

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990**

Department of the Treasury

DLN: 93493135056185

OMB No 1545-0047 **Return of Organization Exempt From Income Tax**

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

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

Open to Public

micman	CVCIIGC	OCIVIOC	► Information about Form 99	o and its instructions is at <u>www.IRS.</u>	gov/form990	<u>2</u>		Inspection
A Fo	the 2	2013 ca	l <u>endar year, or tax year beginnin</u> g	g 10-01-2013 , 2013, and ending 09	-30-2014			
		pplicable	C Name of organization			D Emplo	yer iden	tification number
	ress ch		Upper Housatonic Valley National He	critage Area		06-16	513798	
— _{Nar}	ne chai	nae	Doing Business As				,13,30	
	al retu	_						
_			Number and street (or P O box if m 24 Main St PO Box 493	all is not delivered to street address) Room/	suite	E Telepho	one numb	er
_	minate					(860)	435-9	505
Am	ended i	return	City or town, state or province, cour Salisbury, CT 06068	ntry, and ZIP or foreign postal code				
App	lication	pending	,,			G Gross r	eceipts \$	151,882
			F Name and address of prin	icipal officer	H(a) I	s this a group	return	for
			PHIL SMITH 131 Fox Run		s	ubordinates?		┌ Yes No
			Lee, MA 01238		H(b) A	re all subordi	inates	┌ Yes ┌ No
					1	ncluded?	naces	1 1631 110
I Tax	-exem	pt status	▼ 501(c)(3)	nsert no) 4947(a)(1) or 527	I	f "No," attach	a list ((see instructions)
J W	ebsite	e:⊫ up	perhousatonicheritage org		H(c)	Group exempt	ion num	nher ▶
		•	-		1 (-)			
			Corporation Trust Associatio	n∣ Other ►	L Year	of formation 20	00 M 9	State of legal domicile C
Ра	rt I		nmary					
			lescribe the organization's mission					
	<u>!</u>	Preserv	ation of historical, hatural cultura	ıl and artıstıc resources ın the region				
<u>မ</u> ိ	-							
屋								
Activities & Governance	2 (Check t	his box দ if the organization dis	scontinued its operations or disposed	d of more th	an 25% of its	net ass	sets
ှိ								
25				ing body (Part VI, line 1a)			3	10
ĕ				of the governing body (Part VI, line 1			4	(
5				calendar year 2013 (Part V, line 2a)			5	
୍ଦ				ecessary)			6	
				art VIII, column (C), line 12			7a	(
	Ьſ	Net unr	elated business taxable income fi	rom Form 990-T, line 34			7b	
						Prior Year	$-\!$	Current Year
0.	8		=	ne 1 h)		233,	792	141,351
Rayenue	9	Progr	am service revenue (Part VIII, li	ne 2g)			$-\!$	4,083
e Per	10	Inves	tment income (Part VIII, column	(A), lines 3, 4, and 7d)		1,	927	6,448
ш	11			lines 5, 6d, 8c, 9c, 10c, and 11e)		1,	202	0
	12			(must equal Part VIII, column (A), li	ine	236,	921	151,882
	13			IX, column (A), lines 1-3)			129	78,261
	14			X, column (A), line 4)		, , ,		, 0,201
	15			e benefits (Part IX, column (A), lines				
\$	15	5-10		ce benefits (Fure IX, column (A), mes	`	64,	905	60,246
Expenses	16a	Profe	ssional fundraising fees (Part IX,	column (A), line 11e)				C
<u>ਵੇ</u>	b	Total f	undraising expenses (Part IX, column (D)), line 25) ▶ - ⁰				
ш	17			ines 11a-11d, 11f-24e)		66,	427	43,327
	18			st equal Part IX, column (A), line 25)		223,	461	181,834
	19			18 from line 12		13,	460	-29,952
ኤ ው ማ			·		<u> </u>	nning of Curre	nt	
ည် မို						Year		End of Year
3.4£	20		assets (Part X, line 16)			131,	590	97,016
\$ B	21	Total	liabilities (Part X, line 26)		•	6,	029	1,407
ZÏ	22	Net a	ssets or fund balances Subtract	line 21 from line 20		125,	561	95,609
Par	t II	Sign	nature Block					
Unde my kr	21 22 t III	Total Net a Sign alties of age and	liabilities (Part X, line 26) ssets or fund balances Subtract nature Block perjury, I declare that I have exa		anying sche	6, 125, edules and sta	029 561 atements	1, 95, s, and to the best
		***	***			2015-05-14		
Sign		Sign	ature of officer			Date		
Here		▶ PHII	SMITH CHAIRMAN					
		Тур	e or print name and title					
			Print/Type preparer's name KAREN RICCARDELLI	Preparer's signature	Date 2015-05-15	Check 🗸 ıf	PTIN	
Paic	l	⊢	Firm's name	1	5013 03-13	self-employed Firm's EIN		
Pre	pare		5 haine P KAIKEN NICCARDELLI			, mm 3 LIN F		
مءا ا			Firm's address 🟲 PO BOX 53			Phone no (860	824-99	55

CANAAN, CT 06018

May the IRS discuss this return with the preparer shown above? (see instructions)

✓ Yes 厂No

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)? <i>If "Yes," complete Schedule A</i>	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Νo
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		No
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		No
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		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		No
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		No
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		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		No
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		No
	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		No
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	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
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		No
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		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or 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		Νo
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
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		No
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) 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	25a		No
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		No
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 so, complete Schedule L, Part II	26		No
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? <i>If "Yes," complete Schedule L, Part III</i>	27		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV			
		28a		No
D	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
c	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		No
29	Did the organization receive more than $$25,000$ in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Νo
32		32		No
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		No
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		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		
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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	20	Yes	

	Check if Schedule O contains a response or note to any line in this Part V		Yes	.) No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 2		res	INC
	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c		
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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		N
b	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
_				
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N c
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		No
	organization solicit 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			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		No
	services provided to the payor?	/a		IN
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	, <u>, c</u>		141
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
	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 organization, have excess			
	business holdings at any time during the year?	8		No
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		No
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		No
LO	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
J	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
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	134		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
c	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

►DAN BOLOGNANI 24 Main St PO Box 493 Salisbury,CT 06068 (860) 435-9505

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

Check of Schedule O contains a response or note to any line in this Part VI.

