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Form	990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

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

Open to Public Inspection

<u>A</u>	For the	2012 cale	nder year, or tan year beginning	January 1	, 2012, and er	rding	Decem	ber 31	, 20 12			
8	Check if	f applicable:	C Name of organization West Virgin	nia Rivers Coalition, Inc.) Employ∈	er identification n	nupea		
	Address	change	Doing Business As						52-1736621			
	Name c	hange	Number and street (or P.O. box if m	all is not delivered to street add	iress) Roor	n/suite		Telephon	ne number			
	Initial re	tum	329 Davis Avenue			7			304-637-7201			
	Termina	ted	City, town or post office, state, and	ZIP code								
	Amende	ed return	Elkins, West Virginia 26241				∥ (Gross re	ceipts \$	142,898		
			F Name and address of principal office	er: Tumer Sharo		M			for affiliates? Yes			
_			PO Box 4751,Parkersburg, WV	•			_		cluded? Yes			
_	Tay-eye	mpt status:	✓ 501(c)(3) □ 501(c) (F-1	7(a)(1) or 52				list. (see instructio			
<u>-</u>	Website	 	w.wvrivers.org	7 1 (0.1001 (110.)) [23 434	<u> </u>				number ▷	•		
K			Corporation Trust Associa	ation ☐ Other ▷	L Year of fo		···		of legal domicile:	108/		
	ant I	Summ		THOM COURT >		mattori.	1991	IW State	or legal dorniche.	₩V_		
	1		escribe the organization's miss	cion or most significant a	ctivities: O-							
	'											
8	}		WVRC serves a member base o		~		nizations	s, issues	semiannuai ne	wsierter,		
Activides & Governance	İ	provides	capacity development to waters	ned organizations and pu	Dic education	:						
9		OL - L 11	**						***************************************			
ğ	2		is box Dif the organization		-				its net assets.			
æ	3		of voting members of the gove		-			3		9		
80	4		of independent voting member					4		9		
Z.	5		mber of individuals employed i					5		6		
ទ្ធ	6	Total nur	mber of volunteers (estimate if	necessary) . 🗼 . 💘		i -		6		25		
-	7a	Total unr	elated business revenue from	Part VIII, column (C), line	.ـــــــــــــــــــــــــــــــــــــ			7a		0		
	ල්	Net unre	lated business taxable income	from Form 990-T, line 3	4	Č.		7b		0		
				18 MAY C	a Sma		Prior Yea	r	Current Ye	er		
ø	8	Contribu	tions and grants (Part VIII, line		159,236		134,798					
Revenue	8		service revenue (Part VIII, line		· · · · · · · · · · · · · · · · · ·			980				
946	10		ent income (Part VIII, column (A					1,307 S				
œ	1818		venue (Part VIII, column (A), line	•				905		55 30,91		
	12		enue—add lines 8 through 11 (r					161,552				
	13		nd similar amounts paid (Part I					0		138,924 0		
	14		paid to or for members (Part I)			· · · · · · · · · · · · · · · · · · ·		0	· · · · · · · · · · · · · · · · · · ·			
	15		other compensation, employee							0		
Exponses]							112,454		107,117		
ē	16a		onal fundraising fees (Part IX, o					0		0		
哥	_b		draising expenses (Part IX, col		43,939	? 			 			
	17		penses (Part IX, column (A), lin					39,416		65,499		
	18		penses. Add lines 13–17 (must), line 25) .			151,870		172,616		
	19	Revenue	less expenses. Subtract line 1	8 from line 12	<u></u>			9,682		(33,692)		
Not Assets or Fund Batancos						Beginn	ing of Cum	Cast luca	End of Yo	£7		
83	20	Total ass	ets (Part X, line 16)					147,921		121,951		
돌 전문	21	Total liab	ilities (Part X, line 26)					40,632		48,362		
		Net asse	ts or fund balances. Subtract I	ine 21 from line 20 .			•	107,289		73,599		
Pe	00 Fra	Signa	Muro Block									
Un	der pena	ilties of perju	ry, I becare that Lhave examined this	retum, including accompanying	schedules and s	tatements,	and to the	best of m	ny knowledge and	belief, it is		
tru	e, correc	t, and comp	ete. Declaration of preparer (other than	officer) is based on all informati	tion of which prep	parer has a	ny knowlet	ige.				
			I WAT HOW				15	10 201	3			
Sig)ก	Sign	ature of officer				Date					
Жø		IN K	PISTY KASSERMAN, C	HAIR								
	Type or print name and title											
_	* _n	<u> </u>	pe preparer's name	Preparer's signature		Date			PTIN			
Pa		1	• •	, , , , , , , , , , , , , , , , , , , ,		1		Check L	_] # [
Prepairer												
Us	Use Only Firm's name > Firm's EIN >											
A // -	v the IF		ddress b	chown chave? / i	uctions)		Phone	e no.				
_			s this return with the preparer					<u> </u>		3 No 380 (2012)		
1007	PROCE	ഷനമാ (BX&ക് 18	ction Act Motice, see the senara	nca 117199177117647164799	•	ot No. 112	HJV		Form &	パンコンコンコンコント		

