** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

▶ 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.

Inspection

Α	For th	ne 2018 calendar year, or tax year beginning $$ OCT 1 , 2018 $$ and ending	g Sl	EP 30, 201	.9
В	Check i applicat	fole: C Name of organization		D Employer iden	tification number
	Addr				
L	Nam chan	ge Doing business as		52-	-1437006
	Initia retur Final retur	Number and street (OF P.U. DOX IT MAIL IS NOT DELIVERED TO STREET ADDRESS) Number and street (OF P.U. DOX IT MAIL IS NOT DELIVERED TO STREET ADDRESS) ROOM/S	suite	E Telephone num	ber 2-331-9696
_	termi ated	City or town, state or province, country, and ZIP or foreign postal code	t	G Gross receipts \$	11,632,270.
Ļ	Amer	WASHINGTON, DC 2003/		H(a) Is this a group	return
L	Applition pend	F Name and address of principal officer: AKTON KIAN CHAO		for subordina	tes? Yes X No
	·	SAME AS C ABOVE		H(b) Are all subordinate	es included? Yes No
		tempt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or	527	If "No," attacl	a list. (see instructions)
		ite: ▶ WWW.RAILSTOTRAILS.ORG		H(c) Group exemp	
K	Form o	forganization: X Corporation Trust Association Other L	Year of	f formation: 1985	M State of legal domicile: DC
P	art I	Summary			 ,
9	1	Briefly describe the organization's mission or most significant activities: SEE PART	r II	II, LINE 1	. •
Activities & Governance					
ř	2	Check this box if the organization discontinued its operations or disposed of a	more t	than 25% of its net	assets.
Š	3	Number of voting members of the governing body (Part VI, line 1a)			3 17
ত	4	Number of independent voting members of the governing body (Part VI, line 1b)			4 17
es	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)			5 57
ŧ	6	Total number of volunteers (estimate if necessary)			6 25
듗	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			'a 0.
_		Net unrelated business taxable income from Form 990-T, line 38			ъ 0.
				Prior Year	Current Year
<u>o</u>	8	Contributions and grants (Part VIII, line 1h)	1	1,912,086	
Ę.	9	Program service revenue (Part VIII, line 2g)		696,293	234,508.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		106,626	244,165.
ш	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		130,345	89,192.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1	2,845,350	. 10,247,858.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	T	332,970	449,734.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0	. 0.
ģ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		5,006,508	5,047,205.
Expenses	16a			100,200	. 100,200.
×	b	Professional fundraising fees (Part IX, column (A), line 11e) Total fundraising expenses (Part IX, column (D), line 25) 1,572,564.			
W		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		4,999,409	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	1	.0,439,087	. 10,461,891.
	19	Revenue less expenses. Subtract line 18 from line 12		2,406,263	-214,033.
Ses				nning of Current Yea	
vet Assets und Balan	20	Total assets (Part X, line 16)	1	1,416,034	
쨇	21	Total liabilities (Part X, line 26)		1,475,543	
	22	Net assets or fund balances. Subtract line 21 from line 20		9,940,491	9,719,111.
	50 × 50 ×	Signature Block			
		lties of perjury, I declare that I have examined this return, including accompanying schedules and sta			my knowledge and belief, it is
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer ha	as any knowledge.	·
		Signature of officer			
Sigr	1	· ·		Date Z	11/2020
Her	е	ARION "RYAN" CHAO, PRESIDENT			11/0000
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	Dat	GIIGGR	PTIN
Paid		RICHARD J. LOCASTRO, CPA Kuland J. Locastro	2/	11/2020 self-emp	
	arer	Firm's name GELMAN, ROSENBERG & FREEDMAN		Firm's EIN	52-1392008
Use	Unly	Firm's address 4550 MONTGOMERY AVE SUITE 800N		<u> </u>	
		BETHESDA, MD 20814-2930		Phone no. (<u>301) 951-9090</u>
May	the IF	S discuss this return with the preparer shown above? (see instructions)			Yes No

669,897 • including grants of \$) (Revenue \$)

openses ► 7,833,460 • Form 990 (2018)

ENFORCEMENT OF FEDERAL LAWS RELATED TO RAILBANKING.

Other program services (Describe in Schedule O.)

Total program service expenses ▶

Form 990 (2018) 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	
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	١,	ĺ	X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	3	 	<u> </u>
•	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		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	<u> </u>		
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	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			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	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		7.7	
44	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, VIII, IX, or X as applicable.	10.3		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	1. 4.		200
a	Part VI	11a	x	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	Па		_
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	i	X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	1		
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	12a	<u> </u>	
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	40L		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,		\dashv	
	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		X
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		\neg	
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u>
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		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,		37	
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	امرا		Х
19	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		
. •		10		X
20a	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19 20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b	+	
	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	
22002	12.31.18		agn «	2040)

Form 990 (2018) RAILS TO TRAILS CO Part IV Checklist of Required Schedules (continued)

		_	Yes	No
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	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			l
	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,"			
	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			₹.
00	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
_	instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	00-		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		
•	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	ĺ	X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	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			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
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		_X_
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	[Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			77
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u> </u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		v	
Par	Note. All Form 990 filers are required to complete Schedule O	38	Х	
. (4)	Check if Schedule O contains a response or note to any line in this Part V			
	The state of the s	 T	T	<u> </u>
10	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 66		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 5 o Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0		. 1 U A . 1 9	
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		-	A.
٠	(gambling) winnings to prize winners?	10	X	thu. I
	(g	1c		

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

_		r 5	Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 57		200	
		1	Х	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
۵-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			x
3a		3a	<u> </u>	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	3b		
48		4-		x
	financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country:	4a		Α.
D	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		37	
50	Market and the second of the s		. 111	x
		5a 5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a		56		
oa		6a		x
h	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	0a		 ^
		6b		
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).	00	F. 124.	3 7 7
· a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		х
h	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7.0		
•	to file Form 8282?	7c		х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d	3,500	. 4	.075
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year? N/A	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966? N/A	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? N/A	9b		
10	Section 501(c)(7) organizations. Enter:	1,750	2 - 2	
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders N/A 11a			7. T
b	Gross income from other sources (Do not net amounts due or paid to other sources against		4.47	
	amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		71 % %	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? N/A	13a	- Water	
	Note. See the instructions for additional information the organization must report on Schedule O.			
Đ	Enter the amount of reserves the organization is required to maintain by the states in which the			A, 1
	organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand	44		X
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	-	
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	-	
5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	45		Х
	excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15		
6	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х
_	If "Yes," complete Form 4720, Schedule O.	10	(f. b)	
		Form	990	2018)

Part VI | Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 12			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a				
	more members of the governing body?	7a		х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, 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 by the following:		100	
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X
Sec	tion B. Policies (This Section B requests Information about policies not required by the Internal Revenue Code.)	, -		
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		7	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
_	in Schedule O how this was done	12c	x	
13	The December of the Control of the C	13	X	
14	Did the organization have a written whistieblower policy? Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent	14		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
9	The organization's CEO, Executive Director, or top management official	45-	х	9
	Other officers or key employees of the organization	15a 15b	X	
٠	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	150		
169	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	30.00		
.00		16a	1	X
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	Ioa		
•	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's		1 5 1	
	exempt status with respect to such arrangements?	10h		41 1
Sec	tion C. Disclosure	16b		
17	List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)	e only	availa	hle
	for public inspection. Indicate how you made these available. Check all that apply.	o uniy)	avalla	PIC
10		. 	امند	
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and statements available to the public during the tay year.	iinan	ial	
20	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records CYNTHIA DICKERSON - 202-331-9696			
	2121 WARD COURT, NW, 5TH FLOOR, WASHINGTON, DC 20037			

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.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