Se	ection 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			
	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			
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		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization become aware during the year of a significant diversion of the organization's assets.	6		No
	Did the organization have members of stockholders, or other persons who had the power to elect or appoint one or	-		
	more members of the governing body?	7a		No_
	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		N o
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
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		
l1a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
L2a	Did the organization have a written conflict of interest policy? If "No," go to line 13			
		12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	Yes	
c	rise to conflicts?	12b	Yes	
c L3	rise to conflicts?	12b 12c	Yes	
c 13 14	rise to conflicts?	12b 12c 13	Yes Yes Yes	
c 13 14 15	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13	Yes Yes Yes	
c 13 14 15	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14	Yes Yes Yes	No
c 13 14 15	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14	Yes Yes Yes	No
c 13 14 15 a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14	Yes Yes Yes	No
c 13 14 15 a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14 15a 15b	Yes Yes Yes	
c 13 14 15 a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14 15a 15b	Yes Yes Yes	
c 13 14 15 a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14 15a 15b	Yes Yes Yes	
c 13 14 15 a b b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14 15a 15b	Yes Yes Yes	
c 13 14 15 a b 16a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Ection C. Disclosure List the States with which a copy of this Form 990 is required to be filed ►CT Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply	12b 12c 13 14 15a 15b	Yes Yes Yes	
c 13 14 15 a b 16a b	rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12b 12c 13 14 15a 15b	Yes Yes Yes	
c 13 14 15 a b	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Ection C. Disclosure List the States with which a copy of this Form 990 is required to be filed ►CT Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply	12b 12c 13 14 15a 15b	Yes Yes Yes Yes	

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- ◆ 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, or 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

										-
(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot	not box h ar or/tr	office ustee	ss er	(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) LOU BUCCERI	0 00							0	0	
Trustee		Х						0	0	0
(2) SHEP EVANS	0 00	.,						_		
Trustee		Х						0	0	0
(3) PAUL W IVORY	0 00	.,								
Secretary		Х						0	0	0
(4) RONALD D JONES	0 00							_	_	_
Treasurer		Х		X				0	0	0
(5) EDWARD KIRBY	0 00									
Vice Chairman		Х		X				0	0	0
(6) RAYMOND MURRAY	0 00									_
Trustee		Х						0	0	0
(7) KATHY ORLANDO	0 00									
Trustee		Х						0	0	0
(8) ROBERT PALADINO	0 00									
Trustee		Х						0	0	0
(9) DENNIS REGAN	0 00									
Trustee		Х						0	0	0
(10) STEPHEN SEARS	0 00									
Trustee		Х						0	0	0
(11) PHIL SMITH	0 00									_
Chairman		Х		Х				0	0	0
				\vdash			\vdash			
										Form 990 (2013)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours per week (list any hours	more t	han o	one both	box, ıan d	heck unless officer stee)	3	Repor comper from organiza	table nsation the tion (W-	(E) Reportable compensation from related organizations (W	/- ·	(F) Estima mount of compens	ted f other ation he
		for related organizations below dotted line)	Individual trustiee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		rganizati relate organiza	ed
												+		
1b c	Sub-Total		ection /	٠.				+						
d	Total (add lines 1b and 1c) .							•						
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho receive	d more th	nan	•		
3	Did the organization list any f o	ormer officer, dii	rector o	r trus	stee,	, key	emplo	yee,	, or highes	t compen	sated employee		Yes	No
4	on line 1a? <i>If "Yes," complete S</i> For any individual listed on line	e 1a, is the sum	of repo	rtabl	e co	mpe						3		No
	organization and related organ				•	•		•				4		No
5	Did any person listed on line 1 services rendered to the organ									anization	or individual for	5		No
Se	ction B. Independent Co	ntractors												
1	Complete this table for your five compensation from the organization	ve highest comp											tax year	
	N	(A) lame and business	address							Des	(B) scription of services		(C Comper	
												\dashv		
	Fotal number of independent co \$100,000 of compensation fron			not	lımıt	ed to	thos	e list	ed above)	who rece	eived more than			

Part V	****	Statement o	o f Revenue ule O contains a respoi	nse or note to any lu	ne in this Part VIII			_
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
रु ह	1a	Federated cam	paigns 1a					
an	ь	Membership du	ies 1b					
۾ ڇو	c	Fundraising eve	ents 1c					
iffs ar /	d	Related organiz	zations 1d					
%.E	e	Government grant	s (contributions) 1e	132,954				
Contributions, Giffs, Grants and Other Similar Amounts	f f	All other contribution	ons, gifts, grants, and 1f	8,397	i			
buđ ihe		sımılar amounts no						
i di	g	1a-1f \$	ons included in lines					
Cont	h	Total. Add lines	s 1a-1f	· · · •	141,351			
				Business Code				
æ	2a							
æ	ь							
ACe	C							
Ser	d							
E S	e	A.II I						
Program Serwce Revenue	f	All other progra	am service revenue		4,083			
	g		s 2a-2f		4,083			
	3		ome (including dividen ar amounts)		6,448			
	4		stment of tax-exempt bond					
	5	Royalties		🕨				
	_		(ı) Real	(II) Personal				
	6a b	Gross rents Less rental						
	_	expenses Rental income						
	С	or (loss)						
	d	Net rental inco	me or (loss) (i) Securities	► (II) Other				
	7a	Gross amount	(i) Securities	(II) O tilei				
		from sales of assets other						
	ь	than inventory Less cost or						
		other basis and sales expenses						
	c	Gaın or (loss)						
	d		ss)					
anne	8a	Gross income f events (not inc	ludıng 					
Other Revenue		of contributions See Part IV, lin	s reported on line 1c) ne 18 a					
the	ь	Less direct ex	penses b					
Ò			(loss) from fundraising	events 🛌				
	9a		rom gaming activities ne 19 a					
	ь	Less direct ex	penses b					
			(loss) from gamıng actı	vities				
	10a	Gross sales of returns and allo						
	ь	Less cost of g	oods sold b					
	С		(loss) from sales of inv					
		Miscellaneous	s Revenue	Business Code	Ţ			
	11a							
	b							
	c d	All other reven	ue					
	e e		s 11a-11d	▶				
	12		See Instructions .					
		rotar revellue.	Sectionactions :	· · · · •	151,882	10,531		

	550 (2013)				Page 10
	Statement of Functional Expenses				
Section	on 501(c)(3) and 501(c)(4) organizations must complete all columns All			olete column (A)	
_	Check if Schedule O contains a response or note to any line in this		 (B)	(C)	 (D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	78,261	78,261		
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	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	54,475	54,475	0	0
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)				
9	Other employee benefits				
10	Payroll taxes	5,771	5,771	0	0
11	Fees for services (non-employees)				
а	Management				
b	Legal				
c	Accounting				
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	1,314	1,314	0	0
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	2,374	2,374	0	0
13	Office expenses	15,880	15,880	0	0
14	Information technology	3,919	3,919	0	0
15	Royalties	,	,		
16	Occupancy				
17	Travel	3,257	3,257	0	0
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	·	,		
19	Conferences, conventions, and meetings	4,217	4,217	0	0
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	1,294	1,294	0	0
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	Other Personnel Expenses	8,903	8,903	0	0
b	Membership dues	1,360	1,360	0	0
С	Other Expenses	709	709	0	0
d	Organizational expenses	100	100	0	0
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	181,834	181,834	0	0
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

