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Form **990**

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. ➤ Information about Form 990 and its instructions is at www.irs.gov/form990.

2013

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

Open to Public Inspection

Α	For the 2	013 calendar year, or tax year beginning $10/01$, 2013, and en	ding	9/30	,	2014
В	Check if ap	olicable C		D Employ	er identific	ation Number
	Addres	s change GEORGIA RIVER NETWORK, INC		58-	24041	12
	Name	change 126 SOUTH MILLEDGE AVENUE E3		E Telepho		
	Initial r	ATHENS CA 30605-5666		(70	6) 54	9-4508
	Termin			(,0	0, 54	7 4300
	H	ed return		G Gross r	<u>+-</u> \$	651 552
	\vdash		H(a) le	this a group return		651,553.
	Applica	' - 1	1			H
		SAME AS C ABOVE	if'	e all subordinates 'No,' attach a list	(see instri	uctions) Tes Ho
<u> </u>		pt status X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 52				
J	Websit	***************************************	1.4-7	oup exemption n		
K		organization X Corporation Trust Association Other► L Year of fo	ormation: 1	998 M s	State of leg	al domicile GA
Pa		Summary				
						<u>WORKING TO</u>
ġ		<u>ISURE A CLEAN WATER LEGACY BY ENGAGING AND EMPOWER</u>			<u>CO PRO</u>	DTECT,
Activities & Governance	<u>R</u> I	STORE AND ENJOY OUR RIVERS FROM THE MOUNTAINS TO S	THE CO	<u> </u>		
Ę			. 			
Š		eck this box If the organization discontinued its operations or disposed of	more than	25% of its n	et assets	
9		mber of voting members of the governing body (Part VI, line 1a)	•		3	13
S	4	mber of independent voting members of the governing body (Part VI, line 1b)			4	13
ij		al number of individuals employed in calendar year 2013 (Part V, line 2a) al number of volunteers (estimate if necessary)			5	
cţi	l .	al unrelated business revenue from Part VIII, column (C), line 12			7 a	70
A		tunrelated business taxable income from Form 990-T, line 34			7 a	0.
	D IVE	t differenced business taxable income from 1 offit 990-1, line 54		Prior Year	7.5	
	8 Co	ntributions and grants (Part VIII, line 1h)			27	Current Year
ē		ogram service revenue (Part VIII, line 2g)		420,8		364,880.
Ē		estment income (Part VIII, column (A), lines 3, 4, and 7d)		201,9		273,990.
Revenue		ner revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			57.	51.
_		al revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,3		3,535.
		ants and similar amounts paid (Part IX, column (A), lines 1-3)		625,1		642,456.
				50,0	00.	40,000.
		nefits paid to or for members (Part IX, column (A), line 4)		200 1	0.5	250 540
S	15 Sa	aries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		338,1	25.	359,542.
Expenses	16 a Pro	fessional fundraising fees (Part IX, column (A), line 11e)				
ę.	b Tot	al fundraising expenses (Part IX column (0)), line 25) ► 101, 80	8.			
ũ	17 Oth	er expenses (Partilly, column (A); mes 11a-11d, 11f-24e)		263,2	17.	301,951.
	18 Tot	al expenses, Add lines 13-17 (must equal) art IX, column (A), line 25)		651,3		701,493.
		venue less expenses subtrack habita from ine 12		-26,1		-59,037.
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a se	20 Tol	al assets (Part-X, time 16) 777 That	Degi	282,8		301,692.
₽ B	21 Tol	al liabilities (Patro-fine 26)		1,0		61,165.
Net Assets Fund Balan	22 Ne	assets or fund balances. Subtract line 21 from line 20				· · · · · · · · · · · · · · · · · · ·
				281,7	03.1	240,527.
		Signature Block				
		perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the ation of preparer (other than officer) is based on all information of which preparer has any knowledge	best of my kno	owledge and belief,	it is true, c	orrect, and
}				1.3	٠٠	2015
) Seir	***	Signature of officer		Date		2013
Sig He	jii re	GLENN DOWLING	EVI		TDECT	rop.
>		Type or print name and title	- בעו	ECUTIVE I	JIKECI	IOR
1'		Print/Type preparer's name Preparer's signature . Date		Chest	I, PT	- IN
. <u></u>			9 19	Check	ן "נ_	
Pai		TRACY M. MATHEWS JACQUIL Mathewa 1-1	1-1-1	self employe	ed P	00911020
	eparer	Firm's name TURNER AND PATAT, P.C.				
_C US	e Only	Firm's address 1165-A CEDAR SHOALS DR		Firm's EIN		L858240
=-3		ATHENS, GA 30605-3592		Phone no	(706)	354-1212
€May	the IRS	discuss this return with the preparer shown above? (see instructions)				X Yes No
DA	A F D	nonwork Deduction Act Notice, see the consects instructions				Farm 000 (2012)