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

(A) Name and Title	(B) Average hours per	box	not c , unle	Pos heck ss pe	more	than	th an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	institutional trustee	Officer Officer		Highest compensated 4/2	ĺ	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) KATHERINE KRAFT	5.00			37				,	•	
CHAIR (2) JOHN RATHBONE	F 00	X		X	_		L	0.	0.	0.
VICE-CHAIR	5.00	₩		х					0.	0
(3) GAIL LIPSTEIN	5.00	X	_	Λ	_	┝	_	0.	٠.	0.
(3) GAIL LIPSTEIN SECRETARY	3.00	X		х	•			0.	0.	0.
(4) TIM NOEL	5.00	^		Δ		⊢		V •	0.	<u> </u>
TREASURER	3.00	x		x				0.	0.	0.
(5) CHIP ANGLE	5.00	^		Λ			_	V.	<u> </u>	<u> </u>
BOARD MEMBER (UNTIL 2/2019)	3.00	X					İ	0.	0.	0.
(6) JOSEPH BARROW	5.00		Н			┝	\vdash	0.		
BOARD MEMBER	- 3.00	x		i			ļ	l o.	0.	0.
(7) JON COFSKY	5.00						┢			
BOARD MEMBER		\mathbf{x}				ĺ		0.	0.	0.
(8) MARK FILIPPELL	5.00									
BOARD MEMBER (FROM 11/2018)		х	ı	ŀ				0.	0.	0.
(9) VANESSA GARRISON	5.00									
BOARD MEMBER		Х						0.	0.	0.
(10) ROSE GOWEN	5.00									
BOARD MEMBER		Х						0.	0.	0.
(11) NOEL KEGEL	5.00									
BOARD MEMBER		X		ı				0.	0.	0.
(12) CHARLES MARSHALL	5.00									
BOARD MEMBER		X						0.	0.	0.
(13) DOUG MONIESON	5.00									
BOARD MEMBER		X						0.	0.	0.
(14) FRANK MULVEY	5.00									
BOARD MEMBER		Х		_				0.	0.	0.
(15) TIM PETRI	5.00									
BOARD MEMBER		Х						0.	0.	0.
(16) REBECCA RILEY	5.00							_	_ 1	_
BOARD MEMBER	F 6.3	Х	_					0.	0.	0.
(17) JAMES SALLIS	5.00	_			Į			_	_	_
BOARD MEMBER		Х						0.	0.	0.0

832007 12-31-18

Form 990 (2018) RAILS TO									52-1437	006	5 P	age 8
Part VII Section A. Officers, Directors, Trus	stees, Key Em	ploy	yees	, an	d Hi	ighe	st C	compensated Employe	es (continued)			
(A)	(B)				C)			(D)	(E)		(F)	
Name and title	Average	(da	not c	POS heck	ition more	than	one	Reportable	Reportable	E	stimate	ed
	hours per	ьох	c, unle	ss pa	erson directo	is bot	h an	compensation	compensation	a	mount	
	week (list any	H-	1	Ī	T	77.000	, 	from	from related		other	
	hours for	liect						the organization	organizations (W-2/1099-MISC)		npensa from th	
	related	Individual trustee or director	age			satec		(W-2/1099-MISC)	(**-2/1099-141130)		ganizat	
	organizations	trust	Institutional trustee		yee	iag iii		(** =, *********************************			nd relat	
	below	gag	ution		Key employee	est co oyee	喜			org	anizati	ions
	line)	ng.	Instit	Officer	Key e	Highest compensated employee	Former					
(18) GUY O. WILLIAMS	5.00			ĺ	Ì			_	_			
BOARD MEMBER		X		<u> </u>		<u> </u>		0.	0.			0.
(19) KEITH LAUGHLIN	40.00			1								
PRESIDENT (UNTIL 2/2019)				X				249,199.	0.	[7]	3,1	<u>75.</u>
(20) ARION "RYAN" CHAO	40.00		i						_			_
PRESIDENT (FROM 1/2019)		<u> </u>		X				0.	0.			0.
(21) CYNTHIA DICKERSON	40.00	Į							_			
CHIEF OPERATING OFFICER				Х				166,059.	0.	2	9,2	07.
(22) KEVIN MILLS	40.00											
SENIOR VP OF POLICY						X		152,281.	0.	2	7,8	06.
(23) ELIZABETH THORSTENSEN	40.00											
VP OF TRAIL DEVELOPMENT						X		156,955.	0.	1	7,2	76.
(24) BRANDI HORTON	40.00											
VP OF COMMUNICATIONS						Х		136,834.	0.	2	6,9	<u> 12.</u>
(25) MARY O'CONNOR	40.00											
VP OF DVLPT/PRTNRSP (UNTIL 10/2018)						X		128,420.	0.	2	3,1	01.
(26) MARIANNE FOWLER	40.00											
SR STRATEGIST POLICY ADVOCACY						Х		112,448.	0.		4,6	
1b Sub-total						l	▶	1,102,196.	0.	17	2,0	
c Total from continuation sheets to Part V	ll, Section A					l	▶ [0.	0.			0.
d Total (add lines 1b and 1c)						<u>]</u>	▶	1,102,196.	0.	17	2,0	92.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d at	oove) wh	o re	ceived more than \$100	,000 of reportable			
compensation from the organization												8
									,		Yes	No
3 Did the organization list any former officer,										1 1%.		37
line 1a? If "Yes," complete Schedule J for s	ucn individual	• • • • •								3		X
4 For any individual listed on line 1a, is the su and related organizations greater than \$150										4	x	
5 Did any person listed on line 1a receive or a										4		1,5.
o pid any herson hered on this 14 teceive of s	recine comben	اللهود		UIII	ally	urift	riale	su organization or indivi	uuai ioi services		1 . [100

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.

rendered to the organization? If "Yes," complete Schedule J for such person ...

the diganization. Report compensation for the calendar year ending with or with	iii tile organization's tax year.	
(A)	(B)	(C)
Name and business address	Description of services	Compensation
PRODUCTION SOLUTIONS, 1953 GALLOW ROAD,		
SUITE 600, VIENNA, VA 22182	DIRECT MAIL SERVICES	392,902.
PROLIST INC, 8341 BEECHCRAFT AVENUE,		
GAITHERSBURG, MD 20879	FULFILLMENT SERVICES	338,591.
GENERAL SYSTEMS CORP	DATA MANAGEMENT AND	
8787 BRANCH AVENUE #183, CLINTON, MD 20735	PROGRAMMING	269,990.
THE SCOTT GROUP, INC, 348 THOMPSON CREEK,		
SUITE 136, STEVENSVILLE, MD 21666	DIRECT MAIL SERVICES	255,751.
MKDM, 612 E JEFFERSON STREET, 2ND FL,		
CHARLOTTESVILLE, VA 22902	FUNDRAISING SERVICES	203,450.
2 Total number of independent contractors (including but not limited to those liste	d above) who received more than	
\$100,000 of compensation from the organization		

Form 990 (2018) RAILS TO Part VIII Statement of Revenue

		Check if Schedule O cont	tains a respons	e or note to any li	ne in this Part VIII	······	·····	
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts	1	a Federated campaigns	1a	192,167.				
o an		b Membership dues	1b	3,265,925.				
S. E.	,	c Fundraising events						
無る	Ι,	d Related organizations			t de la Susa de			
S,E	١,	e Government grants (contribut						
ĒΩ	1 1	All other contributions, gifts, gran						
돌		similar amounts not included abor		6,221,901.				
들음	١,	g Noncash contributions included in lines	1a-1f; \$	22,522.	■ a salaha tan			
Contributions, Gifts, Grants and Other Similar Amounts		h Total. Add lines 1a-1f			9,679,993.			
				Business Code				
e	2 8	a CONTRACTS		900099	124,335.	124,335.		
ž	1	TRAILINK SUBSCRIPTION		900099	110,173.	110,173.		
Program Service Revenue		6						-
e am	(d						
PD I	6	3						
<u>ራ</u>	ı	All other program service reve	nue					
		Total. Add lines 2a-2f			234,508.		*	
	3	Investment income (including						
		other similar amounts)			177,139.			177,139.
	4	Income from investment of tax						
	5	Royalties	<u></u> ,		12,288.			12,288.
		i	(i) Real	(ii) Personal			- 1	1
	6 a	Gross rents	9,846					
	l t	Less: rental expenses	0					
	۰ د	Rental income or (loss)	9,846					
	c	Net rental income or (loss)			9,846.			9,846.
	7 a	Gross amount from sales of	(i) Securities	(ii) Other			A Transport	
		assets other than inventory	1,437,564		in a same			
	b	Less: cost or other basis		-				
		and sales expenses	1,370,538					
	c	Gain or (loss)	67,026					
	d	Net gain or (loss)		<u></u>	67,026.			67,026.
e e	8 a	Gross income from fundraising	g events (not					
evenue		including \$	of				1. 1. 1	
		contributions reported on line	1c). See					
Other		Part IV, line 18	8	a				
됩		Less: direct expenses		·	Terror Transport of State of S		e de la companya de La companya de la co	
_		 Net income or (loss) from fund: 	-	>				
	9 a	Gross income from gaming act						
		Part IV, line 19	8	·				
	b	Less: direct expenses	k	·				
		Net income or (loss) from gami	_				· · · · · · · · · · · · · · · · · · ·	
ļ	10 a	Gross sales of inventory, less r						
		and allowances	a					
i		Less: cost of goods sold	t					
- }	С	Net income or (loss) from sales			24,977.	24,977.		
ŀ		Miscellaneous Revenue	· <u>-</u>	Business Code				
	11 a			900099	35,499.	<u> </u>		35,499.
	b	· · · · · · · · · · · · · · · · · · ·		900099	6,582.			6,582.
	C							
	d	***************************************						
	е	Total. Add lines 11a-11d			42,081.			
	12	Total revenue. See instructions			10,247,858.	259,485.	0.	308,380.