		Check if Schedule O contains a response or note to any line in this Pa	rt X			
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		54,736	1	33,993
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net	•		4	
	5	Loans and other receivables from current and former officers, directo employees, and highest compensated employees Complete Part II of Schedule L	of		_	
ıts	6	Loans and other receivables from other disqualified persons (as defined 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributed and sponsoring organizations of section 501(c)(9) voluntary employed organizations (see instructions) Complete Part II of Schedule L	outing employers		5	
assets	7	Notes and loans receivable, net			7	
₹		·			8	
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges	·i		9	
	10a	VI of Schedule D	10a			
	ь	Less accumulated depreciation	10b	1	10c	
	11	Investments—publicly traded securities			11	
	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		76,854	15	63,023
	16	Total assets. Add lines 1 through 15 (must equal line 34)		131,590	16	97,016
	17	Accounts payable and accrued expenses			17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability Complete Part IV of Schedule I			21	
ities	22	Loans and other payables to current and former officers, directors, tr key employees, highest compensated employees, and disqualified			21	
Liabili		persons Complete Part II of Schedule L			22	
<u>=</u>	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 the and other liabilities not included on lines 17-24) Complete Part X of	ird parties, Schedule	6.020		4 407
	26	D		6,029	25	1,407
	26	Total liabilities. Add lines 17 through 25		6,029	26	1,407
seo.		Organizations that follow SFAS 117 (ASC 958), check here ► ☐ and lines 27 through 29, and lines 33 and 34.	i complete			
<u></u>	27	Unrestricted net assets			27	
7) 60	28	Temporarily restricted net assets			28	
2	29	Permanently restricted net assets			29	
or Fund Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► complete lines 30 through 34.	▽ and			
	30	Capital stock or trust principal, or current funds			30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds		125,561	32	95,609
Ĕ	33	Total net assets or fund balances		125,561	33	95,609
<u>~</u>	34	Total liabilities and net assets/fund balances		131,590	34	97,016

Form	990	(2013)
Dar	+ VT	Pace

Page ⊥∠

Par	t XI	Reconcilliation of Net Assets				
		Check if Schedule O contains a response or note to any line in this Part XI				
1	Total	revenue (must equal Part VIII, column (A), line 12)	1		1	.51,882
2	Total		1	.81,834		
3	Rever	nue less expenses Subtract line 2 from line 1	3			-29,952
4	Net as	ssets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			. 25,561
5	Net u	nrealized gains (losses) on investments	5			.25,561
6	Donat	red services and use of facilities	6			
7	Inves	tment expenses	7			
8	Prior	period adjustments	8			
9	Other	changes in net assets or fund balances (explain in Schedule O)	9			
10	Net as	ssets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, in (B))	10			95,609
Par	t XII	Financial Statements and Reporting	•			
		Check if Schedule O contains a response or note to any line in this Part XII				. Г
					Yes	No
1		unting method used to prepare the Form 990				
2a	Were	the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	
		s,' check a box below to indicate whether the financial statements for the year were compiled or revien arate basis, consolidated basis, or both	wed or	n		
	F s	eparate basis				
b	Were	the organization's financial statements audited by an independent accountant?		2b		No
		s,' check a box below to indicate whether the financial statements for the year were audited on a sepa , consolidated basis, or both	arate			
	Γs	eparate basis				
c		s," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight review, or compilation of its financial statements and selection of an independent accountant?	nt of th	1e 2c		No
	If the Sched	organization changed either its oversight process or selection process during the tax year, explain i dule O	n			
3 a		result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	е	3a		No
b		s," did the organization undergo the required audit or audits? If the organization did not undergo the red audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493135056185

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

h

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. ▶ See separate instructions.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

			mployer ident if i	cation nu	ımber	
Uppei	r Housa	tonic Valley National Heritage Area	6-1613798			
Da	rt I			ions		
		zation is not a private foundation because it is (For lines 1 through 11, check only one box)	. j See mstract			
1		A church, convention of churches, or association of churches described in section 170(b)(1))(A)(i).			
2	Ė	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)	/(/(-/·			
3	Ė	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)	(iii).			
4	Ė	A medical research organization operated in conjunction with a hospital described in section	• •	iii). Ente	r the	
_	,	hospital's name, city, and state		,		
5	\sqcap	An organization operated for the benefit of a college or university owned or operated by a government	vernmental unit	describe	d ın	_
		section 170(b)(1)(A)(iv). (Complete Part II)				
6	\sqcap	A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).			
7	<u> </u>	An organization that normally receives a substantial part of its support from a governmental described in section 170(b)(1)(A)(vi). (Complete Part II)	l unit or from the	general	public	
8	Γ	A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)				
9	\sqcap	An organization that normally receives (1) more than 331/3% of its support from contributio	ns, membership	fees, an	d gros	S
		receipts from activities related to its exempt functions—subject to certain exceptions, and ((2) no more than	331/3%	of	
		its support from gross investment income and unrelated business taxable income (less sect	tion 511 tax) fro	m busine	esses	
		acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III	I)			
10	Γ	An organization organized and operated exclusively to test for public safety See section 509	9(a)(4).			
11	Γ	An organization organized and operated exclusively for the benefit of, to perform the function one or more publicly supported organizations described in section 509(a)(1) or section 509 the box that describes the type of supporting organization and complete lines 11e through 1 a Type I b Type II c Type III - Functionally integrated d Type	(a)(2) See sect .1h	ion 509(a	a)(3).	Check
е	Γ	By checking this box, I certify that the organization is not controlled directly or indirectly by other than foundation managers and other than one or more publicly supported organizations section $509(a)(2)$				
f		If the organization received a written determination from the IRS that it is a Type I, Type II, check this box		porting o	organı	zation,
g		Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?		ı	,	
		(i) A person who directly or indirectly controls, either alone or together with persons describ	ped in (ii)		Yes	No
		and (III) below, the governing body of the supported organization?		11g(i)		
		(ii) A family member of a person described in (i) above?		11g(ii)		ĺ

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see	organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the US?		(vii) A mount of monetary support
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

(iii) A 35% controlled entity of a person described in (i) or (ii) above?

Provide the following information about the supported organization(s)

11g(iii)

instructions

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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (d) 2012 (c) 2011 (e) 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 295,238 291,424 160,789 233,792 145,760 1,127,003 include any "unusual grants ") 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 295,238 291,424 160,789 233,792 145,760 1,127,003 4 Total. Add lines 1 through 3 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 **Public support.** Subtract line 5 from 1,127,003 line 4 Section B. Total Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 295,238 291,424 160,789 233,792 145,760 1,127,003 Amounts from line 4 Gross income from interest, dividends, payments received on 1,927 6,448 8,375 securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain 644 446 358 1,202 2,650 or loss from the sale of capital assets (Explain in Part IV) 11 Total support (Add lines 7 1,138,028 through 10) **12** Gross receipts from related activities, etc (see instructions) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 99 030 % Public support percentage for 2012 Schedule A, Part II, line 14 15 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ┢┎ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test – 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

Schedule A (Form 990 or 990-EZ) 2013 Page 3 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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 **(e)** 2013 (f) Total in) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 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 Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 c Add lines 7a and 7b Public support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11. and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)) 0 % 15 16 Public support percentage from 2012 Schedule A, Part III, line 15 16

19a 33 1/3% support tests—2013. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization
 b 33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

Section D. Computation of Investment Income Percentage

Investment income percentage from 2012 Schedule A, Part III, line 17

Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f))

17

18

0 %

17

18

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test								
Return Reference Explanation								
Pt II Line 10 Description Rebates								
Pt II Line 10	2009 644							
Pt II Line 10	2010 446							
Pt II Line 10	2011 358							
Pt II Line 10	2012 1202							
Pt II Line 10	t II Line 10 2013 0							

Schedule A (Form 990 or 990-EZ) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493135056185

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► 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. ▶ Information about Schedule D (Form 990) and its instructions is at www.irs.aov/form990.