		tatement of Pr	roaram (Santias Ass		monto						0411		<u>.</u>	age Z
Par			-		•		-								
		heck if Schedule C			note to any	line in this F	art III		 .						<u> </u>
1,	_	escribe the organiz													
		IA RIVER NE													
	EMPOV	ERING GEORG	IANS TO	PROTECT,	RESTO	RE AND E	NJOY	OUR RI	VERS E	ROM T	HE I	MOUN	TAI	ĪS T	o
		OAST.													
2	Did the	organization undert	take any si	gnificant progr	am service	s during the	vear whi	ch were r	ot listed	on the pr	ior			_	
		0 or 990-EZ?	•	, ,			,					П	Yes	X	No
		describe these nev	v services	on Schedule C								Ш	103	Δ	110
3		organization cease				naac in how	ıt condu	oto ony n		00110002			V	ਹਿ	M-
3					iiiicarii cria	nges in now	it condu	cis, any p	rogram s	ervices:		Ш	Yes	Δ	No
		describe these cha	_												
4	Section	the organization's 501(c)(3) and 501(c he total expenses,	c)(4) orgar	lizations and se	ection 4947	(a)(1) trusts	are requ	iired to rei	ogram ser port the a	rvices, as imount o	s mea f gran	asured its and	by ex d alloc	pense ations	es to
4 a	(Code:) (Expe	nses \$	319,3	77. includ	ling grants of	f \$)	(Revenu	ıe \$	3	38	6,29	98.)
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1. Is the organization described in section 501(c)(3) or 494/(a)(1) (other than a private foundation? If "Yes," complete Schedule Schedule of Contributors (see instructions)? 2. Is the organization required to complete Schedule B. Schedule of Contributors (see instructions)? 3. In the organization required to complete Schedule B. Schedule of Contributors (see instructions)? 3. In the organization as general transfer or indesting political campaign activities, or have a section 501(n) election in effect during the law year? If "Yes," complete Schedule C, Part II. 5. In the organization as section 501(c)(5), 501(c)(5), or 501 (c)(5) organization that receives membership dues, seascestines, or immal amounts is a distinct of intervente Procedure R-197 If "Yes," complete Schedule C, Part III. 5. In the organization analism any donor advised funds or any similar funds or accounts for which donors have the right to provide advise on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II. 7. In 2 Did the organization maintain collections of verification of the second organization receive or hold a conservation easement, including easements to preserve open space, the environment, instructional areas, or historic shockness? If "Yes," complete Schedule D, Part III. 8. In 2 Did the organization maintain collections of verification of the second organization or collections of verification organizations received in the second organization program and amounts in listed in Part X, or provide credit counseling, debt management, credit repair, or debt negoliation services? If "Yes," complete Schedule D, Part VIII. 10. Did the organization report an amount for land, buildings and equipment in Part X, line 10 Part X, virtually a report and amount for land, buildings and equipment in Part X, line 10 Part X, line 1		`		Yes	No
3 Did the organization in graph in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If Yes, complete Schedule C, Part II 4 Section 501(x)3 organizations. Did the organization engage in lobbying activities, or have a section 501(th) election in effect during the tax year? If Yes, complete Schedule C, Part III 5 Is the organization as section 501(x)4), 501(x)50, 6701(x)50, 6	۱،	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	х	
for public office? If Yes,' complete Schedule C, Part II Section 501(X3) organizations, Dot the organization engage in lobbying activities, or have a section 501(f) election in effect during the law year? If Yes,' complete Schedule C, Part II. S the organization an action 501(c)(f),	2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
in effect during the fax year? If Yes,' complete Schedule C, Part II. S Is the organization a section \$60((c)), 501((c)), 501	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		х
assessments, or similar amounts as defined in Revenue Procedure 98-19? If Yes,' complete Schedule D, Part III 5	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	Х	
to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part II 7 Did the organization receive or hold a conservation easement, including assements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part III 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' and organization areas, or historical treasures, or other similar assets? If 'Yes,' and organization for amounts not listed in Part X, inne 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, inne 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, inne 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, inne 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, inne 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, inne 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, inne 12 for Part X, inne 10 for Investments — other securities in Part X, inne 10 for Investments — other securities in Part X, inne 12 for Invest, complete Schedule D, Part X III 11	5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III.	5		Х
8 Dut the organization report an amount for investments — other securities in Part X, line 10? If 'Yes,' complete Schedule D, Part III X 9 Dut the organization manufacture of the following questions is visible to organization and the organization report an amount of part X, in provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV 10 Did the organization directly or through a related organization, hold assets in temporarily restricted endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V 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 VI 11 If the organization directly or through a related organization, hold assets in temporarily restricted endowments, or years and the organization report an amount for investments — other securities in Part X, line 10? If 'Yes,' complete Schedule D, Part VII 12 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 13 Did the organization report an amount for other assatism 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 VII 14 Did the organization report an amount for other assatism in Part X, line 25? If 'Yes,' complete Schedule D, Part X 15 Did the organization insparate or consolidated financial statements for the tax year? If 'Yes,' and if the organization is parate or consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization asset of Wor to Ine 12a, then completing Schedule D, Part XX in AX III is phonal 15 Did the organization aschool described in	6	to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D,	6	;	Х
possible Schedule D. Part III 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 Did the organization or control or a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If Yes, complete Schedule D, Part VV If If the organization is answer to any of the following questions is Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If Yes, complete Schedule D, Part VIII 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 VIII d 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 XIII If 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 XIII If Did the organization report an amount for other liabilities in Part X, line 25? If Yes, complete Schedule D, Part X If Did the organization or botan asparate, independent audited financial statements for the tax year? If Yes, and if the organization included in consolidated financial statements for the tax year? If Yes, and III X If Did the organization included in consolidated, independent audited financial statements for the tax year? If Yes, and III X If Did the organization included in consolidated, independent audited financial statements for the tax year? If Yes, and III X If Did the organization mention in the I2a, then completing Schedule D, Par	7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? "I" Yes, complete Schedule D, Part V 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 11, VIII, VIII, IX, or X as applicable. a Did the organization report an amount for index buildings and equipment in Part X, line 10? If Yes, complete Schedule D, Part VIII D, Part V 11, VIII, IX, or X as applicable. b Drift 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 VIII To 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 To 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 VIII To 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 XI (In 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 XI (In Did the organization separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? If Yes, complete Schedule D, Part XI and XII	8		8		Х
permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V' 11 If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable. a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI 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 d 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 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 VIII d Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X 11	9	for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation	9		X
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lines 1c and 8a? If 'Yes,' complete Schedule G, Part II 18	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		Х
complete Schedule G, Part III 20 a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H 20 X 20 X	18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		X
	19		19		X
b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 a	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
	_ k) If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Form 990 (2013) GEORGIA RIVER NETWORK, INC

Part IV Checklist of Required Schedules (continued)

			, 03	110
21،	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	х	
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		Х
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		Х
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25a	24a		Х
t	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		
•	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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		Х
ŀ	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		Х
	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		Х
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		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).			
a	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a]	X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		_x
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		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
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		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Χ
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	İ	Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	
BAA		Form	990 (2	2013)

orm	990 (2013) GEORGIA RIVER NETWORK, INC	58-240411	.2	P	age
Par	TV Statements Regarding Other IRS Filings and Tax Compliance				
	Check if Schedule O contains a response or note to any line in this Part V				
				Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 7	'		
t	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b (l
c	Did the organization comply with backup withholding rules for reportable payments to vendors (gambling) winnings to prize winners?	and reportable gaming	1 c		Х
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-				
	ments, filed for the calendar year ending with or within the year covered by this return	2a 7			
Ł	olf at least one is reported on line 2a, did the organization file all required federal employment		2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see inst	•			
	Did the organization have unrelated business gross income of \$1,000 or more during the year	?	3 a		X
	olf 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O	•	3 Ь		<u> </u>
4 a	and tany time during the calendar year, did the organization have an interest in, or a signature of financial account in a foreign country (such as a bank account, securities account, or other fin	or other authority over, a nancial account)?	4 a		Х
t	olf '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 Fil				į
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax	year? .	5 a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelte	r transaction? .	5 b		Х
C	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, are solicit any contributions that were not tax deductible as charitable contributions?	id did the organization	6 a		Х
t	olf 'Yes,' did the organization include with every solicitation an express statement that such co	ntributions or gifts were			
	not tax deductible?	_	6 b		
7	Organizations that may receive deductible contributions under section 170(c).				l
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and pa services provided to the payor?	rtly for goods and	7 a		Х
Ŀ	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for where Serm 8282?	ich it was required to file	7 c		Х
C	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d			
6	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal b	enefit contract?	7 e		Х
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit		7 f		Х
ç	g If the organization received a contribution of qualified intellectual property, did the organizatio as required?	n file Form 8899	7 g		
ŀ	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	organization file a	7 h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, had holdings at any time during the year?	organizations. Did the excess business	8		
9	Sponsoring organizations maintaining donor advised funds.				
a	Did the organization make any taxable distributions under section 4966?		9 a		
Ł	Did the organization make a distribution to a donor, donor advisor, or related person?		9 b		
10	Section 501(c)(7) organizations. Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12	10 a			
t	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b			
11	Section 501(c)(12) organizations. Enter:]		
ā	Gross income from members or shareholders .	11 a			
t	 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 	11 b			
12 a	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of I	Form 1041? .	12a]	
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b			
	Section 501(c)(29) qualified nonprofit health insurance issuers.				
ā	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	О.			
t	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	13 Ь			
	Enter the amount of reserves on hand	13.0	1 1	- 1	