832009 12-31-18

Form 990 (2018) RAILS TO TRAILS CONSERVANCY Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must cor	mplete all columns.	All other organizations must complete column (A).

	Check if Schedule O contains a respo				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		440 504		
_	and domestic governments. See Part IV, line 21	449,734.	449,734.		
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	<u> </u>			
5	Compensation of current officers, directors,	590,481.	373,178.	144,003.	72 200
6	trustees, and key employees Compensation not included above, to disqualified	330,401.	3/3,1/0.	144,003.	73,300
0	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7		3,476,385.	2,986,754.	240,368.	249,263
7	Other salaries and wages Pension plan accruals and contributions (include	3,470,303.	2,300,734.	240,300.	249,203
8	section 401(k) and 403(b) employer contributions)	194,413.	161,105.	8,386.	24,922
C.		486,060.	402,444.	21,119.	62,497
9	Other employee benefits	299,866.	237,015.	25,431.	37,420
10	Payroll taxes	299,000.	Z37,UI3.	23,431.	37,420
11	Fees for services (non-employees):				
a	Management	53,540.	53,540.		
b	Legal	30,975.	33,340.	30,975.	
	Accounting	29,188.	29,188.	30,975.	• • · · · · · · · · · · · · · · · · · ·
a	Lobbying		Z9,100.		100 200
e	Professional fundraising services. See Part IV, line 17	100,200.		24 067	100,200
f	Investment management fees	24,867.		24,867.	•
g	Other. (If line 11g amount exceeds 10% of line 25,	1 240 241	000 000	106 100	150 660
	column (A) amount, list line 11g expenses on Sch 0.)	1,249,241.	900,086.	196,488.	152,667
12	Advertising and promotion	214,015.		4,998.	1,075
13	Office expenses	1,648,292.	830,839.	169,120.	648,333
14	Information technology	249,684.	164,907.	12,293.	72,484
15	Royalties	528,241.	447 376	41 140	30 010
16	Occupancy		447,276.	41,149.	39,816.
17	Travel	282,822.	201,870.	54,831.	26,121.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	71,259.	20 117	25 400	2 644
19	Conferences, conventions, and meetings	/1,239.	32,117.	35,498.	3,644.
20	Interest				
21	Payments to affiliates	63,742.	E2 624	4 257	E 0.61
22	Depreciation, depletion, and amortization	33,659.	53,624. 26,221.	4,257. 4,470.	5,861.
:3	Insurance	33,033.	20,221.	4,4/0•	2,968.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line				图 100 Ling(F)
	24e amount exceeds 10% of line 25, column (A)				
	amount, list line 24e expenses on Schedule O.) MERCHANDISE COSTS	270 012	104 722	10 551	CE 730
a	DUES AND SUBSCRIPTIONS	270,012. 64,304.	184,733.	19,551. 958.	65,728.
D			57,470.		5,876.
Ç	PROF'L DEVELOPMENT TAXES AND LICENSES	27,188. 18,227.	16,700.	10,124.	364.
d		5,496.	11,688.	6,539.	
	All other expenses		5,029.	1 055 967	25.
5	Total functional expenses. Add lines 1 through 24e	10,461,891.	7,833,460.	1,055,867.	1,572,564.
6	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.	1 501 440	050 105	174 400	EEC BOO
	Check here X if following SOP 98-2 (ASC 958-720)	1,581,440.	850,165.	174,493.	556,782.

Form 990 (2018)
Part X | Balance Sheet

Pa	ırt X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash · non-interest-bearing	382,977.	1	221,948
	2	Savings and temporary cash investments	2,460,417.	2	1,483,914
	3	Pledges and grants receivable, net	2,907,476.	3	1,960,176
	4	Accounts receivable, net	143,552.	4	137,765
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
2		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	
Ä	8	Inventories for sale or use	101,534.	8	107,029
	9	Prepaid expenses and deferred charges	134,105.	9	166,008
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 1,198,327.			
	b	Less: accumulated depreciation 10b 1,034,085.	212,719.	10c	164,242
	11	Investments - publicly traded securities	5,037,218.	11	6,819,195
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	36,036.	15	36,679
	16	Total assets. Add lines 1 through 15 (must equal line 34)	11,416,034.	16	11,096,956
	17	Accounts payable and accrued expenses	1,028,535.	17	697,830
	18	Grants payable	<u></u>	18	
	19	Deferred revenue	2,419.	19	315,443
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
မှ	22	Loans and other payables to current and former officers, directors, trustees,		1.5	
Ě		key employees, highest compensated employees, and disqualified persons.			
Liabilities		Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	-
	25	Other liabilities (including federal income tax, payables to related third		i	
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D	444,589.	25	364,572
	26	Total liabilities. Add lines 17 through 25	1,475,543.	26	1,377,845
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
် ရေ		complete lines 27 through 29, and lines 33 and 34.		111	
ivet Assets of Fund balances	27	Unrestricted net assets	4,522,908.	27	4,674,278
	28	Temporarily restricted net assets	4,599,255.	28	4,226,505
2 │	29	Permanently restricted net assets	818,328.	29	818,328
-		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐			
5		and complete lines 30 through 34.			
;		Capital stock or trust principal, or current funds		30	
		Paid-in or capital surplus, or land, building, or equipment fund		31	
:		Retained earnings, endowment, accumulated income, or other funds		32	
۱ -	33	Total net assets or fund balances	9,940,491.	33	9,719,111
	34	Total liabilities and net assets/fund balances	11,416,034.	34	11,096,956

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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.

2018

Open to Public Inspection

Name of the organization Employer identification number RAILS TO TRAILS CONSERVANCY 52-1437006 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 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.) 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. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations g Provide the following information about the supported organization(s) (iv) is the organization listed (i) Name of supported (iii) Type of organization (ii) EIN (v) Amount of monetary (vi) Amount of other your governing document? organization (described on lines 1-10 support (see instructions) support (see instructions) Yes No above (see instructions)) Total

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				***		
Cal	endar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and					i	
	membership fees received. (Do not]					
	include any "unusual grants.")	8,598,477.	7,885,203.	9,189,136.	11,912,086.	9,679,993.	47,264,895.
2	Tax revenues levied for the organ-		•				
	ization's benefit and either paid to				l		
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge		· , <u>i , , </u>				
	Total. Add lines 1 through 3	8,598,477	7,885,203.	9,189,136.	11,912,086.	9,679,993.	47,264,895.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly		4 4	- 11 (1 to 1 to 1 to 1 to 1 to 1 to 1 to			
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						3,740,244.
	Public support. Subtract line 5 from line 4.						43,524,651.
	ction B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 4	8,598,477.	7,885,203.	9,189,136.	11,912,086.	9,679,993.	47,264,895.
8	Gross income from interest,	İ					
	dividends, payments received on						
	securities loans, rents, royalties,	122 112	175 /1/	142 027	120 062	100 272	770 700
	and income from similar sources	133,113.	175,414.	144,02/.	129,963.	199,273.	779,790.
9	Net income from unrelated business	i					
	activities, whether or not the						
40	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital	29,106.	78,868.	41,694.	69,966.	42,081.	261 715
44	assets (Explain in Part VI.) Total support. Add lines 7 through 10	23,100.	70,000.	41,094.	09,900.	42,001.	261,715.
	Gross receipts from related activities,				· . ·	12 2	$\frac{48,306,400}{512,023}$
	First five years. If the Form 990 is for	,	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	t faculty ou fifth to			, 312, 023.
	organization, check this box and stop	•					▶□
Sec	tion C. Computation of Publi	c Support Per	centage	***************************************			·····
	Public support percentage for 2018 (li			olumn (fl)		14	90.10 %
	Public support percentage from 2017					15	89.48 %
	33 1/3% support test - 2018. If the o						
	stop here. The organization qualifies a						
	33 1/3% support test - 2017. If the o						
	and stop here. The organization quali	fies as a publicly s	upported organiza	tion			▶□
	10% -facts-and-circumstances test						
	and if the organization meets the "fact						
	meets the "facts-and-circumstances"						
	10% -facts-and-circumstances test						
	more, and if the organization meets th						
	organization meets the "facts-and-circ						▶□
	Private foundation. If the organization						 ▶□
			· · · · · · · · · · · · · · · · · · ·			dule A (Form 990	