			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	√	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	V	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		√
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	√	
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		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓
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		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		<u>√</u>
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		<u>·</u>
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	1	:
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
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		<u> </u>
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		√
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	✓	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		✓
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		✓
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a		14a		✓
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate			
15	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		✓
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV.	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		✓_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		√
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III			,
20 a	If "Yes," complete Schedule G, Part III	19 20a		√
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a	-	_
	100 to into Lou, and the digamization attach a copy of its addited infancial statements to this return:		ı 990	(2012)

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Part	Checklist of Required Schedules (continued)		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	res	No ✓
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		· ✓
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		1
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 25	24a		✓
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√ √
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		√
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		1
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 of any of these persons? If "Yes," complete Schedule L, Part III	27		√
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L. Part IV	28a 28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29 30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		1
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		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 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		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	

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Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V		<u>.</u>	
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		ŀ	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		i	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		١.	
ο-	reportable gaming (gambling) winnings to prize winners?	1c	✓	
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		l	i
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 6			1
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	ļ
2-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	_	1	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u> </u>	/
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	 -	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		ļ	Ì
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		}	/
L	If "Yes," enter the name of the foreign country:	4a		 *
b	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		•	
E a			ł	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		/
b	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?	5b		-
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c		<u> </u>
Ou.	organization solicit any contributions that were not tax deductible as chantable contributions?	6a]	./
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	Ua		-
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	-		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			1
	and services provided to the payor?	7a	İ	1
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	 	<u> </u>
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	- 		
	required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	 		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	Ì	/
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		1
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 and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	1	ļ	1
	organization, have excess business holdings at any time during the year?	8		1
9	Sponsoring organizations maintaining donor advised funds.		-	1
а	Did the organization make any taxable distributions under section 4966?	9a	L	1
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	<u> </u>	1
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12	ļ		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	1		
11	Section 501(c)(12) organizations. Enter:			ł
a	Gross income from members or shareholders	1	l	
b	Gross income from other sources (Do not net amounts due or paid to other sources		İ	
	against amounts due or received from them.)	1		١.
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	<u> </u>	/
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	45	<u> </u>	 ,
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	 	✓
	Note. See the instructions for additional information the organization must report on Schedule O.	1	1	i

Enter the amount of reserves the organization is required to maintain by the states in which

14a Did the organization receive any payments for indoor tanning services during the tax year? . . .

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

c Enter the amount of reserves on hand

13b

13c

14a 14b

Form 99	0 (2012)			Page 6
Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.	See ins	structi	ions.
Coati	Check if Schedule O contains a response to any question in this Part VI	<u></u>		
Secu	on 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 1a	~	165	
10	If there are material differences in voting rights among members of the governing body, or	쁵	ł	
	if the governing body delegated broad authority to an executive committee or similar	İ		
	committee, explain in Schedule O.	- [Ì	
ь	Enter the number of voting members included in line 1a, above, who are independent . 1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	ᅴ	Ì	
	any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customarily performed by or under the direct			<u> </u>
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		1
6	Did the organization have members or stockholders?	6		1
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a		✓
b	Are any governance decisions of the organization reserved to (or subject to approval by) members			1
	stockholders, or persons other than the governing body?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		1	
	the year by the following:			l
а	The governing body?	8a	1	L
b	Each committee with authority to act on behalf of the governing body?	8b	/	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	1		,
0 1	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	L	✓
Secu	on B. Policies (This Section B requests information about policies not required by the Internal Reve	nue C	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	1,03	1
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,		 	
_	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	1	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filling the form?	11a		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		<u> </u>	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	,		
	describe in Schedule O how this was done	12c	✓	ļ
13	Did the organization have a written whistleblower policy?	13		✓
14	Did the organization have a written document retention and destruction policy?	14		1
15	Did the process for determining compensation of the following persons include a review and approval by	· [ļ
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	1		}
а	The organization's CEO, Executive Director, or top management official	15a		<u> </u>
b	Other officers or key employees of the organization	15b	✓	ļ
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	. }	ł	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	1		
4_	· • · · · · · · · · · · · · · · · · · ·	16a	 	✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the		1	1
	organization's exempt status with respect to such arrangements?	16b	ł	
Secti	on C. Disclosure	1 100	<u> </u>	<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed ▶			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires an organization for make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 6104 requires and 990-T (Section 610	on 501	(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.		•	
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict	of inte	rest p	olicy,
	and financial statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and record	s of the	Э	
	organization: ► Corporation,329 Davis Avenue Ste.7,Elkins,WV 26241 304-637-7201			

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Dort VIII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,	
	Compensation of Unicers, Directors, Trustees, Nev Employees, Highest Compensated Employees,	anc
•	Index and and Caulus alone	
	Independent Contractors	

