efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493318123418

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2017

Open to Public Inspection

A For the 2017 calendar year, or tax year beginning 01-01-2017 , and ending 12-31-2017

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
SWAN VALLEY CONNECTIONS

Doing business as

Number and street (or P O box if mail is not delivered to street address) | Room/suite
6887 HIGHWAY 83

City or town, state or province, country, and ZIP or foreign postal code
CONDON, MT 59826

D Employer identification number
81-0512368

E Telephone number
(406) 754-3137

G Gross receipts $ 1,045,640

F Name and address of principal officer
REBECCA L RAMSEY
6887 HIGHWAY 83
CONDON, MT 59826

H(a) Is this a group return for subordinates? ☐ Yes ☑ No
H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)
H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW SWANVALLEYCONNECTIONS ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1996 **M** State of legal domicile MT

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
ECOSYSTEM MANAGEMENT AND EDUCATION

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	12
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	11
5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	21
6	Total number of volunteers (estimate if necessary)	6	78
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	613,172	573,936
	9	Program service revenue (Part VIII, line 2g)	195,908	165,203
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-3,442	16,691
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	19,282	4,769
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	824,920	760,599
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	132,201	103,095
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	481,919	512,235
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶33,974		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	264,980	265,064
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	879,100	880,394
	19	Revenue less expenses Subtract line 18 from line 12	-54,180	-119,795
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	638,221	557,152
	21	Total liabilities (Part X, line 26)	69,236	84,342
	22	Net assets or fund balances Subtract line 21 from line 20	568,985	472,810

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

****** 2018-11-09
Signature of officer Date

REBECCA L RAMSEY EXECUTIVE DIRECTOR
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
SHIRLEE WALKER CPA	SHIRLEE WALKER CPA	2018-11-08		P00572619

Firm's name ▶ ANDERSON ZURMUEHLEN & CO PC | Firm's EIN ▶ 81-0385940

Firm's address ▶ PO BOX 2368
MISSOULA, MT 59806 | Phone no (406) 721-7800

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . ☑

1 Briefly describe the organization's mission

MAINTAIN THE SWAN VALLEY'S UNIQUE NATURAL RESOURCES AND ENSURE THAT A VIBRANT HUMAN COMMUNITY CAN SUSTAIN ITSELF THROUGH STEWARDSHIP, EDUCATION, ECONOMIC VIABILITY, AND CONSERVATION ON PUBLIC AND PRIVATE LANDS

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☐ Yes ☑ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ Yes ☑ No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 246,564 including grants of $ 102,995) (Revenue $ 26,953)

See Additional Data

4b (Code) (Expenses $ 196,647 including grants of $) (Revenue $ 136,650)

See Additional Data

4c (Code) (Expenses $ 72,135 including grants of $) (Revenue $)

See Additional Data

(Code) (Expenses $ 139,578 including grants of $ 100) (Revenue $ 9,524)