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	siow, piease com	ipiete Fait II.)				
Cal	endar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and				` '	.,,	(-)
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,		·	·			
	merchandise sold or services per-		i				
	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				i		
	or expended on its behalf			1			
5	The value of services or facilities			-		-	
,	furnished by a governmental unit to				ļ		
	the organization without charge	•				İ	
_	- ··· •		-	1		 	
	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons Amounts included on lines 2 and 3 received						
٨.	from other than disqualified persons that		l				
	exceed the greater of \$5,000 or 1% of the				İ		
	amount on line 13 for the year						
	Add lines 7a and 7b						•
	Public support. (Subtract line 7c from line 6.)		<u> </u>		<u> </u>		
	ction B. Total Support		T		т.		
	ndar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	Amounts from line 6						
ıua	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						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,			;			
	whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	-	"				
14	First five years. If the Form 990 is for t	he organization's	s first, second, thir	d, fourth, or fifth ta	x year as a section	n 501(c)(3) organiz	ation,
					***************************************		> □
	tion C. Computation of Public						
15	Public support percentage for 2018 (lin	ie 8, column (f), d	liviđed by line 13, e	column (f))	*******	15	%
	Public support percentage from 2017 S					16	%
	tion D. Computation of Invest						
	Investment income percentage for 201					17	%
	Investment income percentage from 20					18	%
19a	33 1/3% support tests - 2018. If the o	rganization did n	ot check the box o	on line 14, and line	15 is more than 3		7 is not
	more than 33 1/3%, check this box and	istop here. The	organization qualif	ies as a publicly s	upported organiza	tion	
	33 1/3% support tests - 2017. If the o						
	line 18 is not more than 33 1/3%, chec						
	Private foundation. If the organization						
	3 10-11-18					edule A (Form 990	

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.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		<u> </u>
3a		
- 54	1941.	
3b		
3с		
4a		
4b		
2.4		1
40		

5a		2.5.
5b		
5c		
6		
7	. A.	
8		
		/
9a		2.1
Ja		
9b		
9c		
10-		
10a	7 .	
10b		

	irt IV Supporting Organizations (continued)	13,00		age o
	(continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		1.00	1.00
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a	- "	*****
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations	<u> </u>		
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the		l .	
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	100		
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			4.5
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	4		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		<u> </u>
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		17:11	
	or management of the supporting organization was vested in the same persons that controlled or managed	\$		
	the supported organization(s).	1		<u> </u>
Sec	tion D. All Type III Supporting Organizations			г
	Diddle and interest to the section of the section o		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the		* .	. :
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	.*	<u> </u>
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	145		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
3	the organization maintained a close and continuous working relationship with the supported organization(s).	_ 2	51, 44	
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's	1, 6, 7		
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeafsee instructions	:).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see ins	structions).	
2	Activities Test. Answer (a) and (b) below.	ĺ	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of	1 11	14 T	2.57
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			14 A
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these		: :	
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.		3.7	
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			da di
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	ng Org	anizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	ng trust o	on Nov. 20, 1970 (explain in P	art VI.) See instructions. A
	other Type III non-functionally integrated supporting organizations must c	omplete	Sections A through E.	
Sec	tion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	**		
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
	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		14
6	Multiply line 5 by .035	6		
7	Recoveries 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 instructions).	ly integra	ated Type III supporting organ	nization (see

Schedule A (Form 990 or 990-EZ) 2018

Pa	rt V Type III Non-Functionally Integrated 50	9(a)(3) Supporting Org	anizations (continued)	
Sect	tion D - Distributions			Current Year
_1	Amounts paid to supported organizations to accomplish ex	empt purposes		
2	Amounts paid to perform activity that directly furthers exem			
	organizations, in excess of income from activity			
_3	Administrative expenses paid to accomplish exempt purpose	ses of supported organization	ns	
4	Amounts paid to acquire exempt-use assets			
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.			
8	Distributions to attentive supported organizations to which	the organization is responsiv	е	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
		(i)	(ii)	(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
	·		Pre-2018	Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2018 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
С	From 2015			
d	From 2016			
е	From 2017			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2018 distributable amount			
i	Carryover from 2013 not applied (see instructions)	. "		
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from 3f.	""		
4	Distributions for 2018 from Section D,			
	line 7:			
а	Applied to underdistributions of prior years			
b	Applied to 2018 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
<u>a</u>	Excess from 2014			
b	Excess from 2015			
	Excess from 2016			
d	Excess from 2017			
е	Excess from 2018			

Schedule A (Form 990 or 990-EZ) 2018

Schedule B

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

Department of the Treasury Internal Revenue Service

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

2018

Name of the organization **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 filing 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 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)(vi), 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) filing 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 (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing 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).

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Page 2 Name of organization Employer identification number RAILS TO TRAILS CONSERVANCY 52-1437006 Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 Person Payroll 200,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (d) (c) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 2 X Person Payroll 300,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) No. Name, address, and ZIP + 4 Total contributions Type of contribution 3 Person Payroll 500,000. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 4 Person Payroll 600,000. Noncash (Complete Part II for noncash contributions.) (a) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** 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 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
22452 11 09		- - - - \$	

Name of organization Employer identification number RAILS TO TRAILS CONSERVANCY 52-1437006 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 Part III 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 (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 (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.

2018

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 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

	x) (see separate instructions), then Section 501(c)(4) (5), or (6) ergenize				
	 Section 501(c)(4), (5), or (6) organization 	ations. Complete Part III.		En	ployer identification number
	_	TO TRAILS CONSERV	VANCY	-	52-1437006
Pa		ganization is exempt un		or is a section 527	
	Provide a description of the organi	-	<u> </u>		
	Political campaign activity expend	•	, •		· d·
	Volunteer hours for political campa				a
	art I-B Complete if the or				
	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 4726	O for this year?		Yes No
42	a Was a correction made?				Yes L No
ŀ	b If "Yes." describe in Part IV				
	art I-C Complete if the or				
1	Enter the amount directly expende	d by the filing organization for s	ection 527 exempt fund	ction activities	\$
2	Enter the amount of the filing organ	nization's funds contributed to d	other organizations for s	section 527	
	exempt function activities			>	\$
3	Total exempt function expenditure	s. Add lines 1 and 2. Enter here	and on Form 1120-POL	- 1	
	line 17b		***************************************	>	\$
4	Did the filing organization file Form	1120-POL for this year?	***************************************		Yes No
5					
	made payments. For each organiza				
	contributions received that were pr				rate 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	(e) Amount of political contributions received and
				funds. If none, enter -0	
			:		delivered to a separate political organization.
		İ			If none, enter -0
					<u> </u>
	W (15-				

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

Schedule C (Form 990 or 990-EZ) 2018

LHA

832041 11-08-18

Schedule C (Form 990 or 990-EZ) 2018 RAILS TO TRAILS CONSERVANCY 52-1437006 Page 2								
Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).								
	ation belongs to an a	ffiliated group (and list i	n Part IV each affiliated	d group member's pan	ne address FIN			
	are of excess lobbying		u.t.r ouo., u.matot	a group mombor o nam	10, 444,000, 2114,			
. —	= '	and "limited control" pr	ovisions apply.					
		<u> </u>		(a) Filing	(b) Affiliated group			
	its on Lobbying Exp iditures" means amo	enditures ounts paid or incurred	.)	organization's totals	totals			
1a Total lobbying expenditures to inf	luence public opinion	(grass roots lobbying)		98,384.				
b Total lobbying expenditures to inf				98,486.				
c Total lobbying expenditures (add				196,870.				
d Other exempt purpose expenditu				10,265,021.				
e Total exempt purpose expenditur				10,461,891.				
f Lobbying nontaxable amount. En				673,095.				
If the amount on line 1e, column (a)		bbying nontaxable am						
Not over \$500,000	''' 	f the amount on line 1e						
Over \$500,000 but not over \$1,00		000 plus 15% of the exc						
Over \$1,000,000 but not over \$1,		000 plus 10% of the exc						
Over \$1,500,000 but not over \$17		000 plus 5% of the exce						
Over \$17,000,000	\$1,000		355 OVEL \$1,500,000.					
Over \$17,000,000	j \$1,000	7,000.						
g Grassroots nontaxable amount (e	nter 25% of line 1fl			168,274.	9 .			
h Subtract line 1g from line 1a. If ze	•		***************************************	0.				
i Subtract line 1f from line 1c. If zer				ŏ.				
j If there is an amount other than ze			ation file Form 4700	<u> </u>	<u> </u>			
	_	· · ·		Γ				
reporting section 4911 tax for this					Yes No			
(Some organizations t	hat made a section		have to complete all	of the five columns b	elow.			
		rate instructions for li						
	Lobbying Expe	enditures During 4-Yes	ar Averaging Period	.				
Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total			
2a Lobbying nontaxable amount	592,110	611,619.	666,945.	673,095.	2,543,769.			
 b Lobbying ceiling amount (150% of line 2a, column(e)) 					3,815,654.			
			· ·	•	, ,			
c Total lobbying expenditures	132,772	210,622.	204,489.	196,870.	744,753.			
				,				
d Grassroots nontaxable amount	148,028	152,905.	166,736.	168,274.	635,943.			
e Grassroots ceiling amount					<u> </u>			

98,384.