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

14a

Form 990 (2013) GEORGIA RIVER NETWORK, INC 58-2404112 Page 6 Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 13 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 13 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? Х 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? X 4 \overline{X} Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? SEE SCHEDULE O 6 Х 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? SEE SCHEDULE O 7 a Х **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, X stockholders, or other persons other than the governing body? 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following a The governing body? 8 a Х b Each committee with authority to act on behalf of the governing body? 8 b X Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O X Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code Yes No 10 a Did the organization have local chapters, branches, or affiliates? 10 a Х 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? 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X 11 a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13 12 a Х b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Х 12 b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done SEE SCHEDULE O Х 12c 13 Did the organization have a written whistleblower policy? 13 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official SEE SCHEDULE O Х 15 a **b** Other officers of key employees of the organization SEE SCHEDULE O 15 b If 'Yes' to line 15a or 15b, describe the process in Schedule O. (See instructions.) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16 a Х b If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements? 16 b Section C. Disclosure 17 List the states with which a copy of this Form 990 is required to be filed > GA Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. Another's website Upon request Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

	,	•		
Form 990 (2013)	GEORGIA	RIVER	NETWORK.	TNC

58-2404112

age 7

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

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

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

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

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

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

				((;)					
(A) Name and Title	(B) Average hours per week (list	one bo	tion (do n box, unles ficer and a		check perso recto	k more in is bot or/truste	than th an e)	(D) Reportable compensation from	(E) Reportable compensation from	(F) Estimated amount of other
	any hours for related organiza tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099 MISC)	related organizations (W 2/1099-MISC)	compensation from the organization and related organizations
(1) DR DORINDA DALLMEYER	2									
SECRETARY	0	X						0.	0.	0.
(2) JULIE STUART	2									
PRESIDENT	0	Х						0.	0.	0.
(3) VICTOR JOHNSON	2									
DIRECTOR	0	X						0.	0.	0.
(4) DUNCAN HUGHES	2									
DIRECTOR	0	Х						0.	0.	0.
(5) DEE STONE	2									
DIRECTOR	0	Х						0.	0.	0.
(6) JOHN BRANCH	2									
DIRECTOR	0	Х						0.	0.	0.
7 MICKEY DESAI	2					!				
TREASURER	0	Х						0.	0.	0.
_(8)_MARGARET_MYSZEWSKI	2									
DIRECTOR	0	X						0.	0.	0.
(9) BONNY PUTNEY	2									
VICE PRESIDENT	0	Х						0.	0.	0.
(10) STEVEN COUSINS	2									
DIRECTOR	0	Х						0.	0.	0.
(11) ALICIA EVANS	22									
DIRECTOR	0	Х						0.	0.	0.
(12) DR MARY FREEMAN	2									
DIRECTOR	0	Х	x					0.	0.	0.
(13) VINCENT PAYNE	2									
DIRECTOR	0	X	х					0.	0.	0.
(14) APRIL INGLE	_ 40									
FORMER ED	0					X		46,221.	0.	0.

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•	(B)	1		(0	C)				'			
· (A)	A.,	Position rage (do not check more than on						(D)	(E)		(F)	
Name and title	Average hours	box	, unle:	ss pe	erson	ıs bot	h an	Reportable	Reportable	E	stimate	d
Name and the	per week	offic				or/trus		compensation from	compensation from	amo	unt of o	ther
	(list any hours	유공	굸	Officer	€	를	Former	the organization (W 2/1099-MISC)	related organizations (W 2/1099 MISC)	1	npensat rom the	:
		individual trustee or director	nstitutional trustee	<u>5</u>	9	S S	[∄				ganızatıd ıd relate	
	related organiza	rector	힐	_	뤛	8 8	=				anizatio	
	tions below) , \(\frac{1}{2}\)	🕌		employee	₹	l					
	dotted	&			``	33	i					
	line)	"	%			Highest compensated employee	1					
			Ш		<u>L</u>		L					
(15) DANA SKELTON	40					ĺ						
DIRECTOR OF ADMIN	0	}	\		1	X	ł	50,068.	0.			0.
(16) DAVIN WELTER	40		П			t	İΤ					
DEV DIRECTOR	1-5-	1				X		49,634.	0.			0.
	+	_	\vdash		-	<u> </u>	├─	49,034.				
(17) CHRIS MANGANIELLO	_40_	1				l			_			_
POLICY DIRECTOR	0					X	L_	47,427.	0.			0.
(18) GWYNETH MOODY	40	1	1			\		_				
COMM PROG COORD	0	1				X	i	38,787.	0.			0.
(19)	-				\vdash	 	 	307.07.				<u> </u>
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(23)	-	1										
	l	<u>L</u>				<u> </u>	Ļ_					
1 b Sub-total								232,137.	0.			0.
c Total from continuation sheets to Part VII, Section	A						-	0.	0.			0.
d Total (add lines 1b and 1c)								232,137.	0.			0.
2 Total number of individuals (including but not limite	d to tho	se lis	ted	abo	ve)	who	rece		100,000 of reportab	le comi	ensal	
from the organization • 0					,				,,.,			
Tom the organization 0												T
										F	Yes	No
3 Did the organization list any former officer, director	, or trus	tee,	key (emp	oloy	ee, o	r hij	ghest compensate	d employee	-		1
on line 1a? If 'Yes,' complete Schedule J for such i	ındıvıdua	a/	-		٠.					3		X
4 For any individual listed on line 1a, is the sum of re	nortable	2 000	non	cati	on a	and o	tha	r compansation fro	nm.	•		1 ''''
the organization and related organizations greater	than \$15	50.00	0? //	f 'Ye	es' c	comp	lete	Schedule J for	וווע			1
such individual .	•	,								4		X
5 Did any person listed on line 1a receive or accrue of	omnan	ation	n froi	m a	nv i	ınralı	ated	l organization or in	dividual			
for services rendered to the organization? If 'Yes,'	complet	e Sc	hedu	ile .	J for	such	h pe	erson	Idividual	5		X
Section B. Independent Contractors												
1 Complete this table for your five highest compensa	ted inde	pend	ent	con	trac	tors t	hat	received more tha	n \$100,000 of			
compensation from the organization. Report compe	ensation	for t	he c	aler	ndar	year	en	ding with or within	the organization's	lax yea	r.	
(A)								(B)		- (C)	
Name and business addre	SS							Description of	f services	Compe	nsatio	n
									-			
			-					 				
			_		_			<u> </u>		<u>-</u>		
2 Total number of independent contractors (including	but not	limit	ed to) the	056	lister	d ah	ove) who received	I more than			.
\$100,000 of compensation from the organization			(C	- 411		.,5,66			o.o alan			
\$100,000 of compensation from the organization	U						_				000 /	

Part VIII Statement of Revenue

	 Check if Schedule O contains a response or note to any 	line in this Part VII	l		<u>U</u>
*		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS	1 a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f h Total. Add lines 1a-1f	364,880.			
<u>`</u>	Business Code	304,000.			
話し	2a PADDLE GEORGIA 611710	250 056	250 056		Ì
_ ₫	E PADDLE GEORGIA 611710	250,056.	250,056.		 :
<u> </u>	b CONFERENCE 611710	23,934.	23,934.		
≥	C				
岁	d				
3	e				
8	f All other program service revenue.				
윤	g Total. Add lines 2a-2f	273,990.			
	3 Investment income (including dividends, interest and				
	other similar amounts)	51.			51.
	4 Income from investment of tax-exempt bond proceeds . ►				
	5 Royalties				
	(i) Real (ii) Personal		-		
	6 a Gross rents				
	b Less. rental expenses				
	c Rental income or (loss)				
	` '				
	d Net rental income or (loss)				
	7 a Gross amount from sales of assets other than inventory.				
	b Less: cost or other basis and sales expenses				
	c Gain or (loss)				
	d Net gain or (loss) ►				
OTHER REVENUE	8 a Gross income from fundraising events (not including . \$ 6,740. of contributions reported on line 1c).		, , , ,		
<u>02</u>	See Part IV, line 18 a 1,448.				
뛰	b Less. direct expenses b 1,448.]			
5	c Net income or (loss) from fundraising events				
	9 a Gross income from gaming activities. See Part IV, line 19 a				
	b Less: direct expenses . b				
	c Net income or (loss) from gaming activities				
	10 a Gross sales of inventory, less returns and allowances a 9,385. b Less: cost of goods sold b 7,649.				
			4 = 0 =		
	c Net income or (loss) from sales of inventory	1,736.	1,736.		
	Miscellaneous Revenue Business Code				
	11a MISCELLANEOUS 561499	1,799.	1,799.		
	b				
	°				
	d All other revenue				
	e Total. Add lines 11a-11d	1,799.			
	12 Total revenue. See instructions	642,456.	277,525.	0.	51.