RECREATIONAL TRAILS FROM MAY THROUGH OCTOBER, SWAN VALLEY CONNECTIONS (SVC) CONTRACTS WITH THREE RECREATION TRAIL STEWARDS TO PROVIDE EXTENSIVE TRAIL AND CAMPSITE MAINTENANCE AND RESTORATION, RECREATIONAL USER MONITORING, WILDERNESS CHARACTER MONITORING, AND VISITOR EDUCATION ON APPROXIMATELY 95 MILES OF TRAIL IN THE MISSION MOUNTAINS WILDERNESS AND SWAN FRONT OF NORTHWEST MONTANA EACH SPRING TRAILS ARE OPENED AND THEN MAINTAINED THROUGHOUT THE VISITOR SEASON IN PARTNERSHIP WITH THE U S FOREST SERVICE IN 2017, TRAIL STEWARDS SUPERVISED 45 VOLUNTEERS, PROVIDING OVER 384 HOURS OF SERVICE THE RECREATIONAL TRAILS PROGRAM IS FUNDED BY GRANTS FROM THE U S FOREST SERVICE, MONTANA FISH, WILDLIFE AND PARKS, AND BY PRIVATE DONATIONS CONSERVATION SWAN VALLEY CONNECTIONS (SVC) CONVENES AND COORDINATES THE SWAN LANDS COORDINATING NETWORK (SLCN) CONSISTING OF MEMBERS FROM ALL THE VARIOUS STAKEHOLDERS IN THE SWAN VALLEY, INCLUDING THE U S FOREST SERVICE, U S FISH AND WILDLIFE SERVICE, MONTANA DEPARTMENT OF NATURAL RESOURCES AND CONSERVATION, MONTANA FISH, WILDLIFE AND PARKS, VARIOUS NON-GOVERNMENTAL AGENCIES, SWAN VALLEY CIVIC ORGANIZATIONS, AND PRIVATE CITIZENS THE MISSION OF THE SLCN IS TO COORDINATE STAKEHOLDER ACTIVITY IN THE VALLEY AND LEVERAGE ORGANIZATIONAL RESOURCES TO MORE PRODUCTIVELY ACCOMPLISH COMMON GOALS AND OBJECTIVES THE SLCN PROVIDES A FORUM FOR DIALOGUE AMONG VESTED STAKEHOLDERS IN PURSUIT OF STRENGTHENING RELATIONSHIPS AND FACILITATING COOPERATIVE STEWARDSHIP OF THE NATURAL RESOURCES IN THE SWAN VALLEY FOR THE COMMON GOOD SVC HOSTS MEETINGS OF THE SLCN AND MULTIPLE SUBCOMMITTEES OF THE SLCN (INCLUDING FOREST STEWARDSHIP, NATIVE FISH, WATER QUALITY, WETLANDS, AQUATIC INVASIVE SPECIES, CONSERVATION STRATEGIES, AND WILDLIFE SUBCOMMITTEES) TO WORK ON ISSUES OF CONCERN WATER QUALITY IS A PARTICULAR CONCERN IN THE SWAN RIVER WATERSHED THE SWAN RIVER IS A MAJOR TRIBUTARY OF SWAN LAKE AND THE UPPER COLUMBIA RIVER BASIN SVC AND THE MONTANA DEPARTMENT OF NATURAL RESOURCES AND CONSERVATION, IN PARTNERSHIP WITH THE MONTANA DEPARTMENT OF ENVIRONMENTAL QUALITY, ARE ACTIVELY ENGAGED IN DEVELOPING WATERSHED RESTORATION PROJECTS IN THE LOWER SWAN WATERSHED, INCLUDING ROAD STABILIZATION, UPGRADES OF WATER PASSAGE STRUCTURES, AND REMOVAL OF FISH PASSAGE BARRIERS SVC ALSO ADMINISTERS AN ANNUAL COUNTY-FUNDED COST SHARE NOXIOUS WEED TREATMENT GRANT FOR LOCAL LANDOWNERS THE NATIVE FISH SUBCOMMITTEE IS A COLLABORATIVE GROUP OF REPRESENTATIVES FROM SWAN VALLEY CONNECTIONS, MONTANA FWP, US GEOLOGICAL SURVEY, MONTANA DNRC, US FOREST SERVICE, THE UNIVERSITY OF MONTANA, MPG RANCH, AND PRIVATE CITIZENS IT WORKS TO IDENTIFY THE CONSERVATION STRATEGY WHICH WILL BEST PROTECT AND RESTORE WESTSLOPE CUTTHROAT TROUT IN THE SWAN BASIN SVC HAS WORKED TO MONITOR KNOWN CONSERVATION POPULATIONS AND COLLECT SAMPLES FOR GENETIC STUDY TO ADDRESS KNOWLEDGE GAPS ABOUT THE DISTRIBUTION, ABUNDANCE, AND GENETIC STATUS OF CUTTHROAT TROUT IN THE SWAN SVC BEGAN AN AQUATIC INVASIVE SPECIES (AIS) PROGRAM IN 2017 AND ACTIVELY COLLECTED WATER SAMPLES FROM SWAN WATERSHED LAKES TO MONITOR FOR AIS THAT COULD HAVE MAJOR NEGATIVE ECOSYSTEM FUNCTION AND ECONOMIC IMPACTS ELK CREEK CONSERVATION AREA SWAN VALLEY CONNECTIONS (SVC) AND THE CONFEDERATED SALISH