Open to Public

ial Revenue Service	tractions is at www.irs.gov/roimsso.	Inspect	.1011
ame of the organization oper Housatonic Valley National Heritage Area		Employer identification number	er
organizations Maintaining Donor organization answered "Yes" to Form			e if the
	(a) Donor advised funds	(b) Funds and other accou	ınts
Total number at end of year			
Aggregate contributions to (during year)			
Aggregate grants from (during year)			
Aggregate value at end of year			
Did the organization inform all donors and donor a funds are the organization's property, subject to t		onor advised Yes	┌ No
Did the organization inform all grantees, donors, a used only for charitable purposes and not for the conferring impermissible private benefit?			┌ No
rt II Conservation Easements. Comple	ete if the organization answered "Yes"	to Form 990, Part IV, line 7.	
Purpose(s) of conservation easements held by th Preservation of land for public use (e g , recre Protection of natural habitat Preservation of open space	ation or education) Preservation of a	an historically important land area a certified historic structure	
Complete lines 2a through 2d if the organization leasement on the last day of the tax year	neld a qualified conservation contribution ir	n the form of a conservation	
		Held at the End of the	Year
Total number of conservation easements		2a	
Total acreage restricted by conservation easeme	nts	2b	
Number of conservation easements on a certified	historic structure included in (a)	2c	
Number of conservation easements included in (c historic structure listed in the National Register) acquired after 8/17/06, and not on a	2d	
Number of conservation easements modified, trar the tax year ▶	nsferred, released, extinguished, or termina	ted by the organization during	
·			
Number of states where property subject to conse			
Does the organization have a written policy regard enforcement of the conservation easements it hol		ndling of violations, and Yes	┌ No
Staff and volunteer hours devoted to monitoring, i	nspecting, and enforcing conservation eas	ements during the year	
Amount of expenses incurred in monitoring, inspe	ecting, and enforcing conservation easemer	nts during the year	
▶ \$			
Does each conservation easement reported on lin and section $170(h)(4)(B)(II)$?	ne 2(d) above satisfy the requirements of so	ection 170(h)(4)(B)(i)	┌ No
In Part XIII, describe how the organization report balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financi		
t III Organizations Maintaining Collect Complete if the organization answere		, or Other Similar Assets.	
If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the footr	AS 116 (ASC 958), not to report in its rev assets held for public exhibition, education	n, or research in furtherance of publ	
If the organization elected, as permitted under SF works of art, historical treasures, or other similar service, provide the following amounts relating to	AS 116 (ASC 958), to report in its revenu assets held for public exhibition, education	e statement and balance sheet	IC
(i) Revenues included in Form 990, Part VIII, lin	e 1	► \$	
(ii) Assets included in Form 990, Part X		► \$	
If the organization received or held works of art, h following amounts required to be reported under S		for financial gain, provide the	
Revenues included in Form 990, Part VIII, line 1		► \$	
		. .	
Assets included in Form 990, Part X		- ≯	

Par	t IIII Organizations Maintaining Co	llections of Art	t, His	tori	cal Tr	easur	es, or C	the	r Similar As	sets (c	ontinued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other reco	rds, ch	ieck a	any of t	the follo	wing that	are a	significant use	ofits	
а	Public exhibition		d	Γ	Loan	or excha	ange prog	rams			
b	Scholarly research		e	Γ	Other	=					
c	Preservation for future generations										
4	Provide a description of the organization's co	ollections and expla	aın how	v they	/ furthe	r the or	ganızatıor	ı's ex	empt purpose	ın	
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								ılar	┌ Yes	┌ No
Pa	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an ar				_		answere	d "Y	es" to Form 9) 90,	
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?	lian or other interm	ediary	for c	ontribu	tions or	other ass	ets r		┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	II and complete the	e follow	ving t	able		Г		Ar	nount	
c	Beginning balance							1c			
d	Additions during the year						ļ	1d			
e	Distributions during the year						ľ	1e			
f	Ending balance						ļ	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, lin	ne 21?							┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	II Check here if the	e expla	anatio	on has	been pro	ovided in I	Part)	KIII		Γ
Pa	art V Endowment Funds. Complete										
		(a)Current year	(b)	Prior y	/ear	b (c)Two	o years back	(d) ¹	Three years back	(e) Four y	ears back
1a	Beginning of year balance							+			
Ь	Contributions							+-			
С	Net investment earnings, gains, and losses										
d	Grants or scholarships										
e	Other expenditures for facilities and programs										
f	Administrative expenses										
g	End of year balance										
2	Provide the estimated percentage of the cur	rent year end balan	ice (lin	e 1g,	colum	n (a)) he	eld as				
а	Board designated or quasi-endowment 🕨										
b	Permanent endowment ►										
C	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2c sho	uld equal 100%									
За	Are there endowment funds not in the posse organization by	ssion of the organiz	zatıon t	that a	re held	d and ad	mınıstere	d for	the	Yes	No
	(i) unrelated organizations			•				•	3a		
b	(ii) related organizations		 ad on S	ched	 ule R?				3a(
4	Describe in Part XIII the intended uses of the	•				•		•			<u> </u>
Pa	rt VI Land, Buildings, and Equipme	ent. Complete if				n answe	ered 'Yes	' to	Form 990, Pa	art IV, li	ine
	11a. See Form 990, Part X, line	10.		1 ,	-) C+		(h)Cash as		(-) (Da a le con leon
	Description of property				a) Cost o sıs (ınve	estment)	(b)Cost or basis (ot		(c) Accumulat depreciation		Book value
1a	Land										
b	Buildings										
С	Leasehold improvements										
d	Equipment		•								
	Other										
Tota	al. Add lines 1a through 1e (Column (d) must e	equal Form 990 Part	X colu	mn (I	3) line	10(c)		_		I	