953,915.

400,151.

111,572.

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

88,696.

101,499.

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)).

For	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	[(b)
of th	e lobbying activity.	Yes	No	Am	ount
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		-	100	
_	or referendum, through the use of:		:		
Ė	Volunteers?	<u> </u>			
		<u> </u>			
	Media advertisements? Mailings to members, legislators, or the public?		 		
	Publications, or published or broadcast statements?		 		
	Grants to other organizations for lobbying purposes?			ļ	
	Direct contact with legislators, their staffs, government officials, or a legislative body?			<u>. </u>	
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			- -	
i	*··		_		
i		:			
•	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912		<u> </u>		
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5). or se	ction	
	501(c)(6).		(-),		
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2	_	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
_	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 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 politic	al			
_	expenses for which the section 527(f) tax was paid).				
a	Current year		2a		
	Carryover from last year			'	
с 3	Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	• • • • • • • • • • • • • • • • • • • •	2c		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc		3		
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
	expenditure next year?	olitical			
5	Taxable amount of lobbying and political expenditures (see instructions)	• • • • • • • • • • • • • • • • • • • •	4		
Par	t IV Supplemental Information		5		
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	liet): Part II	Δ lines 1 s	and 2 (see	
	ctions); and Part II-B, line 1. Also, complete this part for any additional information.	nos, raren	74 111100 1 2	110 E (500	
	odding, and that it b, into 1.7 add, domptote this part for any additional information.				
					

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

RATIS TO TRATIS CONSERVANCY

Employer identification number

Þs	rt I Organizations Maintaining Donor Advise		52-143/006
17,0			Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) Bottor advised failed	(b) i citas and other accounts
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		
Ū	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a		
•	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		· —
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990, Part	IV line 7
1	Purpose(s) of conservation easements held by the organization		10, 110 7.
•	Preservation of land for public use (e.g., recreation or e		ally important land area
	Protection of natural habitat	Preservation of a certified	
	Preservation of open space	— Treservation of a certified	matoric structure
2	Complete lines 2a through 2d if the organization held a qualit	fied conservation contribution in the form of a	conservation essement on the last
_	day of the tax year.	and defice value contribution in the form of a	Held at the End of the Tax Year
а	Total number of conservation easements		
b	-		2b
c	Number of conservation easements on a certified historic str	ructure included in (a)	2c
d	Number of conservation easements included in (c) acquired		
-	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rel		
	year ▶	sassa, skiingaishea, en terminatea by the org	ganzation daining the tax
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the per		
	violations, and enforcement of the conservation easements it		Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		
	>	3	
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation	easements during the year
	▶ \$, , , , , , , , , , , , , , , , , , , ,	
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h)(4	·)(B)(i)
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense sta	tement, and balance sheet, and
	include, if applicable, the text of the footnote to the organizat		
	conservation easements.		
Pai	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or Othe	r Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to report in its revenue statement	and balance sheet works of art,
	historical treasures, or other similar assets held for public exh	nibition, education, or research in furtherance	of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descril		
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to report in its revenue statement and	f balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:	•	
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical trea		
	the following amounts required to be reported under SFAS 11		••
а	Revenue included on Form 990, Part VIII, line 1		▶ \$
b	Assets included in Form 990, Part X		> \$
	For Paperwork Reduction Act Notice, see the Instructions		Schedule D (Form 990) 2018

832051 10-29-18

_		O TRAILS C					37006	
Pa	rt III Organizations Maintaining (Collections of A	rt, Historical Tr	easures, or Oth	ner Simila	ar Asse	ts(continu	red)
3	Using the organization's acquisition, access	ion, and other record	ls, check any of the	following that are a	significant (use of its	collection	items
	(check all that apply):							
а	Public exhibition	d	Loan or exc	hange programs				
þ		е	U Other					
C	3							
4	Provide a description of the organization's c					se in Parl	t XIII.	
5	During the year, did the organization solicit of					_	_	
-	to be sold to raise funds rather than to be m						Yes	L No
Pa	rt IV Escrow and Custodial Arran	gements. Comple	ete if the organization	n answered "Yes" o	n Form 990	, Part IV,	line 9, or	
	reported an amount on Form 990, Pa							
1a	Is the organization an agent, trustee, custod					_	7	
	on Form 990, Part X?						⊻ Yes	└─ No
b	If "Yes," explain the arrangement in Part XIII	and complete the fol	lowing table:					
							Amount	
c	Beginning balance			• • • • • • • • • • • • • • • • • • • •	1c			
	Additions during the year				1d			
e	V - 7							
7	Ending balance		nd (1f		T.Z	1 1
	Did the organization include an amount on F						J Yes	No
	If "Yes," explain the arrangement in Part XIII. To V Endowment Funds. Complete in							<u> </u>
	Ziradi Complete			(c) Two years back		pare back	(e) Four y	nare back
1a	Beginning of year balance	(a) Current year 1,637,162.	(b) Prior year 1,375,675.	1,260,272.		61 091.		.98,472.
b	Contributions	2,007,202.	163,250.	1,200,272.		20 000.		., 4, 2.
C	Net investment earnings, gains, and losses	47.395.	98,236.	115,403.		79 181		37,381.
d	Grants or scholarships	,	50,200.		<u>'</u>	-,101		37,301.
-	Other expenditures for facilities		u .					
·	and programs	67,847.						
f	Administrative expenses	,				+		
g g	End of year balance	1,616,710.	1,637,161.	1,375,675.	1 26	50,272.	1.1	61,091.
2	Provide the estimated percentage of the curr				_,_			
a	Board designated or quasi-endowment	49.39	%	y) ricia as.				
b	Permanent endowment ▶ 50.61	%	_,,					
c	Temporarily restricted endowment	. 00 %						
	The percentages on lines 2a, 2b, and 2c sho							
За	Are there endowment funds not in the posse	•	tion that are held a	nd administered for	the organiza	ation		
	by:						Y	es No
	(i) unrelated organizations						3a(i)	X
							3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as require	ed on Schedule R?	***************************************				
4	Describe in Part XIII the intended uses of the							
Par	t VI Land, Buildings, and Equipm							
	Complete if the organization answered	d "Yes" on Form 990,	Part IV, line 11a. S	ee Form 990, Part X	, line 10.			
	Description of property	(a) Cost or oti			ccumulated		(d) Book v	/alue
		basis (investm	ent) basis (preciation			
1a	Land			of the				
	Buildings							
	Leasehold improvements				470,15			,676.
ď	Equipment				240,79		30	,173.
е	Other				323,13	1.		393.
Γotal	Add lines 1a through 1e. (Column (d) must ed	qual Form 990, Part X	(, column (B), line 1	0c.)		>	164	242.

Schedule D (Form 990) 2018

Dort VIII	Invantments	- Other Securitie
Part VIII	: inivesiments	- umer securitie