AND KOOTENAI TRIBES ARE THE LAND STEWARDS FOR THE ELK CREEK CONSERVATION AREA, A 640-ACRE PARCEL OF CRITICAL BULL TROUT SPAWNING HABITAT ALONG ELK CREEK SVC SUPERVISES VOLUNTEERS AND PROVIDES FUNDING FOR RESTORING RIPARIAN HABITAT ALONG THE CREEK AS WELL AS MAINTENANCE OF ACCESS ROADS, WEED CONTROL, TREE PLANTING AND FOREST HEALTH MANAGEMENT SECTION 35 OF ELK CREEK IS A DEMONSTRATION AREA FOR BEST MANAGEMENT PRACTICES, PUBLIC TOURS, AND EDUCATIONAL OPPORTUNITIES FOR STUDENTS, RESIDENTS, AND NATURAL RESOURCE PROFESSIONALS SVC USES THIS CONSERVATION AREA AS AN OUTDOOR CLASSROOM FOR STUDENTS WHO LEARN THROUGH INVOLVEMENT IN STREAM MONITORING, WILDLIFE HABITAT MANAGEMENT, AND FOREST ASSESSMENT IN 2017, STUDENTS AND VOLUNTEERS PARTICIPATED IN ELK CREEK STREAM MONITORING, WHICH IS DESIGNED TO PROVIDE LONG-TERM WATER QUALITY DATA IN 2013, SEC, PARTNERED WITH US FISH AND WILDLIFE SERVICE, THE CONFEDERATED SALISH AND KOOTENAI TRIBES, AND THE MISSOULA CONSERVATION DISTRICT TO OBTAIN VARIOUS GRANTS TO REPLANT 43 ACRES ALONG ELK CREEK AND THE SWAN RIVER WITHIN THE CONSERVATION AREA FUNDING WAS SECURED IN 2014 AND THE PROJECT WAS INITIATED WITH TREE AND SHRUB SEEDLING NURSERY DEVELOPMENT THE PROJECT WORK WAS IMPLEMENTED IN 2015, PLANTING OVER 5,800 SPRUCE AND 500 ALDER SEEDLINGS ANNUAL MONITORING OF SEEDLING SURVIVAL CONTINUED IN 2017 PUBLIC INFORMATION/VISITOR CENTER SWAN VALLEY CONNECTIONS (SVC) HAS PARTNERED WITH THE U S FOREST SERVICE TO PROVIDE YEAR ROUND VISITOR AND COMMUNITY SERVICES MONDAY - FRIDAY BETWEEN 9AM - 4 30PM SVC STAFFS A VISITOR CENTER LOCATED IN THE USFS CONDON WORK CENTER THAT IS THE PRIMARY POINT OF CONTACT FOR VISITORS TO THE SWAN VALLEY OVER 1,500 VISITORS CAME THROUGH THE VISITOR CENTER IN 2017 TO GET INFORMATION REGARDING TRAILS/HIKING, CAMPING, FISHING AND WATER RECREATION, LODGING AND WILDLIFE IN THE VALLEY SVC IS THE HOME OF THE GREAT NORTHERN FIRE CREW, AND THE MAIN SOURCE OF INFORMATION FOR THE PUBLIC SVC HAS CREATED WILDLIFE AND HABITAT EXHIBITS, DEVELOPED A RESOURCE LIBRARY FOCUSED ON LOCAL NATURAL RESOURCES, WILDLIFE AND HISTORY, AND A SMALL RETAIL SHOP SELLING BEAR SPRAY, MAPS, WOOD PERMITS AND BOOKS RELATED TO ENJOYING AND UNDERSTANDING THE NATURAL BEAUTY OF THE SWAN VALLEY VISITORS CAN ALSO ENJOY AN INTERPRETIVE TRAIL ADJACENT TO THE VISITOR CENTER SVC'S VISITOR CENTER IS AN INFORMATIONAL HUB FOR VISITORS AND RESIDENTS ALIKE AND A CRITICAL RESOURCE FOR PROFESSIONALS WORKING IN THE SWAN VALLEY SVC HOSTS THE SWAN LANDS COORDINATING NETWORK AND ITS VARIOUS FOCAL SUBCOMMITTEES, A FORUM FOR ALL RESOURCE CONSERVATION PRACTITIONERS AND PROFESSIONALS IN THE VALLEY SVC FACILITATES WORKSHOPS AND EDUCATIONAL OPPORTUNITIES YEAR-ROUND FOR RESIDENTS AND PROFESSIONALS SVC PARTNERS WITH GOVERNMENT AGENCY STAKEHOLDERS AND ACTS AS THE LIAISON FOR COMMUNICATION BETWEEN THESE AGENCIES (85% OF THE VALLEY IS UNDER FEDERAL AND STATE OWNERSHIP) AND THE PRIVATE LANDOWNERS/RESIDENTS OF THE VALLEY SVC HOSTS INFORMATIONAL MEETINGS FOR CITIZENS TO BE AWARE OF AGENCY ACTIVITY AND ALLOWS CITIZENS TO PROVIDE INPUT AND FEEDBACK TO THE FEDERAL AND STATE AGENCIES ON PROJECTS HAPPENING IN THE VALLEY THIS CRITICAL COMMUNICATION LINK BUILDS RELATIONSHIPS THAT ALLOW FOR PRODUCTIVE OUTCOMES THAT BENEFIT ALL