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives (2)Closely-held equity interests		
Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related.	Complete if the organization	n answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13.	(h) Dook walva	(a) Mathad of valuation
(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	Ion answered 'Ves' to Form 990) Part IV June 11d See Form 990 Part V June 15
	ion answered 'Yes' to Form 990), Part IV, line 11d See Form 990, Part X, line 15 (b) Book value
Part IX Other Assets. Complete if the organizat	ion answered 'Yes' to Form 990	
Part IX Other Assets. Complete if the organizate (a) Des	ion answered 'Yes' to Form 990	(b) Book value
Part IX Other Assets. Complete if the organizate (a) Des	ion answered 'Yes' to Form 990	(b) Book value
Part IX Other Assets. Complete if the organizate (a) Des	ion answered 'Yes' to Form 990	(b) Book value
Part IX Other Assets. Complete if the organization (a) Des	ion answered 'Yes' to Form 990	(b) Book value
Part IX Other Assets. Complete if the organizate (a) Des	ion answered 'Yes' to Form 990	(b) Book value
Part IX Other Assets. Complete if the organizate (a) Des	ion answered 'Yes' to Form 990	(b) Book value
Part IX Other Assets. Complete if the organizate (a) Des	ion answered 'Yes' to Form 990	(b) Book value
Part IX Other Assets. Complete if the organizate (a) Des	ion answered 'Yes' to Form 990	(b) Book value
Part IX Other Assets. Complete if the organizate (a) Des	ion answered 'Yes' to Form 990	(b) Book value
Part IX Other Assets. Complete if the organization (a) Des	ion answered 'Yes' to Form 990	(b) Book value
Part IX Other Assets. Complete if the organizate (a) Des	ion answered 'Yes' to Form 990	(b) Book value
Part IX Other Assets. Complete if the organizate (a) Des (1) Berkshire Taconic -Unendowed Fund	ion answered 'Yes' to Form 990 cription	(b) Book value 63,023
Part IX Other Assets. Complete if the organizate (a) Des (1) Berkshire Taconic - Unendowed Fund Total. (Column (b) must equal Form 990, Part X, col.(B) line	ion answered 'Yes' to Form 990 cription	(b) Book value 63,023
Part IX Other Assets. Complete if the organizate (a) Des (1) Berkshire Taconic - Unendowed Fund Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organizate (a) Des	ion answered 'Yes' to Form 990 cription	(b) Book value 63,023
Part IX Other Assets. Complete if the organizate (a) Des (1) Berkshire Taconic - Unendowed Fund Total. (Column (b) must equal Form 990, Part X, col.(B) line	ion answered 'Yes' to Form 990 cription	(b) Book value 63,023
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the ore Form 990, Part X, line 25. (a) Description of liability	ion answered 'Yes' to Form 990 cription 15.)	(b) Book value 63,023
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability Federal income taxes	ion answered 'Yes' to Form 990 cription 15.)	(b) Book value 63,023
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability Federal income taxes	on answered 'Yes' to Form 990 cription 15.) ganization answered 'Yes' to form 990 cription	(b) Book value 63,023
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability Federal income taxes	on answered 'Yes' to Form 990 cription 15.) ganization answered 'Yes' to form 990 cription	(b) Book value 63,023
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability Federal income taxes	on answered 'Yes' to Form 990 cription 15.) ganization answered 'Yes' to form 990 cription	(b) Book value 63,023
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability Federal income taxes	on answered 'Yes' to Form 990 cription 15.) ganization answered 'Yes' to form 990 cription	(b) Book value 63,023
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability Federal income taxes	on answered 'Yes' to Form 990 cription 15.) ganization answered 'Yes' to form 990 cription	(b) Book value 63,023
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the ore Form 990, Part X, line 25. 1 (a) Description of liability	on answered 'Yes' to Form 990 cription 15.) ganization answered 'Yes' to form 990 cription	(b) Book value 63,023
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability Federal income taxes	on answered 'Yes' to Form 990 cription 15.) ganization answered 'Yes' to form 990 cription	(b) Book value 63,023
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability Federal income taxes	on answered 'Yes' to Form 990 cription 15.) ganization answered 'Yes' to form 990 cription	(b) Book value 63,023
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability Federal income taxes	on answered 'Yes' to Form 990 cription 15.) ganization answered 'Yes' to form 990 cription	(b) Book value 63,023
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability Federal income taxes	on answered 'Yes' to Form 990 cription 15.) ganization answered 'Yes' to form 990 cription	(b) Book value 63,023
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability Federal income taxes	on answered 'Yes' to Form 990 cription 15.) ganization answered 'Yes' to form 990 cription	(b) Book value 63,023 ▶ 63,023
Total. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability Federal income taxes	on answered 'Yes' to Form 990 cription 15.) ganization answered 'Yes' to form 990 cription	(b) Book value 63,023 ▶ 63,023

Par		evenue per Audited Financial Stat vered 'Yes' to Form 990, Part IV, line 1		is with kevenue	per ĸ	eturn Complete i
1		r support per audited financial statements			1	
2	Amounts included on line 1 bu	it not on Form 990, Part VIII, line 12				
а	Net unrealized gains on invest	ments	2a			
b	Donated services and use of f	acılıtıes	2b			
c	Recoveries of prior year grant	s	2c			
d	Other (Describe in Part XIII)		2d			
е	Add lines 2a through 2d .				2e	
	Subtract line ${f 2e}$ from line ${f 1}$.				3	
	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1				
а	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII)		4b			
С	Add lines 4a and 4b				4c	
	Total revenue Add lines 3 and	d 4c. (This must equal Form 990, Part I, line	12).		5	
art		xpenses per Audited Financial Sta		nts With Expense	s per	Return. Complet
		swered 'Yes' to Form 990, Part IV, line			1 .	T
	· ·	raudited financial statements			1	
		t not on Form 990, Part IX, line 25	1 -	I		
3		acilities	2a		_	
b			2b		_	
c			2c			
d	Other (Describe in Part XIII)		2d		4 _	
е	_				2e	
					3	
		0, Part IX, line 25, but not on line 1:	1	I		
a	·	uded on Form 990, Part VIII, line 7b			_	
b			4b		4	
C					4c	
		nd 4c. (This must equal Form 990, Part I, lin	e 18)		5	
	Supplemental Inf					
art		Part II, lines 3, 5, and 9, Part III, lines 1a, lines 2d and 4b, and Part XII, lines 2d and				de any addıtıonal
	Return Reference	Explanation				

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule I

(Form 990)

DLN: 93493135056185

OMB No 1545-0047

2013

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

	Complet	e if the organization	answered "Yes," to Form	1 990, Part IV, line 21 or	22.	-	
Department of the Treasury	-	_	Attach to Form 990				pen to Public
Internal Revenue Service	► Information	about Schedule I (Fo	orm 990) and its instruct	ions is at <u>www.i<i>rs.gov/</i></u>	<u>form990</u> .		Inspection
Name of the organization Upper Housatonic Valley Natio	onal Heritage Area					Employer identification	on number
	mar remage Area					06-1613798	
Part I General Infor	mation on Grants and	Assistance				•	
the selection criteria use 2 Describe in Part IV the o	aintain records to substantia ed to award the grants or ass organization's procedures for	r monitoring the use o	f grant funds in the Unite	ed States			√ Yes ┌
	her Assistance to Gov IV, line 21, for any recip						es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of groot assistance

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.								
(a)Type of grant or assistance	(b)Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance			

			-			
Part IV	Supplemental Informa	tion. Provide the info	ormation required in Pa	rt I, line 2, Part III, c	olumn (b), and any other a	ddıtıonal ınformatıon.

Return Reference Explanation

Schedule I (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS

SCHEDULE O

As Filed Data -

DLN: 93493135056185

OMB No 1545-0047

2013

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

Department of the Treasury
Internal Revenue Service

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

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization
Upper Housatonic Valley National Heritage Area

06-1613798

990 Schedule O, Supplemental Information

Return Reference	Explanation	
Pt VI, Line 19	Copies are available upon request	
Pt VI, Line 11b	Copies are available upon request	
Pt VI, Line 12c	Policy is reviewed annually	
Pt VI, Line 15a	officers are not compensated	

BUDGET SUMMARY				
Category	NPS Funds	Cooperator/Recipient Match/Cost Share	t Total	
Personnel	\$69,100	\$69,100	\$138,200	
Fringe Benefits	\$10,120	\$10,120	\$20,240	
Travel	\$9,760	\$9,760	\$19,520	
Equipment	\$1,990	\$1,990	\$3,980	
Supplies and Materials	\$13,340	\$13,340	\$26,680	
Contractual Services	\$25.500	\$25,500	\$51,000	
Construction	\$0	\$0	\$0	
Other *	\$20,190	\$20,190	\$40,380	
Total Direct Charges	\$150,000	\$150,000	\$300.000	
Indirect Charges	\$0	\$0	\$0	
TOTAL COSTS	\$150,000	\$150,000	\$300,000	

* Other includes

Planning and development, including direct assistance to municipal governments for the purpose of clarifying rights-ofway along public lands, research of public records, surveys and historic documents, for the creation of a public nonmotorized trail through CT State Forest in cooperation with CT Dept. of Fnergy and Environmental Protection. The proposed trail abits private lands, and questions of accessibility have been raised as the town road that previously connected these assets has been previously abandoned, and rights-of-way are being questioned. Several egress options have been articul, ted through public scoping, and regional natural-resource protection organizations have been engaged as the proposed trail and some of these egress options are in close proximity to the Housatonic River.