Complete if the organization answered "Yes" of	on Form 990, Part IV,	line 11b. See Form 990	Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value			nd-of-year market value
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other			***	
(A)				
(B)				
(C)				· .
(D)				<u> </u>
(E)	,	-	 	
(F)			<u> </u>	
(G)		-		
(H)				
			Fr	
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ► Part VIII Investments - Program Related.			***	
Complete if the organization answered "Yes" o				
	(b) Book value	(c) Method of v	aluation: Cost or er	d-of-year market value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				· · · · · · · · · · · · · · · · · · ·
(8)				
(9)				
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)				***
Part IX Other Assets.				
Complete if the organization answered "Yes" o	n Form 990, Part IV, li	ne 11d. See Form 990,	Part X. line 15.	
	escription	<u> </u>		(b) Book value
(1)			····	, , , , , , , , , , , , , , , , , , , ,
(2)				
(3)				
(4)				
(5)			·-	<u> </u>
(6)				"
(7)				
(8)				
(9)				
Dord V Other Liebilities	15.)		>	
Part X Other Liabilities.			•	
Part X Other Liabilities. Complete if the organization answered "Yes" or		ne 11e or 11f. See Forn	n 990, Part X, line 29	5.
Part X Other Liabilities. Complete if the organization answered "Yes" or			n 990, Part X, line 25	5.
Complete if the organization answered "Yes" of a Description of liability (1) Federal income taxes		ne 11e or 11f. See Forn (b) Book value	n 990, Part X, line 2!	5.
Complete if the organization answered "Yes" of (a) Description of liability (1) Federal income taxes (2) DEFERRED RENT		ne 11e or 11f. See Form (b) Book value 233,599.	n 990, Part X, line 2!	
Complete if the organization answered "Yes" of a Description of liability (1) Federal income taxes		ne 11e or 11f. See Forn (b) Book value	n 990, Part X, line 29	5.
Complete if the organization answered "Yes" of a Description of liability (1) Federal income taxes (2) DEFERRED RENT		ne 11e or 11f. See Form (b) Book value 233,599.	n 990, Part X, line 29	5.
Complete if the organization answered "Yes" of a Description of liability (1) Federal income taxes (2) DEFERRED RENT (3) LEASE INCENTIVE LIABILITY		ne 11e or 11f. See Form (b) Book value 233,599.	n 990, Part X, line 29	5.
Complete if the organization answered "Yes" of a Description of liability (1) Federal income taxes (2) DEFERRED RENT (3) LEASE INCENTIVE LIABILITY (4)		ne 11e or 11f. See Form (b) Book value 233,599.	n 990, Part X, line 29	5.
Complete if the organization answered "Yes" of a Description of liability (1) Federal income taxes (2) DEFERRED RENT (3) LEASE INCENTIVE LIABILITY (4) (5) (6)		ne 11e or 11f. See Form (b) Book value 233,599.	n 990, Part X, line 29	5.
Complete if the organization answered "Yes" of a Description of liability (1) Federal income taxes (2) DEFERRED RENT (3) LEASE INCENTIVE LIABILITY (4) (5) (6) (7)		ne 11e or 11f. See Form (b) Book value 233,599.	■ 990, Part X, line 2	5.
Complete if the organization answered "Yes" of a Description of liability (1) Federal income taxes (2) DEFERRED RENT (3) LEASE INCENTIVE LIABILITY (4) (5) (6) (7) (8)		ne 11e or 11f. See Form (b) Book value 233,599.	n 990, Part X, line 2!	5.
Complete if the organization answered "Yes" of a Description of liability (1) Federal income taxes (2) DEFERRED RENT (3) LEASE INCENTIVE LIABILITY (4) (5) (6) (7)	n Form 990, Part IV, Ii	ne 11e or 11f. See Form (b) Book value 233,599.	n 990, Part X, line 2!	5.

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 Schedule D (Form 990) 2018

Pa	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	nts Wil	n Hevenue per H	(etur	n.
1	Total revenue, gains, and other support per audited financial statements			1	11,057,178.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		***************************************	-	11,031,100
-	Net unrealized gains (losses) on investments	2a	-7,347.	:	
b	Donated services and use of facilities	2b	827,660.	1	
	Recoveries of prior year grants	2c	027,0001		
٦	Other (Describe in Part XIII.)	2d	13,874.	-	
			· · · · · · · · · · · · · · · · · · ·		834,187.
3	•		•••••	2e 3	10,222,991.
4	Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			-3	10,222,331.
-	Investment expenses not included on Form 990, Part VIII, line 7b	4a	24,867.		
			24,007.		
	Other (Describe in Part XIII.) Add lines 4a and 4b				24,867.
_	Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			4c	10,247,858.
5 Par	t XII Reconciliation of Expenses per Audited Financial Stateme	ante Wi	th Evnenses per	_	
- 4	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	711LO 44 1	ui Expenses per	neu	41 J I.
1	Total expenses and losses per audited financial statements			1	11,278,558.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	*************		<u> </u>	
а	Donated services and use of facilities	2a	827,660.		
b	Prior year adjustments		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
c	Other losses	2c			
d	Other (Describe in Part XIII.)		13,874.		
-	Add lines 2a through 2d			2e	841,534.
3	Subtract line 2e from line 1			3	10,437,024.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	************		-	10,107,021.
	Investment expenses not included on Form 990, Part VIII, line 7b	4a	24,867.		
	Other (Describe in Part XIII.)	-	21/00/1		
	A A CITY AND A CITY OF THE CIT			40	24,867.
	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			4c 5	10,461,891.
	t XIII Supplemental Information.			3	10,401,051.
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part I 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any addit		•	1; Part	X, line 2; Part XI,
	T V, LINE 4:				
T.HE	CONSERVANCY'S ENDOWMENT CONSISTS OF MULTI	PLE	OONOR-RESTR	ICT	ED FUNDS TO
GEN	ERATE A PERMANENT SOURCE OF INCOME FOR RTC	'S PI	ROGRAMS.		
	ING THE YEAR ENDED SEPTEMBER 30, 1997, RTC	r rem	ADITOUED MU	т т	ANCDON
	ES BURWELL ENDOWMENT FUND ("FUND 1"). THIS				
	T OF STOCK VALUED AT \$334,645 AT THE DATE				
	ITIONAL \$44,433 IN ACCUMULATED INVESTMENT	•			
	SIDERED PERMANENTLY RESTRICTED. THE DONOR				
	INVESTED IN PERPETUITY; HOWEVER, 30 YEARS FUND WILL REVERT TO RTC'S GENERAL ENDOWME		IUE DALE O	r 11	ne Giff,
PHP					

AN ADDITIONAL \$26,000 OF PERMANENTLY RESTRICTED CONTRIBUTIONS WERE ADDED TO FUND 1 IN THE FISCAL YEARS 2011 AND 2016. IN ACCORDANCE WITH THE DONOR'S INSTRUCTIONS, EARNINGS ON FUND 1 ARE AVAILABLE TO SUPPORT RTC'S GENERAL OPERATIONS.

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. 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 THE INVESTMENT EARNINGS ON FUND 2 BE CONSIDERED UNRESTRICTED AND AVAILABLE TO SUPPORT GENERAL OPERATIONS.

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 3 ARE AVAILABLE TO SUPPORT RTC'S GENERAL OPERATIONS.

PART X, LINE 2:

FOR THE YEARS ENDED SEPTEMBER 30, 2019 AND 2018, THE CONSERVANCY HAS DOCUMENTED ITS CONSIDERATION OF FASB ASC 740-10, INCOME TAXES, THAT PROVIDES GUIDANCE FOR REPORTING UNCERTAINTY IN INCOME TAXES AND HAS DETERMINED THAT NO MATERIAL UNCERTAIN TAX POSITIONS QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

Schedule D (Form 990) 2018

SCHEDULE G

(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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Name of the organization						• -	ntification number
	O TRAILS CONSERVAN					52-1437	
Fundraising Activities required to complete this pa	 Complete if the organization answirt. 	ered "\	∕es" o	n Form 990, Part IV,	line 1	7. Form 990-E2	Z filers are not
Indicate whether the organization rai X Mail solicitations X Internet and email solicitation C X Phone solicitations d X In-person solicitations 2 a Did the organization have a written.	e X Solicita f Solicita g Special	tion of tion of fundra	non-g gover aising	overnment grants nment grants events			
key employees listed in Form 990, F b If "Yes," list the 10 highest paid indi compensated at least \$5,000 by the						X Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fund have o or cor contrib	ustody	(iv) Gross receipts from activity	to (o	Amount paid r retained by) undraiser ed in col. (i)	(vi) Amount paid to (or retained by) organization
MKDM - 301 EAST MARKET	DIRECT MAIL & EMAIL	Yes	No				-
STREET, CHARLOTTESVILLE, VA	CONSULTING		Х	2,751,891.		100,200.	2,651,691.
							