4d Other program services (Describe in Schedule O)

(Expenses $ 139,578 including grants of $ 100) (Revenue $ 9,524)

4e **Total program service expenses** ▶ 654,924

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
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? *If "Yes," 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			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	Yes	
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
c	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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		No
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? *If "Yes," complete Schedule G, Part II*	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		No

Part IV **Checklist of Required Schedules** *(continued)*

			Yes	No
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		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		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), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		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 "Yes," 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? *If "Yes," complete Schedule L, Part III*	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)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," 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? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
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		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? *If "Yes," complete Schedule R, Part 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		
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		No
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? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	5			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	21			
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	
3a	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		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	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 organization solicit any contributions that were not tax deductible as charitable contributions?			6a		No
b	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).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		No
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		No
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8		
9a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization 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	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O			13a		
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	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

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 if Schedule O contains a response or note to any line in this Part VI . . . ☑

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 12		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent	1b 11		
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 have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	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

Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		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		
11a	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			
12a	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?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
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	15a		No
b	Other officers or key employees of the organization	15b		No
	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?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed▶

18 Section 6104 requires an organization to make its 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

☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, address, and telephone number of the person who possesses the organization's books and records
▶UWE J SCHAEFER 6887 HIGHWAY 83 CONDON, MT 59826 (406) 754-3137

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

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

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

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

● List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid

● List all of the organization's **current** key employees, if any See instructions for definition of "key employee "

● List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations

● List all of the organization's **former** officers, key employees, 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) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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) MARIA MANTAS FORMER EXECUTIVE DIRECTOR	40 00	X		X				57,576	0	1,687
(2) STEPHEN H ELLIS DIRECTOR	2 00	X						0	0	0
(3) LARRY GARLICK DIRECTOR	2 00	X						0	0	0
(4) PAM HAMILTON DIRECTOR	2 00	X						0	0	0
(5) ALEX METCALF TREASURER	4 00	X		X				0	0	0
(6) MARK SCHILTZ DIRECTOR	2 00	X						0	0	0
(7) NEIL MEYER DIRECTOR	2 00	X						0	0	0
(8) BARBARA RAIBLE CHAIR	4 00	X		X				0	0	0
(9) REBECCA RAMSEY EXECUTIVE DIRECTOR	40 00	X		X				17,500	0	0
(10) RICH THOMASON EXECUTIVE COMMITTEE-AT-LARGE	2 00	X		X				0	0	0
(11) SCOTT TOMSON DIRECTOR	2 00	X						0	0	0
(12) JUANITA VERO VICE-CHAIR/SECRETARY	2 00	X		X				0	0	0
(13) HELENA MICHAEL EXECUTIVE COMMITTEE-AT-LARGE	2 00	X		X				0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(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