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) Check if Schedule O contains a response or note to any line in this Part IX (D) (A) Do not include amounts reported on lines Total expenses Fundráising rogram service Management and 6b, 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 40,000 40,000 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 3 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees 232,137 143,786 30,157 58,194. Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 0 0 Other salaries and wages 70.313 33,979 24,133 12,201. Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 3,432 5.342 646 1,264. Other employee benefits 28,087 16,949. 3,403. 7,735. 10 Payroll taxes 23,663 13,936 4,231 5,496. 11 Fees for services (non-employees). a Management . **b** Legal c Accounting d Lobbyina e Professional fundraising services. See Part IV, line 17 f Investment management fees Other. (If line 11g amt exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0) 32,539 23,754 8,785 Advertising and promotion 13 Office expenses. 14 Information technology 2,787 721 2,066. 15 Royalties Occupancy 16 19,980 11,588 3,397 4,995. 17 Travel 9,243 8,826. 231 186 18 Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 19 1,232 172 1,060 20 Interest 21 Payments to affiliates Depreciation, depletion, and amortization 22 370 640 110 160. 2,527 2,527 Other expenses. Itemize expenses not 24 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.) 171,606 a PROJECT COSTS 171,606 PROGRAM COSTS - CONFERENCE 21,320 21,320 BANK SERVICE CHARGES 13,233 11,409 525 1,299 d DUES AND SUBSCRIPTIONS 9,690 <u>2,190</u> 7,500. e All other expenses 17,154. 2,828. 11,548 2,778. Total functional expenses. Add lines 1 through 24e 701,493. 92,819 506,866 101,808. 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 li	ne in this Part X			
	•				(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing	_		61,488.	1	69,848.
	2	Savings and temporary cash investments			217,947.	2	176,825.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net				4	300.
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated er Part II of Schedule L.				5	
	6	Loans and other receivables from other disqualified pe section 4958(f)(1)), persons described in section 4958 employers and sponsoring organizations of section 50 beneficiary organizations (see instructions). Complete	(c)(3)(l 1(c)(9	B), and contributing by voluntary employees'		6	
A	7	Notes and loans receivable, net				7	·
A S E T S	8	Inventories for sale or use				8	35,455.
Ī	9	Prepaid expenses and deferred charges		ļ		9	15,941.
	10 a	Land, buildings, and equipment, cost or other basis. Complete Part VI of Schedule D	 10a	24,858.			
	b	Less. accumulated depreciation	10 b	22,745.	2,239.	10 c	2,113.
	11	Investments - publicly traded securities		22,713.	2,233.	11	2,113.
	12	Investments – other securities. See Part IV, line 11		· .		12	<u> </u>
	13	Investments – program-related. See Part IV, line 11		ŀ		13	
	14	Intangible assets		}		14	
	15	Other assets See Part IV, line 11		}	1,210.	15	1,210.
	16	Total assets. Add lines 1 through 15 (must equal line 3	34)	}	282,884.	16	301,692.
	17	Accounts payable and accrued expenses		• •	1,099.	17	14,659.
	18	Grants payable	2,033.	18	21,000.		
	19	Deferred revenue		ļ		19	43,737.
L	20	Tax-exempt bond liabilities				20	<u> </u>
A	21	Escrow or custodial account liability. Complete Part IV	V of S	chedule D		21	
LIABILITIES	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	rs, dır I dısqu	ectors, trustees, ialified persons.		22	
į	23	Secured mortgages and notes payable to unrelated th	ırd pai	rties		23	
š	24	Unsecured notes and loans payable to unrelated third	partie	s		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Comp	s to re plete P	lated third parties, 'art X of Schedule D		25	2,769.
	26	Total liabilities. Add lines 17 through 25.			1,099.	26	61,165.
P.		Organizations that follow SFAS 117 (ASC 958), check lines 27 through 29, and lines 33 and 34.	here '	► X and complete			
ANNELO	27	Unrestricted net assets.			186,103.	27	166,637.
Ē	28	Temporarily restricted net assets .			95,682.	28	73,890.
	29	Permanently restricted net assets				29	-
R F.		Organizations that do not follow SFAS 117 (ASC 958), and complete lines 30 through 34.	, checl	k here ►			***************************************
FUND	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building, or equipm		L		31	
î,	32	Retained earnings, endowment, accumulated income,	or oth	er funds		32	
日本 一本文で出の	33	Total net assets or fund balances		Ī	281,785.	33	240,527.
	34	Total liabilities and net assets/fund balances			282,884.	34	301,692.
BA	A		-				Form 990 (2013)

Form 990 (2013) GEORGIA RIVER NETWORK, INC	58-2404112	:	Pa	age 1 2
Part XI Reconciliation 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	6	42,4	456.
2 Total expenses (must equal Part IX, column (A), line 25)	2		01,4	
3 Revenue less expenses. Subtract line 2 from line 1	3		59,(
4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			785.
5 Net unrealized gains (losses) on investments	5			
6 Donated services and use of facilities	6			_
7 Investment expenses	7		_	
8 Prior period adjustments	8		17,	779.
9 Other changes in net assets or fund balances (explain in Schedule O)	9			0.
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2	40,5	
Part XII Financial Statements and Reporting	 +			
Check if Schedule O contains a response or note to any line in this Part XII				X
			Yes	No
1 Accounting method used to prepare the Form 990: Cash X Accrual Other SEE SC	ЭН. О		163	
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.				
2 a Were the organization's financial statements compiled or reviewed by an independent accountant?	ě	2a	;	Х
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reseparate basis, consolidated basis, or both.	eviewed on a			
Separate basis Consolidated basis Both consolidated and separate basis			:	
b Were the organization's financial statements audited by an independent accountant?		2 Ь	X	
If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sbasis, consolidated basis, or both.	eparate			
X Separate basis Consolidated basis Both consolidated and separate basis				
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversig review, or compilation of its financial statements and selection of an independent accountant?	ht of the audit,	2 c		х
If the organization changed either its oversight process or selection process during the tax year, explain Schedule O.	ì			
3 a As a result of a federal award, was the organization required to undergo an audit or audits as set forth Audit Act and OMB Circular A-133?	n the Single	3 a		х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the or audits, explain why in Schedule O and describe any steps taken to undergo such audits	e required audit	3 b		
BAA		Form	990 (2013)

Form 990 (2013)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

· 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.