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

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

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

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

Check this box it heither the organization no	r any relate	u org	arıız			ompe	risa	ted any currer	t officer, directo	r, or trustee.
				-	C)					
(A)	(B)	/40.5	Position (do not check more than one				(D)	(E)	(F)	
Name and Title	Average					is both		Reportable	Reportable	Estimated
	hours per					or/trust		compensation	compensation from	amount of
	week (list any	0 =			_			from	related	other
	hours for	20	ğ	Officer	l é	취호	Former	the	organizations	compensation
	related	중출	₫	걸	9	ġ ģ	l d	organization	(W-2/1099-MISC)	from the
	organizations below dotted	유트	9		널	8 2	1	(W-2/1099-MISC)	į	organization
	line)	7 2	≞		Key employee	Į		ľ	i i	and related organizations
	1	Individual trustee or director	Institutional trustee	1	٩	9	1	1		Organizations
		•	8	1	1	Highest compensated employee	}		i	i
		ļ	<u> </u>	 	╙	ä	\vdash		ļ	
(4)	į									
(1) William Turner, President		ł	1	l	l		l			
			L	<u> </u>			L	0	0	0
(2) Krissy Kasserman, Vice Chair	l	l			ļ		ł			
								0	0	0
(3) Turner Sharp, Treasurer										
	1		1	l	l			0	ا ا	0
(4) Chrissy Zeltner, Secretary	1			_	_		 	† <u>-</u>		
(1) Chirosy Lettier, Secretary	 	•		1	1		1	1	_	_
	ļ	ļ	⊢		├		\vdash	0	0	0
(5) Don Garvin		}] ,	ļ	l	}	ŀ			
					L_			0	0	0
(6) Ed Gertler	<u> </u>	Į.		1	1	1	1	1		
					l		1	. 0	o	0
(7) Elizabeth Koller										
***************************************		1			1			0	0	o
(8) Mike Moore		 		 	 			1		
(O) Mike Moore	†	ŀ	l i]	_		
(0) 5: 1 5 1:		<u> </u>	\vdash	├			 	0	0	0
(9) Ricky Rodriguez	ļ	•			l		1			
		<u> </u>			<u>L</u>		_	0	0	0
(10)		l		1	l		l	1		
			1	1				1		
(11)							Γ	1		
***************************************	1				[1		
(12)	<u> </u>	<u> </u>	\vdash					†		
Y/	†						l	1		
(49)	 	 					 			
(13)	 	ļ						1		
		L	Ш	<u> </u>	_		<u> </u>			
(14)	1						1	1		
	T	1)	ı	l i	1	i	l .	ì	

	(A) Name and title	(B) Average hours per week (list any	rerage box, unless person is both officer and a director/truste						(D) Reportable compensation from	(E) Reportable compensation from related		Est amo	(F) mated ount of ther	
		hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-Mi		fro orga and	ensation the nization related nization	n I
(15)												•		
(16)														
(17)											-	_		
(18)						-					-			
(19)														
(20)						ļ 		-			-			
(21)														
(22)						_								
					_									
(23)														·
(24)					!									
(25)														
1b c d	Sub-total	VII, Sectio		•	•			→ →						
2	Total number of individuals (including but reportable compensation from the organi	t not limited					above	e) w	no received m	ore than \$10	00,000	of		
3	Did the organization list any former of employee on line 1a? If "Yes," complete	ficer, direc							ployee, or high	-		3	Yes	No
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of re	portal an \$1	ble (150,	con 000	iper	nsatio	n a s,"	and other comp complete Sch	ensation fro	m the	4		1
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue co	ompe	nsat	ion	fro	n any	un un	related organiz			5		1
	on B. Independent Contractors										- 6100	200 -		
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	Iress							(B) Description of s	ervices	С	(C) ompen:		
2	Total number of independent contractor	re (includi	na hi	nt ro	0+ 1	imit	ed to	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	nose listed ah	Ove) who				
-	received more than \$100,000 of compens								0 0	2.0, 11.10				