Research is ongoing as Housatonic Heritage explores the expansion and revision of educational initiatives and integrating heritage programming into the proposed 'Common Core' curriculum for public schools. The Commonwealth of Massachusetts and State of Connecticut will participate as the NHA develops additional educational programming specifically aimed at satisfying core requirements.

Ongoing research of Native American Heritage as it relates to one section of the proposed HouBike Trail from West Cornwall to Cornwall Bridge. This section of trail is along or part of what was a major Native American trail known by colonists as the Paugussett or Berkshire Path (Spiess, 1934). It traversed from present Norwalk to Canaan in Connecticut then up to Stockbridge Massachusetts, following the east bank of the Housatonic from New Millord at least as far as Sheffield. It was part of a network of major and minor paths (see Maps) connecting Native American communities and a number of distinct tribes. While preliminary, we hope to engage the Institute of American Indian Studies and the Berkshire Museums we prepare a program of interpretation for this particular segment of the trail

Licensing fees associated with the use of copyrighted materials and images plus the writers' stipend in the Housatonic Heritage 'Writer in Residence' proposed for Herman Melville's 'Artowhead' and Edith Wharton's. The Mount' in 2014.

Additional 'other costs are - professional development fees associated with the creation of smartphone APP, and research associated with creating the waterpower study in the Upper Housatonic Valley

Note on Personnel costs and contractual services:

Personnel costs in the 2014 Work Plan and Budget are primarily attributed to the 'Heighten Appreciation for Our Heritage' portion of the plan. In some cases this work is research-intensive and consumes staff time in writing, verifying and publishing data. For instance—the annual Heritage Walks requires months of staff time to prepare and promote, aid are extremely labor-intensive. Also—the proposed Western New England Greenway and Sharon-Salisbury bike route projects will require riding the routes, logging every detail of turns and distances, relevant heritage sites (and associated research), photography and

proofreading. Ongoing development of the Literary Heritage Trail is anticipated to involve extensive organizational time. Much of the expense is attributable to project-scoping, developing advisory and working committees, public outreach, etc. The water-power research project will eventually be a multi-year research project.

Contractual Services costs are primarily associated with the Masters' level teachers course (Heritage Educational & Stewardship Development Initiatives section), and the costs associated with the needed faculty and an accredited educational institution that administers the core components of the course evaluates teachers' lesson plans and grants credits at the conclusion. Additional contract costs are associated with professional water guides and equipment for the free 'public interpretive paddling excursions (Heighten Appreciation for Our Heritage section). The use of these professional guides and the services of Housatonic Valley Association considerably increases our on-the-water interpretive capability, reduces our liability exposure, and allows us to create this unique program. The services of a professional development company will serve to move the WLF. Du Bois NHS project rapidly toward becoming self-sufficient (Preserve & Enhance Our Heritage section). Our intent is to raise the visibility of this project (and the broad support that we need) and to 'spin it off' as its own non-profit as soon as possible.

ATTACHMENT - A 2014 Work Plan and Budget Upper Housatonic Valley National Heritage Area

Project Name:

Heritage Educational & Stewardship Development Initiatives

Project Costs

Federal: \$ 52,660 Non-federal: \$ 52,660 Project Total: \$ 105,320

Project Description:

Provide educational programming for historic, cultural and natural resource preservation and stewardship, including the development of 'Writer In Residence' program, classroom curricula, field trips, professional development for teachers and immersion courses for residents, teachers and students. Portions of this programming may be broadened and adapted as the Management Plan is finalized and adopted

These initiatives were identified in the (draft) Management Plan as methods to increase stewardship of heritage resources, build capacity among history organizations, and increase awareness of the region's rich heritage by residents and visitors.

- The Writer-in-Residence project will be reviewed and revamped as we seek ways to integrate into the curriculum of area public schools. Expansion plans include new programs at Berkshire Historical Society / Arrowhead (home of Herman Melville), Edith Wharton's 'The Mount' and for expansion into a 'Playwright In Residence' program.
 - The Housatonic Heritage Writers Residency at Arrowhead, Herman Melville's home in Pittsfield, was a pilot project that attempted to deal with both of these situations. Implemented in 2012, Housatonic Heritage and Arrowhead selected a writer to use Melville's study for her work, and she and Housatonic Heritage worked with a Pittsfield High School teacher, who invited the writer to the school to lead writing workshops on Melville
 - o In the process of piloting that project, we learned about logistical issues that may come up, and are ready to try a similar but slightly different approach at the Mount. The Mount has significant experience with school groups, and has even begun to open the house to writers, and so together, Housatonic Heritage and the Mount can make a more complete program.

2014 will be a focused on planning and developing a complete program, including particular details of working with schools

- Upper Housatonic Valley Experience is a part of the core educational programming, and is delivered through various means, including a partnership with Massachusetts College of Liberal Arts (Masters' level credit-granting institution), Berkshire Community College (provides logistical support and evaluates lesson plans) and numerous heritage-based organizations that host events.
- Alliance of History Organizations is an ongoing Housatonic Heritage program that provides education, expertise and other means to assist in the developmental capacity of area history organizations. Additional partnerships and contracted services are provided through the New England Museum Association and the Connecticut League of History Organizations (both institutions provide educational content) for the purpose of delivering high-quality materials to area non-profits for the purpose of building audience, increasing interpretive collaborations, institutional development, public outreach and more. Public (free and open to) presentations are provided at historic Bascom Lodge atop Mount Greylock (Appalachian Tiail) by trusted institutions and heritage organizations.
- Bringing CT's Early Iron Industry to School Smartphone App & Educational Curricula Project In partnership with the Friends of Beckley Furnace (CT's only industrial monument), CT's Regional District 1 Schools, and the CT humanities Council, increase the number and broaden the ages of people visiting sites associated with our early iron industry 2104 plans are to recruit multiage teams (general community members plus an area historian) to research and document the lives of the charcoal, iron and other workers who made this industry possible. The resulting worker profiles will build personal interest in the story and make it more likely that people will want to make visits to the worksites. Then develop easy -to-use technology, such as a Smartphone Apps, to make it fun and engaging for people to navigate the Iron Heiitage Trail and learn about the industry and its workers once at the sites.
 - O Through a matching planning grant from CT Humanities Council, this project will underwrite curriculum and program development built around the requirements of the new Common Core national education standards. Beckley Furnace will be the focal point for this 'field learning'. The goal create interesting, interdisciplinary, interactive programming at the Furnace site for grade levels 5 through 8, and 11. We believe that this collaborative project will serve students and educators, as well as build interest in and audiences for local historical sites among school-age youth and their families.
- Partner with Berkshire Community College (BCC) to develop an educational model for creating digital / archived oral histories the Oral History Project. The concept is to collect and protect these stories, and then utilize the stories told to inspire the next generation.
 - o The proposed Oral History Project will be under the auspices of the BCC Career Center, as a career education project, but with collaboration of a history professor others. The initial focus will be on recording stories of people who have done many different kinds of work in the region, and have had strong affiliations with BCC (early faculty early students to start with)