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

OMB No 1545 0047

2013

Open to Public Inspection

Employer identification number

		RIVER NETWO		·		<u>-</u>				40411		
Part				All organizations m					ee ins	truction	ns.	
The o	rganıza	ition is not a priva	te foundation because	e it is: (For lines 1 throu	igh 11, c	heck on	ly one b	ox.)				
1	∐ A c	church, convention	of churches or assoc	ciation of churches desc	ribed in	section	170(b)(1)(A)(i).				
2	∏ A s	school described in	section 170(b)(1)(A)	(ii). (Attach Schedule E	.)							
3	\square A F	nospital or a coope	erative hospital service	e organization describe	d in sect	tion 17 0	(b)(1)(A)	(iii).				
4	\blacksquare		•	in conjunction with a ho					ΈΧ1ΧΑ)	(iii). Ent	er the hosp	atal's
		ne, city, and state		•	•					(,	-	
5	An 170	organization oper (b)(1)(A)(iv). (Coi	ated for the benefit of	f a college or university	owned	or opera	ted by a	govern	mental	unit des	cribed in se	ction
6	A f	ederal, state, or lo	ocal government or go	vernmental unit descrit	oed in se	ection 17	70(b)(1)(A)(v).				
7	An	organization that section 170(b)(1)(A	normally receives a s \()(vi). (Complete Part	ubstantial part of its sul t II.)	pport fro	m a gov	ernmen	tal unit i	or from	the gene	eral public o	lescribed
8	∐ A c	community trust de	escribed in section 17	0(b)(1)(A)(vi). (Complete	e Part II	.)						
9	☐ froi	m activities related estment income a ne 30, 1975. See s	d to its exempt function Indicated business	exception 5	ons, and ill tax)	l (2) no i from bus	more tha	an 33-1/ s acquir	3% of its	s support fr	om aross	
10				xclusively to test for pul								
11	⊔ mo	re publicly suppor	ted organizations des	xclusively for the benefi cribed in section 509(a) ion and complete lines	(1) or se	ection 50	09(a)(2).	tions of See se	, or carr ction 50	y out the 1 9(a)(3). (e purposes Check the b	of one or oox that
	a	Type I b	Type II c	Type III - Function	nally inte	grated	•	d 🗍 .	Type III	- Non-f	unctionally	ıntegrated
е	─ oth	checking this box er than foundation ction 509(a)(2).	, I certify that the organisms and other	anization is not controlle than one or more publ	ed direct icly supp	ly or ind oorted o	irectly b rganizat	y one or ions des	r more o scribed i	disqualifi n sectioi	ed persons n 509(a)(1)	or
f	If ti		ceived a written deter	mination from the IRS t	that is a	Туре I,	Type II	or Type	III supp	orting or	ganızatıon,	
g	Sın	ice August 17, 200	6, has the organization	on accepted any gift or	contribu	ution fro	m any o	f the fol	lowing p	ersons?		
							-					Yes No
	(i)	A person who obelow, the gove	directly or indirectly co erning body of the sup	ontrols, either alone or toported organization?	ogether	with per	rsons de	scribed	ın (ıı) a	nd (III)	11 g (i)	
	(ii)	A family memb	er of a person describ	oed in (i) above?							11 g (ii)	
	(iii)			described in (i) or (ii) ab	ove?						-	
h	, ,			supported organization							11 g (iii)	<u> </u>
		Name of supported	(ii) EIN	 		ls the	(v) Did yo	ou notify	(4)	s the	(MI) Amoun	t of monetary
	()	organization	(1) 2.11	(iii) Type of organization (described on lines 1 9 above or IRC section (see instructions))	organiz column (your go	ration in i) listed in overning ment?	the organ	ization in	organiz colu	tation in		pport
					Yes	No	Yes	No	Yes	No		
_												
(A)]	1				
										-		
(B)												
										-		
(C)						1						
				· · · · · · · · · · · · · · · · · · ·						_		
(D)					ĺ		}					
<u> </u>											_	
(E)												
<u></u> -					1	<u> </u>						
Total						‡	ŧ					
	For Par	perwork Reduction	n Act Notice. see the	Instructions for Form 9	90 or 99	ь 0-Е 7 .	L	<u></u>	Schedule	A (For	n 990 or aa	0-EZ) 2013
		,								, ra (1 OII		U-LZ, ZUIJ

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.)

Sec	tion A. Public Support			- complete r art in					_
Cale	ndar vear (or fiscal vear	(2) 2000	(b) 2010	(=) 2011	(4) 2012	(2) 2012	ľ	(D Total	_
begi	nning in) 🖹	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total	
1	Gifts, grants, contributions, and membership fees received (Do not include any 'unusual grants')								
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf								
3	The value of services or facilities furnished by a governmental unit to the organization without charge								
4	Total. Add lines 1 through 3								_
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)								
6	Public support. Subtract line 5 from line 4								
Sec	tion B. Total Support			1					_
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013		(f) Total	
7	Amounts from line 4								
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources			:					
9	Net income from unrelated business activities, whether or not the business is regularly carried on								_
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)								_
	Total support. Add lines 7 through 10								
12	Gross receipts from related activ	ities, etc (see ins	tructions)				12		
13	First five years. If the Form 990 organization, check this box and		ation's first, secor	nd, third, fourth, or	fifth tax year as a	section 501(c)(3)	►[
Sec	tion C. Computation of Pu								_
14	Public support percentage for 20	•	•	e 11, column (f))			14	<u>%</u>	_
15	Public support percentage from 2		,			_	15	%	<u>'</u>
16 a	a 33-1/3% support test — 2013. If and stop here. The organization	the organization of qualifies as a pub	ild not check the plicly supported or	box on line 13, and rganization	d the line 14 is 33	·1/3% or more	, ched	k this box	
t	33-1/3% support test 2012. If the and stop here. The organization				, and line 15 is 33	-1/3% or more	e, che	ck this box ►	
17 a	a 10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	and-circumstance:	s' test, check this	box and stop bere	. Éxplain in Pa	art IV		
t	o 10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a	and-circumstance:	s' test, check this	box and stop here	. Explain in Pa	art IV	is 10% how the ►	
18	Private foundation. If the organiz	zation did not che	ck a box on line 1	3, 16a, 16b, 17a,	or 17b, check this	box and see i	nstrud	ctions > [<u></u>

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 yr beginning in) > 1 Gifts, grants, contributions	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
and membership fees received. (Do not include						
any 'unusual grants.').	404,368.	328,154.	351,232.	420,827.	364,880.	1,869,461.
2 Gross receipts from admissions, merchandise sold or						
services performed, or facilities						
furnished in any activity that is related to the organization's			İ	1		
tax-exempt purpose	175,943.	164,316.	173,566.	201,916.	273,990.	989,731.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						0.
4 Tax revenues levied for the organization's benefit and either paid to or expended on			-			
its behalf 5 The value of services or	-					0.
facilities furnished by a governmental unit to the organization without charge						0
6 Total. Add lines 1 through 5	580,311.	492,470.	524,798.	622,743.	638,870.	0. 2,859,192.
7 a Amounts included on lines 1,	300/311.	152,470.	324,730.	022,743.	030,070.	2,033,132.
and 3 received from disqualified persons	0.	3,843.	5,780.	9,852.	12,293.	31,768.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13				7,332.	22,2333	
for the year	0.	0.	0.	0.	0.	0.
c Add lines 7a and 7b	0.	3,843.	5,780.	9,852.	12,293.	31,768.
8 Public support (Subtract line 7c from line 6.)						2,827,424.
Section B. Total Support						
Calendar year (or fiscal yr beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6 10 a Gross income from interest,	580,311.	492,470.	524,798.	622,743.	638,870.	2,859,192.
dividends, payments received on securities loans, rents, royalties and income from similar sources	650.	592.	110.	72.	51.	1,475.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	3301	332.	110.	74.	31.	0.
c Add lines 10a and 10b	650.	592.	110.	72.	51.	1,475.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						0.
Other income. Do not include gain or loss from the sale of capital assets (Explan in IV)	143.	10.	1,378.	2,375.	1,799.	
13 Total Support. (Add Ins 9,10c, 11 and 12)	581,104.	493,072.	526, 286.	625,190.	640,720.	5,705. 2,866,372.
14 First five years. If the Form 990 organization, check this box and	s for the organizati					▶ □
Section C. Computation of Pu						
15 Public support percentage for 20			13, column (f))		15	98.64 %
16 Public support percentage from			<u> </u>		16	98.92 %
Section D. Computation of Inv				- (6)	1 4= 1	0.05.0
17 Investment income percentage for18 Investment income percentage for			-	י (ז))	17	0.05 %
19 a 33-1/3% support tests — 2013. If				l line 15 is more #	18 nan 33-1/3% and	0.12 %
is not more than 33-1/3%, check	this box and stop	here. The organiz	ation qualifies as	a publicly support	ed organization	► [X]
b 33-1/3% support tests – 2012. If line 18 is not more than 33-1/3%	, check this box an	id stop here. The	organızatıon qualı	fies as a publicly :	supported organiz	tation
20 Private foundation. If the organi	zation did not ched	k a box on line 14		eck this box and s	ee instructions	▶ []