Par	VIII	Statement of Revenue Check if Schedule O contains a response	nee to any guest	tion in this Dart \	ли		П
		Orieck if Schedule O Contains a respo	orise to any ques	(A) Total revenue	Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
इ इ	1a	Federated campaigns 1a					
ìrar oun	ь	Membership dues 1b	35,946				
S, G	С	Fundraising events 1c					
Gift Tar	d	Related organizations 1d					
Contributions, Gifts, Grants and Other Similar Amounts	e	Government grants (contributions) 1e All other contributions, gifts, grants,	27,354				
ibuti	•	and similar amounts not included above	71,498				
nd of	g	Noncash contributions included in lines 1a-1f: \$					
<u>5 5</u>	h	Total. Add lines 1a-1f		134,798			
anu e			Business Code				
eve	2a b	Outreach events	900099	980	980	0	0
8	C					-	
ΘŽ	d						***********
Š	e	***************************************					
Program Service Revenue	f	All other program service revenue.					
<u>P</u>	g	Total. Add lines 2a-2f		980			
	3	Investment income (including divid					
		and other similar amounts)		55	55	0	0
	4	Income from investment of tax-exempt be					
	5	Royalties	(n) Personal				
	6a	Gross rents	(ii) i craonar				
	b	Less: rental expenses					
	C	Rental income or (loss)					
	d	Net rental income or (loss)	•				
	7a	Gross amount from sales of (i) Securities assets other than inventory	(ii) Other				
	b	Less: cost or other basis and sales expenses .					
	С	Gain or (loss)					
	d	Net gain or (loss)	>				
Other Revenue	8a	Gross income from fundraising events (not including \$					
er Re		of contributions reported on line 1c). See Part IV, line 18 a	2,026				
Æ	ь	Less: direct expenses b	618				
	С	Net income or (loss) from fundraising	events . 🕨	1408		0	0
	9a	Gross income from gaming activities. See Part IV, line 19 a	4.005				
	ь	Less: direct expenses b	1,000				
	C	Net income or (loss) from gaming acti		2,112	2.112	0	n
	-	Gross sales of inventory, less		2,112			
		returns and allowances a					
	b	Less: cost of goods sold b					
	<u>c</u>	Net income or (loss) from sales of inventor Miscellaneous Revenue	Business Code	(429)	(42 9)	0	
	11a	IVIISCEIMIEOUS FREVERIUE	Duziness Code				
	b						
	C						
	d	All other revenue		0	0	0	0
	е	Total. Add lines 11a-11d	▶	0			
	12	Total revenue. See instructions	>	138,924	2,718	0	0

Form 990 (2012)
Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons	se to any question i	n this Part IX		
	t include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	31,772	22,240	1,589	7,943
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages	58,445	28,333	3,112	27,000
9	Other employee benefits	525 8,861	368 6,203	26 443	131 2,215
10	Payroll taxes	7,514	5,259	376	1,879
11	Fees for services (non-employees):	7,011	5,255		
а	Management				
b	Legal	·			
С	Accounting				
d	Lobbying [5,000	5,000	0	0
е	Professional fundraising services. See Part IV, line 17				
f	investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column	1			
	(A) amount, list line 11g expenses on Schedule O.)	2,115	2,115	. 0	0
12	Advertising and promotion	15,918	15,918	0	0
13	Office expenses	344	189	13	142
14	Information technology				
15 16	Royalties				
17	Occupancy	7,200	5,040	360 992	1,800
18	Payments of travel or entertainment expenses	4,454	3,462	992	
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,733	755	5,978	0
20	Interest	729	37	0	692
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	316	221	16	79
23	Insurance	1,132	0	1,132	
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
а	Telephone	3,648	2,554	182	912
b	Printing	4,584	3,209	229	1,146
С	Postage	3,218	3,218	0	0
d	Supplies	10,068	9.397	671	0
е	All other expenses Fees	40	40	0	
25	Total functional expenses. Add lines 1 through 24e	172,616	113,558	15,119	43,939
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

	<u>, </u>	Check if Schedule O contains a response to any question in this Part X			<u>,</u> 🔲
			(A) Beginning of year	_	(B) End of year
	1	Cash—non-interest-bearing	13,889	1	2,964
	2	Savings and temporary cash investments	127,369	2	118,056
	3	Pledges and grants receivable, net	0	3	0
	4	Accounts receivable, net	4,617	4	0
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L	0	5	0
ts	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 employees' beneficiary organizations (see instructions) Complete Part II of Schedule L	0	6	0
Assets	7	Notes and loans receivable, net	0	7	0
Ä	8	Inventones for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	1,439	9	650
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D 10a 5,539			
	b	Less: accumulated depreciation 10b 5,248	607	10c	291
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities. See Part IV, line 11 [12	.0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	:	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	147,921		121,961
	17	Accounts payable and accrued expenses	1,785		1,239
	18	Grants payable		18	0
	19	Deferred revenue	35,981		44,513
	20	Tax-exempt bond liabilities		20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	0
es	22	Loans and other payables to current and former officers, directors,			
≝		trustees, key employees, highest compensated employees, and			
Liabilities		disqualified persons. Complete Part II of Schedule L	0		0
-	23	Secured mortgages and notes payable to unrelated third parties	0		0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	2,866		2,610
_	26	Total liabilities. Add lines 17 through 25	40,632	26	48,362
ces		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.			
a	27	Unrestricted net assets	107,289	27	73,599
Ba	28	Temporarily restricted net assets	0	28	0
힏	29	Permanently restricted net assets	0	29	0
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.			
3	30	Capital stock or trust principal, or current funds	0	30	0
SS	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	. 0
A	32	Retained earnings, endowment, accumulated income, or other funds	0		0
Ę	33	Total net assets or fund balances	107,289		73,599
~	34	Total liabilities and net assets/fund balances	147,921		121,961
					Form 990 (2012)

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits 3a

Form **990** (2012)

Schedule O.

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

West Virginia Rivers Coalition, Inc.