							_
Total			•	2,751,891.		100,200.	2,651,691.
3 List all states in which the organization or licensing.	n is registered or licensed to solicit o	contrib	utions	or has been notified	it is e		gistration
AL,AK,AZ,AR,CA,CO,CT, MT,NE,NH,NJ,NM,NY,NC,	DE,DC,FL,GA,HI,ID, ND,OH,OK,OR,PA,RI,	IL, SC,	IN, SD,	KS,KY,LA,M TN,TX,UT,V	E,M T,V	D,MA,MI A,WA,WV	,MN,MS,MO ,WI,WY
-							
							

832081 10-03-18

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

SEE PART IV FOR CONTINUATIONS

Schedule G (Form 990 or 990-EZ) 2018

		of fundraising event contributions and gr	(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through
ō			(event type)	(event type)	(total number)	col. (c))
Revenue	١.	Ownersiate				
Be	1	Gross receipts				
	2	Less: Contributions				
	ĺ				-7	
	3	Gross income (line 1 minus line 2)		1		
	4	Cash prizes				-
	5	Noncash prizes				
nses						
.xbe	6	Rent/facility costs				
Direct Expenses	7	Food and beverages				
_	8	Entertainment		ρ		
	9	Other direct expenses				
	10	- · · · · · · · · · · · · · · · · · · ·				
Ps	11 		ine 3, column (d)	n 990 Part IV line 19 or	roported more than	<u> </u>
<u>```</u>		\$15,000 on Form 990-EZ, line 6a.	answered les on for	11 950, Fait IV, line 19, 01 1	reported more trian	
<u> </u>			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(L) =go	bingo/progressive bingo	(6) Caror garring	col. (a) through col. (c))
Ŗ	1	Gross revenue				
	•	alcos tevende	.			
es	2	Cash prizes				<u> </u>
ens	_					
Exp	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
D						
	5	Other direct expenses				
	6	Volunteer labor	Yes % No	Yes% No	Yes % No	
	7	Direct expense summary. Add lines 2 through	ı 5 in column (d)		>	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
						<u> </u>
		er the state(s) in which the organization condu		****		·
		ne organization licensed to conduct gaming ac		states?	***************************************	. L Yes L No
Ų	11 1	No," explain:		·		·
				· · · · · · · · · · · · · · · · · · ·		
		re any of the organization's gaming licenses re	voked, suspended, or to	erminated during the tax y	/ear?	Yes No
þ	If "Y	/es," explain:	<u>.</u> .			
	_					
3208	_					rm 990 or 990-EZ) 2018

	nedule G (Form 990 or 990-EZ) 2018 RAILS TO TRAILS CONSERVANCY 52-1437006 Page
11	Does the organization conduct gaming activities with nonmembers?
	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?
13	Indicate the percentage of gaming activity conducted in:
	The organization's facility
	An outside facility 13b
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?
b	If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount
	of gaming revenue retained by the third party >\$
	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:
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to
	retain the state gaming license?
b:	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the
	organization's own exempt activities during the tax year > \$
Par	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10t
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.
SCE	HEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:
<u>(I)</u>	NAME OF FUNDRAISER: MKDM
(I)	ADDRESS OF FUNDRAISER:
301	EAST MARKET STREET, CHARLOTTESVILLE, VA 22902
32083	Schedule G (Form 990 or 990-EZ) 20
	2.6

hedule G (Form 990 or 990-EZ) RAILS TO TRAILS CONSERVANCY	52-1437006 _{Pa}
art IV Supplemental Information (continued)	
·	-

	•
	•
	-
	
	-

SCHEDULE 1 (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Open to Public OMB No. 1545-0047

> Go to www.irs.gov/Form990 for the latest information. ▶ Attach to Form 990.

CONSERVANCY

RAILS TO TRAILS

Inspection

Employer identification number

52-1437006

≗ (h) Purpose of grant or assistance CAPACITY BUILDING CAPACITY BUILDING PRAIL DEVELOPMENT TRAIL DEVELOPMENT TRAIL DEVELOPMENT TRAIL DEVELOPMENT X Yes Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection (g) Description of noncash assistance (f) Method of valuation (book, FMV, appraisal, other) 0 ö ö ٥. Ö Ö (e) Amount of assistance non-cash Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (d) Amount of cash grant 27,000 8,000 10,000 10,000, 15,000, 70,501 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section (if applicable) GOVERNMENT GOVERNMENT 501(C)(3) 501(C)(3) 501(C)(3) OTHER 42-0921779 25-1660116 45-2556898 91-2165219 74-6000422 General Information on Grants and Assistance 47-2080864 (p) EIN criteria used to award the grants or assistance? 1 (a) Name and address of organization Ч 3000 BRIDGE AVENUE, SUITE ALLEGHENY TRAIL ALLIANCE or government 402 W CHELTEN AVE, #1B PHILADELPHIA, PA 19144 CASCADE BICYCYLE CLUB BROWNSVILLE, TX 78520 CLEVELAND, OH 44113 7787 62ND AVENUE NE CITY OF BROWNSVILLE 518 HARTFORD AVENUE HOMESTEAD, PA 15120 APIARY STUDIO, LLC FARRAGUT, IA 51639 SEATTLE, WA 98115 CITY OF FARRAGUT BIKE CLEVELAND PO BOX 228 PO BOX 911 Part N

Schedule I (Form 990) (2018)

V	,
	١
	١
<u>-</u>	
~	1
∀	1
_	1
ī	
3	3
Ĺ	

Page 1

RAILS TO TRAILS CONSERVANCY	its and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)
RAILS	Grants and C
Schedule (Form 990)	Part II Continuation of

CITY OF UNION POINT		ır applicable	cash graffi	non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
69	58-0876688	GOVERNMENT	15,000.	0			TRAIL DEVELOPMENT
COWBOY TRAIL WEST, INC. 6502 210 LANE GORDON, NE 69343	90-0817910	501(C)(3)	35,000.	o			TRAIL DEVELOPMENT
FRIENDS OF THE BOURNE RAIL TRAIL PO BOX 3092 POCASSET, MA 02559	81-1535199	501(C)(3)	15,000.	.0			TRAIL DEVELOPMENT
FUSION PARTMERSHIPS, INC. 1601 GUILDFOR AVENUE #2 SOUTH BALTIMORE, MD 21202	52-2148413	501(C)(3)	*000′9	0			CAPACITY BUILDING
	81-2011073	OTHER	5,667.	0			CONFERENCE SCHOLOARSHIPS
S OF RPRISES (HACE) ENUE - 40	23-2142317	501(C)(3)	14,500.	o°			CAPACITY BUILDING
MIDTOWN GREENWAY COALITION 2834 10TH AVE S, GREENWAY LEVE, SUI MINNEAPOLLS, MN 55407	41-1825584	501(C)(3)	10,000.	0			TRAIL DEVELOPMENT
MOUNTAIN HERITAGE, INC. PO BOX 1259 ST. PAUL, VA 24283	31-1689961	501(C)(3)	25,000.	0			TRAIL DEVELOPMENT
NORTHWEST NEBRASKA TRAILS ASSOCIATION - 201 E THIRD STREET - CHADRON, NE 69337	91-1839312	501(C)(3)	30,000	.0			FRAIL DEVELOPMENT

S	
\subset	
\subset	
-	
~	
4	
_	
1	
2	
ic	

Page 1

Schedule | (Form 990) RAILS TO TRAILS CONSERVANCY

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

Service of the control of the contro				mited States (SCI)	dule I (rorm 990), Par	t II.)	
(a) Name and address of organization or government	Niii (6)	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USDA FOREST SERVICE PO BOX 6200-09 PORTLAND, OR 97228-6200	72-0564834	GOVERNMENT	27,500.	•0			FRAIL DEVELOPMENT
WASHINGTON STATE PARKS AND RECREATION COMMISSION - PO BOX 42650 - OLYMPIA, WA 98504-2650	91-6001109	GOVERNMENT	.002,78	0			TRAIL DEVELOPMENT
							Schedule I (Form 990)

40

52-1437006

Schedule | (Form 990) (2018) RAILS TO TRAILS CONSERVANCY

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

1	-				
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
		10 10 10 10 10 10 10 10 10 10 10 10 10 1			
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	uired in Part I, lin	e 2; Part III, column	(b); and any other a	dditional information.	
PART I, LINE 2:					
RTC PROVIDES GRANTS TO TRAIL ORGANI	IZATIONS	OR MUNICI	ZATIONS OR MUNICIPALITIES WHO NEED	HO NEED TO	
MAKE PERMANENT IMPROVEMENTS TO THEL	IR TRAIL	S. IMPROVE	MENTS COMP	R TRAILS. IMPROVEMENTS COMPLETED THROUGH	
THE PROGRAM REPRESENT VALUE TO THE	TRAIL EITHER	BY	INCREASING LENGTH OR	LENGTH OR BY	
NEW CONSTRUCTION THAT MAKES THE TR	TRAIL MORE	USABLE.	GRANTEES ARE	E INDENTIFIED	
BY RTC AND ARE INVITED TO SUBMIT A	PROPOSAL.	EACH	PROPOSAL IS	EVALUATED	
BASED ON THE GUIDELINES OF THE GRAN	INT PROGRAM	AM AND RTC	DETERMINES	S AWARD	
RECIPIENTS. A FINAL REPORT IS REQUI	IRED FROM		EACH RECIPIENT ORGANIZATION.	ANIZATION.	

SCHEDULE J (Form 990)

Department of the Treasury

Part I

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.