Schedule A	(Form 990 or 9	90-EZ) 2013	GEORGIA	RIVER	NETWORK,	INC		58-2404112	Page 4
Part IV	Supplement or 17b; and (See instruc	tal Informat Part III, line ctions).	ion. Provide 12. Also d	de the e complete	xplanations this part fo	required by or any addit	/ Part II, line ional informa	10; Part II, line 1 tion.	7a
			· -	- -	 -				
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			. – – – – – –						

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545 0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(5)

(6)

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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

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

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

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

		ganizations. Complete Part III.	·orm 990-EZ, Part V, I	ine 35c (Proxy Tax), trie	31
	of organization	•		Employer identifica	tion number
GEC	RGIA RIVER NETWORK	. INC		58-240411	2
Par	I-A Complete if the ord	janization is exempt under section	501(c) or is a sect	ion 527 organizatio	1.
1		organization's direct and indirect political ca			
2	Political expenditures	•		\$	•
3	Volunteer hours.		•	•	
Par	t I-B Complete if the o	rganization is exempt under secti	on 501(c)(3).		
1	Enter the amount of any exci	se tax incurred by the organization under s	ection 4955	<u></u>	0.
2	Enter the amount of any exci	se tax incurred by organization managers i	ınder section 4955	►\$	0.
3	If the organization incurred a	section 4955 tax, did it file Form 4720 for t	his year?		Yes No
4 a	Was a correction made?				☐Yes ☐ No
t	If 'Yes,' describe in Part IV.				
Par	t I-C Complete if the o	rganization is exempt under secti	on 501(c), excep	ot section 501(c)(3)).
1	Enter the amount directly exp	pended by the filing organization for section	527 exempt function	activities ►\$	
2	Enter the amount of the filing function activities	organization's funds contributed to other o	rganizations for secti	on 527 exempt ►\$	
3	Total exempt function expendine 17b	ditures. Add lines 1 and 2. Enter here and o	on Form 1120-POL,	► \$	
4	Did the filing organization file	Form 1120-POL for this year?			Yes No
5	organization made navments	and employer identification number (EIN) of For each organization listed, enter the amons received that were promptly and directly action committee (PAC). If additional space	nount naid from the fil	ing organization's funds	Also enter the
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter 0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter 0-
(1)					
(2)					
(3)					
(4)					

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

Schedule C (Form 990 or 990-EZ) 2013

_	_	_		_			
5	х	-2	4	()	4	1	12

Part II-A . Complete if the section 501(h)	e organization	is exempt under section	on 501(c)(3) and file	ed Form 5768 (election	
	`	ongs to an affiliated group (a	and list in Part IV each	affiliated group member's i	name,
		nd share of excess lobbying			
B Check ► ☐ If the filing	organization che	cked box A and 'limited conf	trol' provisions apply		
(The term 'e	Limits on Lobb	ying Expenditures eans amounts paid or incurre	ed.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expenditure	s to influence pi	ublic opinion (grass roots lob	bying).	14,055.	
b Total lobbying expenditure	s to influence a	legislative body (direct lobby	ring)	4,719.	
c Total lobbying expenditure	s (add lines 1a	and 1b) .		18,774.	0.
d Other exempt purpose exp		•		682,719.	
e Total exempt purpose exp	enditures (add li	nes 1c and 1d)		701,493.	0.
f Lobbying nontaxable amountation both columns	unt. Enter the ar	nount from the following table	e ın	130,224.	
If the amount on line 1e, column	n (a) or (b) is	The lobbying nontaxable a	mount is.		
Not over \$500,000		20% of the amount on line 1e.			
Over \$500,000 but not over \$1,000	<u> </u>	\$100,000 plus 15% of the excess			
Over \$1,000,000 but not over \$1,5		\$175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$17,	.000,000	\$225,000 plus 5% of the excess of	ver \$1,500,000	1	
Over \$17,000,000		\$1,000,000.			
g Grassroots nontaxable am				32,556.	0.
h Subtract line 1g from line				0.	0.
i Subtract line 1f from line 1	ic. If zero or les	s, enter -0-		0.	0.
If there is an amount othe section 4911 tax for this ye		ither line 1h or line 1i, did the	e organization file Forr	n 4720 reporting	Yes No
(Some		4-Year Averaging Period L hat made a section 501(h) el nns below. See the instruction	ection do not have to		
	Lot	bying Expenditures During	4-Year Averaging Peri	od	
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2 a Lobbying non-taxable amount				130,224.	130,224.
b Lobbying ceiling amount (150% of line 2a, column (e))					195,336.
c Total lobbying expenditures				18,774.	18,774.
d Grassroots nontaxable amount				32,556.	32,556.
e Grassroots ceiling amount (150% of line 2d, column (e))					48,834.
f Grassroots lobbying expenditures				14,055.	14,055.
BAA				Schedule C (Form	990 or 990-EZ) 2013

chedule C (Form 990 or 990-EZ) 2013 GEORGIA RIVER NETWORK, INC Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT file		-2404: m 5768		Pa	age
(election under section 501(h)).	(a	a)	(b)	
For each 'Yes' response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	Yes	No	Amo		
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.					
a Volunteers?					
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c Media advertisements?					
d Mailings to members, legislators, or the public?					
e Publications, or published or broadcast statements?					
f Grants to other organizations for lobbying purposes?					
g Direct contact with legislators, their staffs, government officials, or a legislative body?				-	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i Other activities?					
i Total. Add lines 1c through 1i			•		
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b If 'Yes,' enter the amount of any tax incurred under section 4912					
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	Ì			~	
Part III-A Complete if the organization is exempt under section 501(c)(4), section 50)1(c)(5), or			
section 501(c)(6).				Vac	N.
4. Marine to be dealth of 1000/ or one of the control of the contr			1	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?			2		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			. 3		
3 Did the organization agree to carry over lobbying and political expenditures from the prior year?	34 / / E			2017-1	
Part III-B Complete if the organization is exempt under section 501(c)(4), section 50 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) answered 'Yes.') Part), or se III-A, li	ne 3, is	OUI(C))
1 Dues, assessments and similar amounts from members		1			
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a Current year		2 a			
b Carryover from last year		2 b			
c Total		2 c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exces does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and poli- expenditure next year?	s tıcal	4			
5 Taxable amount of lobbying and political expenditures (see instructions)		5			
					$\overline{}$