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

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

Employer identification number

52-1736621

Pa	tl Reason f	or Public Cha	rity Status (All orga	nization	s must c	omplete	this par	rt.) See i	nstructi	ons.		
The	organization is not	a private founda	ition because it is: (Fo	or lines 1	through 1	1, check	only one	box.)				
1	A church, con	vention of churc	hes, or association of	churches	s describ	ed in sec	tion 170	(b)(1)(A)(i	}.			
2	A school desc	inbed in section	170(b)(1)(A)(ii). (Attac	ch Sched	ule E.)							
3			spital service organiza									
4	hospital's nan	ne, city, and stat			•							
5		on operated for b)(1)(A)(iv). (Com	the benefit of a colle plete Part II.)	ge or uni	versity o	wned or	operated	by a go	vernmen	tal unit	describ	oed in
6 7	An organization	on that normally	nment or government receives a substantia ((A)(vi). (Complete Pai	al part of					nit or from	n the ge	eneral į	public
8	☐ A community	trust described i	n section 170(b)(1)(A)(vi). (Cor	nplete Pa	ert II.)						
9	receipts from support from	activities related gross investme	receives: (1) more that d to its exempt funct ent income and unre lifter June 30, 1975. So	ions—sul lated bus	bject to d siness ta	certain e xable ind	ceptions	s, and (2) ss sectio	no mor	e than 3	331/3%	of its
10 11	☐ An organization	on organized ar	l operated exclusively nd operated exclusive plicly supported organ	ely for th	ie benefi	t of, to	perform 1	the funct	ions of,			
			describes the type of									
е	other than fou or section 509	ındation manage 9(a)(2).	that the organization ers and other than on	is not co e or more	ntrolled o	firectly or support	r ındirecti ed organ	izations o	or more described	disquali d in sect	fied pe ion 50	rsons 9(a)(1)
f			a written determinatio								ıpportii	ng
g	-	17, 2006, has t	he organization acce							•		ب.
			ndirectly controls, eit	her alone	or toget	her with	persons	describe	d in (ii) a	nd	Yes	No
			ody of the supported							11g	a 	1
			on described in (i) abo	-						11g(\rightarrow	
	· · ·	•	a person described in						• • •	119(·
h			on about the support							190	<u>'''3</u>	<u> </u>
(i)	Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) is the c in col. (i) lis	organization sted in your document?	(v) Did y the organ col (i)	ou notify nization in of your port?	organizat	is the tion in col. zed in the S.?	(vii) Amo	unt of me support	onetary
				Yes	No	Yes	No	Yes	No	<u> </u>		
(A)												
(B)												
(C)												
(D)												
(E)												

Part	Support Schedule for Organiza	tions Descr	ibed in Secti	ons 170(b)(1)(A)(iv) and 1	70(b)(1)(A)(v	i)
•	(Complete only if you checked the	ne box on line	e 5, 7, or 8 of	Part I or if the	e organizatio	n failed to qu	alify under
	Part III. If the organization fails to	qualify unde	er the tests lis	ted below, pl	lease comple	te Part III.)	
	on A. Public Support				<u> </u>		r
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4.				15 7.5 71.72		
	on B. Total Support						
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on					,	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc.	(see instruction	ons)			12	
13	First five years. If the Form 990 is for th	e organization	n's first, second	d, third, fourth	, or fifth tax ye	ear as a section	n 501(c)(3)
	organization, check this box and stop he						🟲 🗀
	on C. Computation of Public Suppor						
14	Public support percentage for 2012 (line 6					14	%
15 16a	Public support percentage from 2011 Sch 331/3% support test—2012. If the organization					15	heck this
	box and stop here. The organization qual						
b	331/3% support test—2011. If the organicheck this box and stop here. The organi	ization did no zation qualifie	ot check a box s as a publicly	on line 13 or supported org	16a, and line and lanc	15 is 33 ¹ /3%	or more,
17a	10%-facts-and-circumstances test—20 10% or more, and if the organization mee Part IV how the organization meets the "forganization	ets the "facts- acts-and-circu	and-circumsta ımstances" tes	nces" test, che t. The organiza	eck this box an ation qualifies	d stop here. E as a publicly s	line 14 is Explain in upported
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organizat Explain in Part IV how the organization m	ion meets the eets the "facts	facts-and-circumst	rcumstances" ances" test. T	test, check the he organization	is box and st	op here.
40	supported organization						. • 🗆
18	Private foundation. If the organization disinstructions						

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

(Complete only if you checked the box on line 9 of Part I 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.)

