EMAIL WILL BE HONORED BY DIRECTING REQUESTORS TO RI	C'S WEBSITE.
THREE YEARS OF 990'S, AUDITED FINANCIAL STATEMENTS, AND AN	NUAL REPORTS CAN
BE FOUND ON RTC'S WEBSITE IN ADOBE FORMAT. RTC RESERVES T	HE RIGHT TO
CHARGE A REASONABLE COPYING FEE PLUS ACTUAL POSTAGE FOR MU	LTIPLE COPIES
REQUESTED FROM THE SAME INDIVIDUAL OR RELATED GROUP OF IND	IVIDUALS.
FORM 990, PART IX, LINE 11G, OTHER FEES:	
CONSULTING FEES:	
PROGRAM SERVICE EXPENSES	981,548.
MANAGEMENT AND GENERAL EXPENSES	174,260.
FUNDRAISING EXPENSES	36,604.
TOTAL EXPENSES	1,192,412.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,192,412.