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No 1545 0047

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection Employer identification number

GEC	ORGIA RIVER NETWORK, INC		58-2404112
Par		or Advised Funds or Other Si	
. 41	Complete if the organization ans	wered 'Yes' to Form 990, Par	IV, line 6.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		· · · · · · · · · · · · · · · · · · ·
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and don are the organization's property, subject to the		
6	Did the organization inform all grantees, donor for charitable purposes and not for the benefit impermissible private benefit?	s, and donor advisors in writing that of the donor or donor advisor, or for a	rant funds can be used only any other purpose conferring
Par			
	Complete if the organization ans		· _ · _ · _ · _ · _ · _ · _ · _ · _ · _
1	_' ``	` _'''	
	Preservation of land for public use (e.g., r	,	servation of an historically important land area
	Protection of natural habitat	Pres	servation of a certified historic structure
	Preservation of open space		
2		on held a qualified conservation contri	oution in the form of a conservation easement on the
	last day of the tax year.		Held at the End of the Tax Year
_	Total number of conservation easements		2a
	• Total number of conservation easements • Total acreage restricted by conservation ease	ments	2b
	: Number of conservation easements on a certif		2c
		` ,	
	I Number of conservation easements included in structure listed in the National Register		. [_2d]
3	Number of conservation easements modified, tax year ►	transferred, released, extinguished, o	r terminated by the organization during the
4	Number of states where property subject to co	nservation easement is located 🕨 🔃	
5	Does the organization have a written policy reand enforcement of the conservation easemer		ction, handling of violations,
6	Staff and volunteer hours devoted to monitorin	ng, inspecting, and enforcing conserva	tion easements during the year
7	Amount of expenses incurred in monitoring, in	specting, and enforcing conservation	easements during the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requireme	ents of section 170(h)(4)(B)(i)
9	In Part XIII, describe how the organization repinclude, if applicable, the text of the footnote t		renue and expense statement, and balance sheet, and its that describes the organization's accounting for
Pai	conservation easements. Till Organizations Maintaining Collect Complete if the organization ans	tions of Art, Historical Treasure swered 'Yes' to Form 990, Par	s, or Other Similar Assets. t IV, line 8.
1 8	a If the organization elected, as permitted under art, historical treasures, or other similar asset in Part XIII, the text of the footnote to its finan	s held for public exhibition, education,	its revenue statement and balance sheet works of or research in furtherance of public service, provide, ems.
,	b If the organization elected, as permitted under historical treasures, or other similar assets he following amounts relating to these items.	SFAS 116 (ASC 958), to report in its ld for public exhibition, education, or r	revenue statement and balance sheet works of art, esearch in furtherance of public service, provide the
	(i) Revenues included in Form 990, Part VIII,	line 1	► \$
	(ii) Assets included in Form 990, Part X		► \$
2	If the organization received or held works of a amounts required to be reported under SFAS		
	a Revenues included in Form 990, Part VIII, line	· · · · · ·	► \$
1	Assets included in Form 990, Part X		► \$

Part III Organizations Maintain	ing Collect	ions of	Art, Historic	al Treasures, or Oth	<u>ier Similar Assets (</u>	<u>contin</u>	ued)_	
3 Using the organization's acquisitio items (check all that apply).	n, accession	, and oth	er records, che	ck any of the following t	hat are a significant us	e of its	collecti	on
a Public exhibition			d Loan	or exchange programs				
b Scholarly research			e Other			_		
c Preservation for future genera	tions							
4 Provide a description of the organ Part XIII.	ızatıon's colle	ections a	nd explain how	they further the organiz	ation's exempt purpose	ın		
5 During the year, did the organizati to be sold to raise funds rather that	on solicit or i	receive d ntained a	lonations of art, s part of the or	historical treasures, or ganization's collection?	other similar assets	Yes		No
Part IV Escrow and Custodial line 9, or reported an a	Arrangen amount on	Form	Complete if 990, Part X,	the organization ar line 21.	iswered 'Yes' to Fo	orm 99	30, Ра 	irt IV,
1 a Is the organization an agent, truston form 990, Part X?	ee, custodiar	n, or othe	er intermediary	for contributions or othe	r assets not included	Yes	[No
b If 'Yes,' explain the arrangement in	n Part XIII ar	nd compl	ete the followin	g table:			· · · · · ·	
						Amoun	t	
c Beginning balance				•	1 c			
d Additions during the year					1 d			
e Distributions during the year					1 e			
f Ending balance					1 f			
2 a Did the organization include an an	nount on For	m 990, P	art X, line 21?			Yes	L	No
b If 'Yes,' explain the arrangement i	n Part XIII. C	heck he	re if the explant	tion has been provided i	n Part XIII .			
Part V Endowment Funds. Cor	mplete if the	ne orga				<u> 10.</u>		
	(a) Current	year	(b) Prior year	(c) Two years back	(d) Three years back	(e)	Four year	s back
1 a Beginning of year balance						—		
b Contributions								
c Net investment earnings, gains, and losses								
d Grants or scholarships								
Other expenditures for facilities and programs								
f Administrative expenses .						\perp		
g End of year balance								
2 Provide the estimated percentage	of the curre	nt year e	nd balance (line	e 1g, column (a)) held a	s.			
a Board designated or quasi-endow	ment 🟲		%					
b Permanent endowment ►	8							
c Temporarily restricted endowment	-		ફ					
The percentages in lines 2a, 2b, a	and 2c should	d equal 1	00%.					
3a Are there endowment funds not in organization by.	the possess	ion of th	e organization (that are held and admin	stered for the		Yes	No
(i) unrelated organizations						3a(i)		
(ii) related organizations .						3a(ii)		
b if 'Yes' to 3a(ii), are the related or	ganizations l	listed as	required on Sc	hedule R?		3b		
4 Describe in Part XIII the intended	uses of the	organizal	lion's endowme	nt funds.				
Part VI Land, Buildings, and	Equipmen	ıt.					,	
Complete if the organiz			Yes' to Form	990, Part IV, line	11a. See Form 990	, Part	X, line	e 10.
Description of property			or other basis vestment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d)	Book v	alue
1 a Land								
b Buildings .								
c Leasehold improvements								
d Equipment				24,858.	22,745.		2	,113.
e Other				,	,			
Total. Add lines 1a through 1e. (Column	ı (d) must eq	ual Form	1 990, Part X, c	olumn (B), lıne 10(c).)	-		2	,113.
BAA					Sched	lule D (90) 2013