Secti	on A. Public Support	drider the tes	sts listed beit	ow, piease cu	inpiete Fart i	1.)	
	dar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1	Gifts, grants, contributions, and membership fees	(4, 2000	(2,233	(0, 20.0	(1, 2077	(0, 20.12	
	received. (Do not include any "unusual grants.")	199,789	158,453	161,088	159,236	134,798	813,364
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	17,371	11,174	8,604	4,558	8,045	49,752
3	Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	0	0	0	0	0
5	The value of services or facilities furnished by a governmental unit to the organization without charge	G	0	0	0	0	0
6	Total. Add lines 1 through 5	217,160	169,627	169,692	163,794	142,843	863,116
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons .	2,870	2,710	3,500	1,870	1,810	12,760
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year					0	•
G	Add lines 7a and 7b	2,870	2,710	3,500	1,870	1,810	12,760
8	Public support (Subtract line 7c from line 6.)	2,070	2,710	3,300	1,070	7,010	850,356
	on B. Total Support						
_	dar year (or fiscal year beginning in) 🕨	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9	Amounts from line 6	217,160	169,627	169,692	163,794	142,843	863,116
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources.	282	81	87	104	55	609
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
С	Add lines 10a and 10b	282	81	87	104	55	609
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	0	0	0	0	0	0 000 705
14	First five years. If the Form 990 is for the organization, check this box and stop her					142,898	
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2012 (line 8			3. column (fi)		15	98.45 %
16	Public support percentage from 2011 Sch		•			16	96.82 %
	on D. Computation of Investment Inc				<u> </u>		00,02
17	Investment income percentage for 2012 (I			line 13, colun	ın (f))	17	.07 %
18	Investment income percentage from 2011	Schedule A, F	Part III, line 17			18	.08 %
19a b	331/a% support tests—2012. If the organizer 17 is not more than 331/a%, check this box 331/a% support tests—2011. If the organizer	and stop here.	The organization	on qualifies as a	publicly suppo	orted organization	on . 🕨 🗸
20 20	line 18 is not more than 33½%, check this bearing the foundation. If the organization did	oox and stop he	ere. The organi	zation qualifies	as a publicly s	upported organ	ization 🕨 🔽

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Complete If the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

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

Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C

Open to Public Inspection

 Section 501(c) (other than section 501(c)(3)) organizations; Complete Parts I-A and C below. Do not complete Part I-B. · Section 527 organizations: Complete Part I-A only. If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)); Complete Part II-A. Do not complete Part II-B. • Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization Employer Identification number West Virginia Rivers Coalition, Inc. 52-1736621 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV. Volunteer hours Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955. 1 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . . ▶ No If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No b If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function Enter the amount of the filing organization's funds contributed to other organizations for section 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (e) Amount of political (a) Name (b) Address (c) EIN (d) Amount paid from contributions received and filing organization's funds. If none, enter -0-. promptly and directly delivered to a separate political organization If none, enter -0-. (1)(2)(3) (4)(5)

(6)

_	
Page	4

	Gule C (FOITH 990 OF 990-EZ) 2012					Page ∠
Pai	rt II-A Complete if the organization i section 501(h)).	is exempt ι	ınder section 5	01(c)(3) and filed	1 Form 5768 (elec	tion under
A (Check ► ☐ if the filing organization below name, address, EIN, expense					p member's
B (Check ▶ ☐ if the filing organization chec	ked box A a	and "limited con	trol" provisions a	pply.	
	Limits on Lobbyi				(a) Filing	(b) Affiliated
	(The term "expenditures" mea	ns amounts	paid or incurred	.}	organization's totals	group totals
18	, , , , , , , , , , , , , , , , , , ,					
ı	b Total lobbying expenditures to influence a	legislative bo	ody (direct lobbyin	g)		
(c Total lobbying expenditures (add lines 1a a	and 1b) .				
(d Other exempt purpose expenditures					
(e Total exempt purpose expenditures (add li					
1	 Lobbying nontaxable amount. Enter the columns. 	e amount fr	om the following	g table in both		
	If the amount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amoun	t is:		
	Not over \$500,000	20% of the an	nount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000.		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess of	ver \$1,500,000.		
	Over \$17,000,000 \$1,000,000.					
•	g Grassroots nontaxable amount (enter 25%	•				
ı	h Subtract line 1g from line 1a. If zero or less					
i	Subtract line 1f from line 1c. If zero or less,					
j	If there is an amount other than zero or reporting section 4911 tax for this year?			the organization		Yes No
	4-Year (Some organizations that made columns below. Se	a section 5		not have to comp		
	Lobbying E	xpenditures	During 4-Year A	veraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) Total
2	a Lobbying nontaxable amount					
	Lobbying ceiling amount (150% of line 2a, column (e))					
	c Total lobbying expenditures					
(d Grassroots nontaxable amount					
	e Grassroots ceiling amount (150% of line 2d, column (e))					
1	Grassroots lobbying expenditures					

Part	Complete if the organization is exempt under section 501(c)(3) and has NOT to (election under section 501(h)).	iled	Form	5768		
For e	ach "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(ē	9)		(p)	
descn	otion of the lobbying activity.	Yes	No	Ar	nount	:
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?		1	İ		
ь	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		√	į		
C	Media advertisements?		1	İ		
d	Mailings to members, legislators, or the public?		√			
е	Publications, or published or broadcast statements?		\			
f	Grants to other organizations for lobbying purposes?		✓	Ĺ		
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	✓				5,000
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		1			
i	Other activities?		✓	<u> </u>		
J	Total. Add lines 1c through 1i					5,000
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		V			
b	If "Yes," enter the amount of any tax incurred under section 4912			<u> </u>		
c d	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?					
Part	II-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5), c	or se	ction		· · · · · · · · · · · · · · · · · · ·
	501(c)(6).				N	
1	Were substantially all (90% or more) dues received nondeductible by members?				Yes	No
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			1 2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Part	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."		Part		line :	3, is
1 2	Dues, assessments and similar amounts from members	of	1			
а	Current year		2a	į		
b	Carryover from last year		2b			
C	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby	/ing				
_	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Part		<u> </u>	A (=6	(1) - 1 - 1		
st); Pa	ete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; I rt II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.	-an II	-A (ai	mated	group	
						•

SCHEDULE D (Form 990)

Supplemental Financial Statements

Employer identification number

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ▶ Attach to Form 990. ▶ See separate instructions.