- o Initially the Oral History Project will center on the BCC Environmental Sciences, in part because that was where the inspiration came from, and also because a couple of older faculty are available, as well as alumni. Current students will also be interviewed, and industry and arts focus will follow.
- o The initial committee will be comprised of a librarian to assist with archiving methodology, competent technical assistance from other BCC departments to assist with the intricacies of digital video recording, storing, and using, and a historian
- There is proposed to be a small cohort of students working on the Project, likely paid as interns. It is envisioned that BCC students would reach out to the local schools and teach younger students how to do oral history interviews, as part of a service learning project

Project Partners:

- Massachusetts College of Liberal Arts (Credit-granting institution)
- Berkshire Community College (Provides faculty support, evaluates lesson plans)
- Bascom Lodge (host facility for public presentations atop Mount Greylock)
- Connecticut League of History Organizations (provides faculty and educational materials)
- New England Museum Association (provides educational materials)
- Berkshire Historical Society (provides writer-in-residence site, programming)
- 'The Mount', estate of Edith Wharton
- Putsfield Public Schools (provides faculty time)
- CT Humanities Council
- Friends of Beckley Furnace

Projected Timetable:

The Upper Housatonic Valley Experience (teachers' course) runs throughout the summer months, culminating in final presentations by the teachers, and grading / awarding of credit. Educational programming for area schools will begin with the fall semester – on or about September 3, with full implementation to occur in the classroom during the fall and spring semesters (and ongoing). Public seminar series at Bascom Lodge runs from May 31 to October 12 (weekly). History organization educational series typically runs through Memorial Day Weekend, then begins again after Columbus Day Weekend. 'In Residence' Programs will be planned during the fall academic semester, with implementation planned for spring 2015. Oral History Project will start in spring 2014 and commence again in fall 2014. The industrial heritage Smartphone App and educational curricula will be developed over an 18-month period, with implementation in fall 2015.

Breakdown of Project Costs by Category:

Heritage Educational & Stewardship Development Initiatives			
	Non-federal	Federal	Totals
Personnel	\$19,600	\$19,600	\$39,200
Fringe Benefits	\$3,860	\$3,860	\$7,720
Travel	\$3,640	\$3,640	\$7,280
Equipment	\$1,180	\$1,180	\$2,360
Supplies	\$7,110	\$7,110	\$14,220
Contractual	\$8,550	\$8,550	\$17,100

Construction	\$0	\$0	\$0
Other*	\$8,720	\$8,720	\$17.440
Total Direct Costs	\$52,660	\$52,660	\$105,320
Indirect Costs	\$0	\$0	\$0
Total Project Costs	\$52,660	\$52,660	\$105,320

^{*}Other Design & printing costs that are outsourced

Project Name:

Management Plan

Project Costs:

Federal: \$ 7,530 Non-federal: \$ 7.530 Project Total: \$ 15,060

Project Description:

Finalize and adopt the Management Plan, to describe, in detail, the work plan for the next 5- and 10-year period. Ongoing tasks include working with the consulting services of a qualified consultant and work with same to finalize and submit to DOI a final draft Management Plan. Additional expenses will be incurred through the publication, public comment, design and printing, and final dissemination of the completed management action plan.

Additional expenses to be incurred as the Management Plan is distributed to partner organizations, and implementation of the actions described therein are coordinated with those other organizations, agencies and municipalities.

Housatonic Heritage will use several instances of contracted services:

- Elizabeth Sharpe, consultant to the management planning process
- Design and printing and distribution services

Project Partners:

No project partners are anticipated, other than the consultant noted above and the heritage partners who will contribute to the contents of the Plan.

Projected Timetable:

It is anticipated that the draft plan will be completed and submitted for review by May, 2014. Design and printing will be completed by July 1, 2014. Distribution and implementation meetings will be held during the fall, 2014.

Breakdown of Project Costs by Category:

Management Plan				
	Non-federal	Federal	Totals	
Personnel	\$2,100	\$2,100	\$4,200	
Fringe Benefits	\$620	\$620	\$1,240	

Travel	\$790	\$790	\$1,580
Equipment	\$0	\$0	\$0
Supplies	\$850	\$850	\$1,700
Contractual	\$1,700	\$1,700	\$3,400
Construction	\$0	\$0	\$0
Other*	\$1,470	\$1,470	\$2,940
Total Direct Costs	\$7,530	\$7,530	\$15.060
Indirect Costs	\$0	\$0	\$0
Total Project Costs	\$7,530	\$7,530	\$15,060

^{*}Other Design & printing costs that are to be outsourced.

Project Name:

Heighten Appreciation for Our Heritage

Project Costs:

Federal: \$ 73,710 Non-federal: \$ 73,710 Project Total: \$ 147,420

Project Description:

Heighten appreciation for the natural, cultural, and historic assets of the region through research and interpretive materials, signage and accessibility. Portions of this programming may be broadened and adapted as the Management Plan is finalized and adopted. This program is outlined within the Management Plan and was identified as a primary objective of the heritage area during public scoping sessions.

- Partner with the City of Pittsfield (Office of Cultural Development), Berkshire Historical Society, National Endowment for the Arts and Mass Cultural Council in a regional 'Art+Industry' initiative, which runs from June to October. Programming includes
 - June Contemporary photography show of images taken at factories and businesses in Pittsfield by renowned local photographer Scott Barrow at the Lichtenstein Center for the Arts
 - O August. A juried show of work inspired by industry opened to artist in the Northeast, in collaboration with the Berkshire Art Association
 - August 17th An Art+Industry-themed 3rd. Thursdays providing access to arts and STEM (science, technology, engineering and math) activities for youth and families
 - October An installation at the Lichtenstein Center for the Arts entitled Work+Home, on worker housing, featuring a model of a worker housing complex designed by Frank Lloyd Wright for Pittsfield that was never built
 - O The Berkshire County Historical Society is one of our major partners and they will be hosting a historic photography exhibits, historic play performances inspired by the history of mills in the Berkshires, a straw sculpture of working men, and a very fun art exhibit where students and artists will be asked to paint and other wise decorate classic worker lunchboxes for a show and auction.
 - Ongoing, public art installations in downtown Pittsfield with Artscape A new oral history project capturing General Electric's community legacy in the Berkshires, through