Schedule **D** (Form 990) 2013 GEORGIA RIVER NETWORK, INC

58-2404112

Page 2

BAA

Schedule **D** (Form 990) 2013

Part VII Investments – Other Securities.		N/A	00 Deat V June 10
Complete if the organization answered			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-	of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests (3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)	<u> </u>		
(H)			
(I)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 12.))	
Part VIII Investments - Program Related. Complete if the organization answered	'Yes' to Form 990.	N/A Part IV. line 11c. See Form 99	0. Part X. line 13.
(a) Description of investment type	(b) Book value	(c) Method of valuation. Cost or end	I-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			· · · · · · · · · · · · · · · · · · ·
(6)			
(7)			
(8)			
(9) (10)			<u>_</u>
Total. (Column (b) must equal Form 990, Part X, column (B) line 13.)		<u> </u>	
Part IX Other Assets.	N/A	1	
Complete if the organization answered 'Y		art IV, line 11d. See Form 990, Pa	
(1)	scription		(b) Book value
(2)			
(3)			
(4)			
(5)	····		
(6)			<u> </u>
<u>(7)</u> (8)			
(9)		· · · · · · · · · · · · · · · · · · ·	
(10)			
Total. (Column (b) must equal Form 990, Part X, column (E	3), line 15.)		
Part X Other Liabilities.			•
Complete if the organization answered 'Yes' to Form	990, Part IV, line 11e or		······
(a) Description of liability (1) Federal income taxes	(b) Book value		
(2) CREDIT CARDS PAYABLE	2,7	58	
(3) SALES TAX PAYABLE		55. 11.	
(4)			
(5)			
(6)			
(7)		 	
(8)	-		
(10)			
(11)			
Total. (Column (b) must equal Form 990, Part X, column (B) line 25.)	▶ 2,7	69.	
2 Liability for uncertain tax positions. In Part XIII, provide the text of the fo			liability for uncertain
tax positions under FIN 48 (ASC 740). Check here if the text of the footnote h	nas been provided in Part XIII		

TEEA3303L 10/02/13

Schedule **D** (Form 990) 2013

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SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

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

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. ➤ Attach to Form 990.

2013

OMB No 1545-0047

► Information about Schedule I (Form 990) and its instructions is at www.lrs.gov/form990.

Open to Public Inspection

Employer identification number 58-2404112

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Part 1 General Information on Grants and Assistance GEORGIA RIVER NETWORK,

. Tyes

% ⊠

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

Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. Part it | Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to

Schedule I (Form 990) (2013)	Sche	07/12/13	TEEA3901L 07/12/13		for Form 990.	see the Instructions	
0 4		-		isted in the line 1 table	lons	and government organs is listed in the line 1	 2 Enter total number of section 501(c)(3) and government organizations 3 Enter total number of other organizations listed in the line 1 table
							(8)
							<u></u>
•							
							<u></u>
EMPOWER			0.	8,000.		51-0491201	(4) SATILLA RIVERKEEPER
EMPOWER			0.	8,000.		58-2636669	(3) OGEECHEE RIVERKEEPER
EMPOWER			0.	10,000.		58-2031305	(2) COOSA RIVER BASIN INITIATIVE - 408 BROAD STREET
EMPOWER			0.	8,000.		58-2448037	(1) ALTAMAHA RIVERKEEPER PO BOX 2642 DARIEN, GA 31305
(h) Purpose of grant or assistance	(g) Description of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(e) Amount of non-cash assistance	(d) Amount of cash grant	(c) IRC section if applicable	(b) EIN	1 (a) Name and address of organization or government

Page 2

Schedule I (Form 990) (2013) GEORGIA RIVER NETWORK, INC

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) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-					
2					
8					
4					
2					
9					
7					
Part IV Supplemental Information. Provide the informati	ide the informatio	on required in Part I, line	رة ا	olumn (b), and any oth	Part III, column (b), and any other additional information.
PART IV - ADDITIONAL SUPPLEMENTAL INFORMATI	TAL INFORMATIC	NOI			
<u>GRANTEES SUBMIT A PROPOSAL ON HOW THEY PLAN TO USE THE FUNDS. THEY SIGN A CONTRACT</u>	HOW THEY PLAN	TO USE THE FUN	DS. THEY SIGN	A_ CONTRACT	
STATING_THEY WILL USE THE GRANT FUNDS AS APPROVED. THESE DELIVERABLES ARE LISTED IN	VT_FUNDS_AS_AP	PROVED. THESE D	<u>ELIVERABLES AR</u>	E_LISTED_IN	
THE GRANT CONTRACT. GRANTEES ARE TO PROVIDE A MID-YEAR REPORT ON PROGRESS TOWARDS	ARE TO PROVIDE	A MID-YEAR REP	ORT ON PROGRES	S_TOWARDS	
IHEIR GOALS AND MUST SUBMIT A FINAL REPORT		AT THE END OF ONE YEAR.	NE YEAR.		
 	 	 	! ! ! ! ! ! ! ! !		
; 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	 	 	 	1 1 1 1 1 1 1 1 1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
			 		1

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Schedule I (Form 990) (2013)

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

2013

OMB No 1545 0047

Open to Public Inspection

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

GEORGIA RIVER NETWORK, INC	58-2404112
FORM 990, PART VI, LINE 6 - EXPLANATION OF CLASSES OF ME	MBERS OR SHAREHOLDER
MEMBERS PAY DUES AND SUPPORT THE MISSION AND PROG	RAMS
FORM 990, PART VI, LINE 7A - HOW MEMBERS OR SHAREHOLD	ERS ELECT GOVERNING BODY
TWO DIRECTOS ON THE BOARD ARE ELECTED BY THE ORGA	NIZATION'S MEMBERSHIP
FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS	S
SELECT DIRECTORS ARE SENT A PDF OF THE 990 AND AS	KED TO REVIEW.
FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING	AND ENFORCEMENT OF CONFLICTS
POTENTIAL CONFLICTS ARE EXPLORED IN BOARD METTING	DISCUSSIONS.
FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APP	ROVAL PROCESS - CEO, TOP MANAGEMENT
COMPENSATION IS DETERMINED BY VARIOUS FACTORS, BA	SED ON AN ANNUAL REVIEW.
FORM 990, PART VI, LINE 15B - COMPENSATION REVIEW & APP	ROVAL PROCESS - OFFICERS & KEY EMPLOYEES
PUBLISHED DATA FOR RIVER NETWORK ORGANIZATIONS AC	ROSS THE NATION IS CONSIDERED
FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUME	NTS PUBLICLY AVAILABLE
ALL GOVERNING DOCUMENTS, POLICIES AND FINANCIAL I	NFORMATION IS PROVIDED UPON
REQUEST.	
FORM 990, PART XII, LINE 1 - CHANGE OF ACCOUNTING ME	THOD
ACCOUNTING BASIS CHANGED FROM CASH TO ACCRUAL FOR 2014, THEREFORE 990 ACCOUNTING BASIS CHANGED FROM	AUDIT FOR YEAR ENDED SEPTEMBER 30, CASH TO ACCRUAL.

2013 SCHEDULE D, PART XIII - SUPPLEMENTAL INFORMATION PAGE 5

GEORGIA RIVER NETWORK, INC

58-2404112

SCHEDULE D, PART XI, LINE 4B OTHER REVENUE INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S

PROGRAM EXPENSES NETTED AGAINST REVENUE

TOTAL \$ 21,320. 21,320.

SCHEDULE D, PART XII, LINE 4B OTHER EXPENSES INCLUDED ON FORM 990 BUT NOT INCLUDED IN F/S

PROGRAM EXPENSES NETTED AGAINST REVENUE

TOTAL \$ 21,320.

20	1	3
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SCHEDULE A, PART IV - SUPPLEMENTAL INFORMATION PAGE 5

GEORGIA RIVER NETWORK, INC

58-2404112

PART III	LINE 12	- OTHER	INCOME
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NATURE AND SOURCE	2013	2012	2011	2010	2009
REBATES AND REFUNDS TOTAL	\$ 1,799.	\$ 2,375.	\$ 1,378.	\$ 10.	\$ 143.
	\$ 1,799.	\$ 2,375.	\$ 1,378.	\$ 10.	\$ 143.