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	irginia Rivers Coalition, Inc.		52-1736621	
Par		or Advised Funds or Other Similar Fu	inds or Accounts. Comp	lete if the
	organization answered "Yes" to Fe			
		(a) Donor advised funds	(b) Funds and other acco	ounts
1	Total number at end of year			
2	Aggregate contributions to (during year) .			
3	Aggregate grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and	donor advisors in writing that the assets	held in donor advised	
	funds are the organization's property, subject	ct to the organization's exclusive legal con	trol?	Yes 🗌 No
6	Did the organization inform all grantees, do	nors, and donor advisors in writing that g	ant funds can be used	
	only for charitable purposes and not for the			
				Yes No
Par	Conservation Easements. Comp	lete if the organization answered "Yes	" to Form 990, Part IV, lin	e 7.
1	Purpose(s) of conservation easements held			
	Preservation of land for public use (e.g.,	recreation or education) 🔲 Preservation	of an historically important I	and area
	☐ Protection of natural habitat	☐ Preservation	of a certified historic structu	ire
	☐ Preservation of open space			
2	Complete lines 2a through 2d if the organiza	tion held a qualified conservation contribu	tion in the form of a conserv	ation
	easement on the last day of the tax year.			
			Held at the End	of the Tax Year
а	Total number of conservation easements	. .	2a	
b	Total acreage restricted by conservation eas	sements	2b	
C	Number of conservation easements on a cer	tified historic structure included in (a)	2c	
d	Number of conservation easements include	ed in (c) acquired after 8/17/06, and no	t on a	
	historic structure listed in the National Regis			
3	Number of conservation easements modified	d, transferred, released, extinguished, or to	erminated by the organization	n during the
	tax year ►			
4	Number of states where property subject to	conservation easement is located ▶		
5	Does the organization have a written pol			
	violations, and enforcement of the conserva			Yes 🗌 No
6	Staff and volunteer hours devoted to monitor	ring, inspecting, and enforcing conservati	on easements during the yea	ır
	>			
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation ea	sements during the year	
	\$			
8	Does each conservation easement reported	• •	s of section 170(h)(4)(B)	
	(,		· · · · · · · · · ·	Yes ☐ No
9	In Part XIII, describe how the organization re	ports conservation easements in its reven	ue and expense statement,	and
	balance sheet, and include, if applicable, the	_	rinanciai statements that de	scribes trie
	organization's accounting for conservation of		Other Cimilar Assets	
Part		ections of Art, Historical Treasures,		
	If the organization elected, as permitted un	vered "Yes" to Form 990, Part IV, line		alanca choot
18	works of art, historical treasures, or other	cimilar assets held for public exhibition	education or research in fi	irtherance of
	public service, provide, in Part XIII, the text	of the footnote to its financial statements t	nat describes these items.	
_	If the organization elected, as permitted up			alance sheet
D	works of art, historical treasures, or other			
	public service, provide the following amount		Calcation, or research in h	2, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	•	_	⊾ ¢	
	(i) Revenues included in Form 990, Part VIII		▶ €	
2	(ii) Assets included in Form 990, Part X . If the organization received or held works	of art. historical treasures, or other simi	lar accete for financial gain	provide the
2	following amounts required to be reported u	inder SEAS 116 (ASC 958) relation to these	a items:	, provide tre
_		•		
a	Revenues included in Form 990, Part VIII, III	le I		