► 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

Questions Regarding Compensation

Employer identification number 52-1437006

			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,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use	• √		100
	Travel for companions Payments for business use of personal residence	æ ∰		
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, cher	n Sisi		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or	1.00		
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1		
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
			737	1.0
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.	1.5	Silvaria Silvaria	
	X Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	X Approval by the board or compensation committee	tee	Page 1	
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing	1 4.4 1 4 - 2.44	L (AZZ)	
	organization or a related organization:		11 5 1973 177 - 19	
а	Receive a severance payment or change-of-control payment?	4a	'	Х
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?			X
¢	Participate in, or receive payment from, an equity-based compensation arrangement?			X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.	8.344	d(1)	× 137.7
				기가 기간되는
	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, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.		2,12841a 21,2823	
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation		g) (C-6	
	contingent on the net earnings of:			Provide A
а	The organization?			X
	Any related organization?			X
	If "Yes" on line 6a or 6b, describe in Part III.	(A) (A)		17 : 1 17 : 1
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	interference		BE
	not described on lines 5 and 6? If "Yes," describe in Part III	7	X	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	\$25, A	363	. 344
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		b
		chedule J (Form	1 990)	2018

832111 10-26-18

Schedule J (Form 990) 2018 R

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, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

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) amounts for that individual.

		(B) Brookdown of	M 9 000 40/ bac 6 W			Г		
			W-z ariu/or russ-misc compensation	oc compensation	(C) Hetirement and	aple	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	Serients	(a)-(a)(a)	in column (B) reported as deferred on prior Form 990
(1) KEITH LAUGHLIN	€	239	10,000.	0	14,213.	18,962.	282,374.	0
띯ㅣ	Ξ			0	0	0	0	0
(2) CYNTHIA DICKERSON	(:)	166,05	0	0	10,099.	19,108.	195,266	0
P4 1	(ii)		0	0	0	0		0
	Ξ	152,28	0	0	9,692.	18,114.	180,087.	0
OR VP OF POLICY	€			0	0	٠I	0	0
(4) ELIZABETH THORSTENSEN	(i)	156,95	0	0	9,612.	7,664.	174,23	
D24	Ξ		0	0	0			0
(5) BRANDI HORTON	ε	136,834.		0	9,038.	17,87	163,746.	0
COMMUNICATIONS	⊞			0	0		0	0
(6) MARY O'CONNOR	(E)	128,42		0	8,139.	14,96	151,521.	0
VP OF DVLPT/PRINRSP (UNTIL 10/2018)	Ξ	0	0.	0	0	0	0	0
	Ξ							
	≘							
	Ξ							
	▣							
	=							
	≘							
	€							
	Ξ							
	Ξ							
	▤							
	≘							
	≘							
	Ξ							
	≘							
	Ξ							
	≘							
	€							
	▣							
	≘							
	9							

Schedule J (Form 990) 2018

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.	, LINE 7:	THE YEAR, THE ORGANIZATION PROVIDED KEITH LAUGHLIN WITH \$10,000 IN	BONUS COMPENSATION.									Sobodist HEams Office
Provide the informatic	PART I, LIN	DURING THE YEAR,	BONUS COMPE	:					i			

832113 10-26-18

SCHEDULE Q

(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.

2018
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

RAILS TO TRAILS CONSERVANCY

Employer identification number 52-1437006

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

HEALTHIER PLACES FOR HEALTHIER PEOPLE. FOUNDED IN 1985, RTC IS LOCATED

IN WASHINGTON, DC AND HAS FOUR REGIONAL OFFICES IN PENNSYLVANIA, OHIO,

CALIFORNIA, FLORIDA, WISCONSIN AND TEXAS. 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 NINE 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, DC, MIAMI AND SOUTH

TEXAS. IN THE SPRING OF 2019 RTC LAUNCHED ITS NINTH AND MOST AMBITIOUS

PROJECT, THE GREAT AMERICAN RAIL TRAIL - A 3700 MILE COAST TO COAST

TRAIL FROM WASHINGTON DC TO WASHINGTON STATE.

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 CONSISTENT

INFORMATION AND TRAIL INFORMATION, CREATING A CENTRALIZED RESOURCE THAT

ASSISTS THE ORGANIZATION IN IDENTIFYING OPPORTUNITIES FOR LINKING TRAIL

SYSTEMS AND CATALYZING SUPPORT OF TRAIL PROJECTS. OTHER ACTIVITIES

INCLUDE DELIVERY OF MEMBER BENEFIT AND SERVICE PROGRAMS.

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

Schedule O (Form 990 or 990-EZ) (2018)

832211 10-10-18

Employer identification number 52-1437006

EXPENSES \$ 399,936. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

RESEARCH - RTC'S RESEARCH PROGRAM FOCUSES ON CREATING INNOVATIVE TOOLS

THAT EMPOWER COMMUNITIES TO ADVANCE TRAIL SYSTEMS IN THEIR CITIES,

TOWNS AND REGIONS, WHILE ALSO MONITORING THE BENEFITS TRAILS BRING TO

COMMUNITIES AND THE IMPLEMENTATION OF STATE AND FEDERAL PROGRAMS THAT

PROVIDE THE FUNDING AND RESOURCES TO BUILD AND MAINTAIN TRAILS.

EXPENSES \$ 269,961. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FINANCE COMMITTEE OF RTC REVIEWS THE DRAFT OF THE 990 BEFORE

PRESENTATION TO THE FULL BOARD. EACH MEMBER OF THE BOARD OF DIRECTORS

RECEIVES A COPY OF THE 990 PRIOR TO THE SUBMISSION OF THE FORM TO THE IRS.

FOR THE YEAR ENDED SEPTEMBER 30, 2019, THE AUDITORS PRESENTED THE DRAFT 990

AT A BOARD OF DIRECTORS MEETING IN FEBRUARY. RTC WILL NOT FILE THE FINAL

990 UNTIL THE BOARD FORMALLY APPROVES SUCH FILING AT A SUBSEQUENT MEETING.

FORM 990, PART VI, SECTION B, LINE 12C:

RTC HAS A CONFLICT OF INTEREST POLICY AND FORM THAT EACH BOARD MEMBER IS
REQUIRED TO COMPLETE ANNUALLY. TO IMPLEMENT THIS POLICY, BOARD MEMBERS
SUBMIT ANNUAL REPORTS ON THE 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:

Employer identification number 52-1437006

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. THE LAST COMPENSATION REVIEW TOOK PLACE IN
JANUARY 2019.

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, AR, CA, FL, GA, HI, IL, KS, KY, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, OR, PA, RI, SC, TN, UT

VA, WV, WI

FORM 990, PART VI, SECTION C, LINE 19:

RTC'S GOVERNING DOCUMENTS, INCLUDING THE ANNUAL REPORT, FORM 990, AUDITED FINANCIAL STATEMENTS, CONFLICT OF INTEREST POLICY, AND FORM 1023, ARE AVAILABLE TO THE PUBLIC UPON REQUEST. COPIES WILL BE PROVIDED IMMEDIATELY IN THE CASE OF IN-PERSON REQUESTS. REQUESTS RECEIVED IN WRITING, BY PHONE, FAX OR EMAIL WILL BE HONORED BY DIRECTING REQUESTORS TO RTC'S WEBSITE.

832212 10-10-18

Name of the organization RAILS TO TRAILS CONSERVANCY	Employer identification number 52-1437006
THREE YEARS OF 990S, AUDITED FINANCIAL STATEMENTS, AND A	NNUAL REPORTS CAN
BE FOUND ON RTC'S WEBSITE IN ADOBE FORMAT. RTC RESERVES	THE RIGHT TO CHARGE
A REASONABLE COPYING FEE PLUS ACTUAL POSTAGE FOR MULTIPLE	E COPIES REQUESTED
FROM THE SAME INDIVIDUAL OR RELATED GROUP OF INDIVIDUALS	•
FORM 990, PART IX, LINE 11G, OTHER FEES:	
LIST MANAGEMENT SERVICES:	
PROGRAM SERVICE EXPENSES	71,227.
MANAGEMENT AND GENERAL EXPENSES	11,882.
FUNDRAISING EXPENSES	118,125.
TOTAL EXPENSES	201,234.
CAGING FEES:	
PROGRAM SERVICE EXPENSES	32,627.
MANAGEMENT AND GENERAL EXPENSES	0.
FUNDRAISING EXPENSES	0.
TOTAL EXPENSES	32,627.
CONSULTING SERVICES:	,
PROGRAM SERVICE EXPENSES	796,232.
MANAGEMENT AND GENERAL EXPENSES	184,606.
FUNDRAISING EXPENSES	34,542.
TOTAL EXPENSES	1,015,380.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	1,249,241.