- interviews with former employees and their families An artist-designed lightpole banner series on Merrill Road which goes past the former GE complex, now housing Sabic and General Dynamics.
- We have commissioned a nationally known film researcher and archivist Rich Remsberg (who happens to live in North Adams) to collect early industrial and manufacturing films from around the Berkshires for a film night.
- Publish the Sharon-Salisbury cycling route map that includes five loop trails off of the central HouBike Trail—It will be a companion piece to the Kent Bike Routes and the HouBike Trail brochures that were published recently. The www.HouBikeWalk org website will be updated to include these new cycling routes.
- Literary Heritage Trail build upon the work that the new Advisory Council has started exploring the concept of a regional literary heritage interpretive program. The Council includes representation from Edith Wharton's The Mount and Herman Melville's Arrowhead, plus representatives of interested local libraries (including the Hotchkiss Library in Sharon, and the Scoville Library in Salisbury is the country's oldest public library). Additional representatives may be included from the English or American Literature Departments from the local high schools and colleges (such as Williams), as well as interested Language Arts Coordinators for elementary schools and middle schools so that we can encourage young people to love their literary heritage.
- Partner with Housatonic Valley Association (HVA) to offer an expanded (second annual event) interpretive Paddle Trips on the Housatonic River. The partnership will organize and promote a series of five easy, flat water canoe trips that are free and open to the public throughout Summer 2014. Themes may include birding on the Housatonic, flora and fauna of the river valley, geologic features, industrial history paper, iron, etc.) and other heritage sites that may best be observed from the river. The program will utilize trained, professional canoe guides, and contract with naturalists and historians for interpretive presentations.
- History Alliance Program continue working with history partners to promote capacity-building
 and to knit together a better understanding of the region's history through collections-cataloguing
 and sharing, interpretive projects, public outreach. Focus for 2014 convene Alliance members
 around the digital collections concept, for the purpose of digitizing and sharing collections on a
 common software platform.
- Western New England Greenway Continue work on mapping, publishing and advocating for the creation of the Western New England Greenway (WNEG), a regionally significant, contiguous network of over-the-road bike routes that will connect New York City to Montreal, linking with the East Coast Greenway at Norwalk, CT and the Route Verte in Quebec Province, Canada The WNEG is being created to enhance sustainable transportation and recreation opportunities by linking the communities along the route in the states of Connecticut, Massachusetts and Vermont

In 2014 there will be four working groups, comprised of representatives from the three states through which the WNEG passes

O Bike Tour Committee will organize and execute a second annual end-to-end public relations 'ride' of the entire Greenway, stopping at key locations to promote the route, meet with federal, state and local officials, and provide public relations opportunities

- o Mapping Committee will utilize the data from the 2013 ride to update the cue sheets and maps with better routing, additional details
- US Bicycle Routes Committee will work with organizations and municipalities in the three states toward achieving designation as a US Bicycle Route
- Public Relations group will develop press releases, meeting times / days with officials, and photo opportunities during the 7-day 2014 ride of the route.
- O Heritage committee will develop lists, locations and descriptions of heritage sites along the WNEG, for inclusion in the map brochures and website
- Conclude a two-year study of 18th and 19th century waterpower in the Housatonic River Valley. The survey has been methodically looking at every dam site on the river from Hinsdale, Mass, to Long Island Sound. It has looked at the growth of water-powered industry from wood-related mills (saw, shingle) to agrarian and small rural industry (grist, plaster, fulling, potash, cider) to specialized mills (marble saws, distilleries, tanneries) to iron-related shops (bloomery forges, iron furnaces) to the advent of large-scale industry (paper, textile). In it's final diat it will discuss the mechanics of dam construction and the dynamics of water wheel installation and mill operation). Finally, it will look at the advent of steam and electric power.

The survey examines some 33 dam sites on the Housatonic River, plus takes a large sampling of small industries on tributary streams. It includes expanded profiles of particularly interesting industrialists such as Zenas Crane of Dalton or Horatio Ames of Salisbury. It looks at scoundrels such as Horace C. Day, who used Charles Goodyear's rubber patent without paying royalty. It also looks at inventive genius William Stanley, who developed the first practical means of transmitting alternating-current electric power.

Housatonic Heritage will use several instances of contracted services

- Design services for physical trails (not yet chosen)
- Brochure Design by Ames Working Designs
- Brochure printing by US Press
- Website design by Manning Design
- Paddling guides and interpretive materials by Housatonic Valley Association
- Research and narrative for Water Power by Bernie Drew

Project Partners:

Primary partners on these projects will provide expertise, research and narrative for interpretive projects described above.

- Champlain Valley National Heritage Partnership
- Berkshire Regional Planning Commission
- Northwest CT Council of Governments
- New Milford, Town of
- Central CT State University
- Housatonic Valley Association
- Crane Museum of Papermaking
- Berkshire Museum
- City of Pittsfield, Office of Cultural Development

Projected Timetable:

Projects described here (except for the Western New England Greenway and the Water Power projects) are anticipated to be well underway and / or completed by December 31, 2014. Western New England Greenway is a multi-year collaboration with the partners described above. The Water Power project is a two-year research project, anticipated to be completed by December 31, 2014.

Breakdown of Project Costs by Category:

Heighten Appreciation for Our Heritage				
	Non-federal	Federal	Totals	
Personnel	\$41,450	\$41,450	\$82,900	
Fringe Benefits	\$4,520	\$4.520	\$9.040	
Travel	\$3,690	\$3.690	\$7,380	
Equipment	\$420	\$420	\$840	
Supplies	\$4,280	\$4,280	\$8,560	
Contractual	\$11,150	\$11,150	\$22,300	
Construction	\$0	\$0	\$0	
Other*	\$8,200	\$8,200	\$16,400	
Total Direct Costs	\$73.710	\$73,710	\$147,420	
Indirect Costs	\$0	\$0	\$0	
Total Project Costs	\$73,710	\$73,710	\$147,420	

^{*}Other Mapping / GIS, interpretive materials design & printing costs that are outsourced

Project Name:

Preserve & Enhance Our Heritage

Project Costs:

Federal: \$ 16,100 Non-federal: \$ 16,100 Project Total: \$ 32,200

Project Description:

Preserve and enhance the region's history and historical resources, natural resources, cultural and artistic resources. Such preservation and enhancement projects may be augmented to support implementation of the Management Plan, and are expressly authorized within the Plan as implementation strategies identified through the public scoping process.

Projects include:

- Continue work on the WEB Du Bois National Historic Site program. The 2014 advocacy and public outreach effort will include expansion of Niagara Circle, with the ultimate goal of achieving the fundraising goal of \$500K, and hiring an Executive Director.
- In cooperation with UMass Amherst and the Du Bois National Historic Site program, planning is underway for an invitational "ribbon cutting" at the WEB Du Bois Homesite (a National Historic Landmark) followed by a public presentation at the First Congregational Church of Great Barrington. This event will introduce key legislators to the site, and to provide media an

opportunity to learn more about the National Historic Site project. As part of the public event there will be a plaque dedication for the Homesite as being part of the Upper Housatonic Valley African American Heritage Trail.

Project Partners:

Primary partners on these project will provide expertise, research and narrative for interpretive projects described above.

- University of Massachusetts Amherst
- Friends of Du Bois Homesite

Projected Timetable: All events will be undertaken and completed by December 1 2014

Breakdown of Project Costs by Category:

Project Title				
	Non-federal	Federal	Totals	
Personnel	\$5,950	\$5.950	\$11,900	
Fringe Benefits	\$1.120	\$1,120	\$2,240	
Travel	\$1.640	\$1,640	\$3,280	
Equipment	\$390	\$390	\$780	
Supplies	\$1,100	\$1.100	\$2,200	
Contractual	\$4,100	\$4,100	\$8,200	
Construction	\$0	\$0	\$0	
Other*	\$1,800	\$1,800	\$3,600	
Total Direct Costs	\$16,100	\$16,100	\$32,200	
Indirect Costs	\$0	\$0	\$0	
Total Project Costs	\$16,100	\$16,100	\$32,200	

^{*}Other Mapping / GIS, trail design, brochure design & printing costs that are outsourced