Schedu	e D (Form 990) 2012							Page 2
Part	III Organizations Maintaining Col	lections of	Art, His	torical T	reasures	, or Ot	her Similar A	ssets (continued)
3	'Using the organization's acquisition, acce collection items (check all that apply):	ession, and o	ther reco	rds, chec	k any of th	e follov	ving that are a	significant use of its
а	☐ Public exhibition		d	☐ Loan	or exchang	ge progi	rams	
b	Scholarly research							
C	☐ Preservation for future generations							
4	Provide a description of the organization's XIII.	s collections	and expl	ain how t	hey further	the org	janization's exe	empt purpose in Part
5	During the year, did the organization solid assets to be sold to raise funds rather than							
Part	IV Escrow and Custodial Arrange line 9, or reported an amount on				anization	answe	red "Yes" to F	
1a	Is the organization an agent, trustee, cus included on Form 990, Part X?	stodian or oth	ner intern	nediary fo				not Yes No
b	If "Yes," explain the arrangement in Part X							_
		•		- · · · J · ·			1	Amount
С	Beginning balance					1c	:	
đ	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on							Yes No
b	If "Yes," explain the arrangement in Part X							
Par	V Endowment Funds. Complete i	f the organiz						
	(a) Current year	(b) Pri	or year	(c) Two year	rs back	(d) Three years ba	ck (e) Four years back
1a	Beginning of year balance							
b	Contributions							
C	Net investment earnings, gains, and losses							
	—			-				
d	Grants or scholarships		ļ		<u> </u>			
е	Other expenditures for facilities and programs					ļ		
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of the c	urrent year er	nd balanc	e (line 1g	, column (a	ı)) held a	as:	
а	Board designated or quasi-endowment ▶		%					
b	Permanent endowment ▶%	6						
C	Temporarily restricted endowment ▶	%						
	The percentages in lines 2a, 2b, and 2c sh							
За	Are there endowment funds not in the pos	ssession of th	he organi	zation tha	at are held	and ad	ministered for t	the
	organization by:							Yes No
	(i) unrelated organizations							. 3a(i)
	(ii) related organizations							. 3a(ii)
b	If "Yes" to 3a(ii), are the related organization							. 3b
_ 4	Describe in Part XIII the intended uses of t							
Part	VI Land, Buildings, and Equipmen	nt. See Forn	n 990, P	art X, lin	e 10.			
	Description of property	(a) Cost or of (investm			or other basis ther)		Accumulated epreciation	(d) Book value
1a	Land				***	-		
b	Buildings							· · · · · · · · · · · · · · · · · · ·
C	Leasehold improvements							
d	Equipment				5,539		5,248	291
е	Other							
Total.	Add lines 1a through 1e. (Column (d) must	equal Form 9	90, Part	K, column	(B), line 10	O(c).) .		291

Part VII	Investments - Other Securities	. See Form 990, Part X, I	ine 12.	
, (a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation. Cost or end-of-year market valu	ie
(1) Financia	I derivatives			
	held equity interests			
(3) Other				
(A)				
(B)			<u> </u>	
(C)				
(D)				
(E)				
(F)				
(G) (H)				
(I)				······································
	(b) must a supl Form 000 Part V and (D) line 101			
Part VIII	(b) must equal Form 990, Part X, col. (B) line 12.) ► Investments — Program Related	Soo Form 900 Part V	line 12	
	(a) Description of investment type	(b) Book value	Y	
	(a) Description of investment type	(p) pook value	(c) Method of valuation Cost or end-of-year market valu	ie
(1)			,	
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	(b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX	Other Assets. See Form 990, Pa	rt X, line 15.		
	(a) Description	(b) Book value
(1)				
(2)				
(3)	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total (Colu	ımn (b) must equal Form 990, Part X, co	of (B) line 15.)		
Part X	Other Liabilities. See Form 990,		· · · · · · · · · · · · · · · · · · ·	
1.	(a) Description of liability	(b) Book value		 -
	income taxes			
(2) Payroll		2,610		
(3)		2,010		
(4)				
(5)	· · · · · · · · · · · · · · · · · · ·			
(6)				
(7)				
(8)				
(9)				
(10)				
(11)				
	(b) must equal Form 990, Part X, col. (B) line 25.)	2,610		
2. FIN 48 (AS	SC 740) Footnote. In Part XIII, provide the t	ext of the footnote to the orga	anization's financial statements that reports	the organization's
liability for ur	ncertain tax positions under FIN 48 (ASC 7	40). Check here if the text of	the footnote has been provided in Part XIII.	🗆

Schedu	ole D (Form 990) 2012		Page 4
Part	XI Reconciliation of Revenue per Audited Financial Statements With Revenue per	Retu	
1	*Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains on investments]	
b	Donated services and use of facilities]	
C	Recoveries of prior year grants]	
d	Other (Describe in Part XIII.)]	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a]	
b	Other (Describe in Part XIII.)		
	Add lines 4a and 4b	4c	
_ 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	
	XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	er Re	turn
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments]	
C	Other losses]	
d	Other (Describe in Part XIII.)] !	
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	Investment expenses not included on Form 990, Part VIII, line 7b 4a	1	
	Other (Describe in Part XIII.)] '	
	Add lines 4a and 4b	4c	
_5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
	XIII Supplemental Information		
Comp	lete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F	'art IV,	lines 1b and 2b;
Part v inform	, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to) provi	de any additional
IIIIOIIII	ation.		

••••••			***************************************

SCHEDULE 0 (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization	Employer identification number
West Virginia Rivers Coalition, Inc.	52-1736621

West Virginia Rivers Coalition, Inc. requires officers, trustees or directors and key employees to disclose interest that could rise to confilicts
procedures is performed at the beginning of each board meeting. The question is asked if anyone has a conflict of interest. If a board member
knowledge a conflict of interest, the person is not allowed to vote or express an opinion on the topic. The 990 form is prepared by the bookless
and sent to the treasurer for review and signature.
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