	(D)	(E)	(F)
1b Sub-Total ▶			
c Total from continuation sheets to Part VII, Section A ▶			
d Total (add lines 1b and 1c) ▶	75,076	0	1,687

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 0

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4		No
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII . . . . ☐

Contributions, Gifts, Grants and Other Similar Amounts

Line	Description		Amount	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a	Federated campaigns . .	1a					
b	Membership dues . .	1b					
c	Fundraising events . .	1c	1,239				
d	Related organizations	1d					
e	Government grants (contributions)	1e	315,357				
f	All other contributions, gifts, grants, and similar amounts not included above	1f	257,340				
g	Noncash contributions included in lines 1a-1f $						
h	**Total.** Add lines 1a-1f . . . . ▶			573,936			

Program Service Revenue

Line	Description	Business Code	(A)	(B)	(C)	(D)
2a	WILDLIFE IN THE WEST	110000	77,400	77,400		
b	LANDSCAPE AND LIVELIHO	110000	56,900	56,900		
c	STEWARDSHIP & RESTORAT	110000	26,953	26,953		
d	EDUCATION PROGRAMS/WOR	900099	2,350	2,350		
e	RECREATIONAL TRAILS	110000	1,600	1,600		
f	All other program service revenue					
g	**Total.** Add lines 2a–2f . . . . ▶		165,203			

Other Revenue

Line	Description	(i)	(ii)	(A)	(B)	(C)	(D)
3	Investment income (including dividends, interest, and other similar amounts) . . . . . . ▶			10,373			10,373
4	Income from investment of tax-exempt bond proceeds ▶						
5	Royalties . . . . ▶						
		(i) Real	(ii) Personal				
6a	Gross rents	662					
b	Less rental expenses	0					
c	Rental income or (loss)	662					
d	Net rental income or (loss) . . . . ▶			662			662
		(i) Securities	(ii) Other				
7a	Gross amount from sales of assets other than inventory	278,856	500				
b	Less cost or other basis and sales expenses	273,038	0				
c	Gain or (loss)	5,818	500				
d	Net gain or (loss) . . . . . . ▶			6,318			6,318
8a	Gross income from fundraising events (not including $ 1,239 of contributions reported on line 1c) See Part IV, line 18 . . . . . a		2,340				
b	Less direct expenses . . . b		9,669				
c	Net income or (loss) from fundraising events . . ▶			-7,329			-7,329
9a	Gross income from gaming activities See Part IV, line 19 . . . a		890				
b	Less direct expenses . . . b		0				
c	Net income or (loss) from gaming activities . . ▶			890			890
10a	Gross sales of inventory, less returns and allowances . . a		10,200				
b	Less cost of goods sold . . b		2,334				
c	Net income or (loss) from sales of inventory . . ▶			7,866	7,866		

Line	Miscellaneous Revenue	Business Code	(A)	(B)	(C)	(D)
11a	MISCELLANEOUS	900099	2,680	58		2,622
b						
c						
d	All other revenue					
e	**Total.** Add lines 11a–11d . . . . ▶		2,680			
12	**Total revenue.** See Instructions . . . . . . ▶		760,599	173,127	0	13,536

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 . . . . ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	100	100		
2 Grants and other assistance to domestic individuals See Part IV, line 22	101,795	101,795		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16	1,200	1,200		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	68,702	28,750	35,416	4,536
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	389,196	291,897	74,361	22,938
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits	11,240	7,792	2,751	697
10 Payroll taxes	43,097	31,045	9,417	2,635
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	2,320		2,320	
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	3,206		3,206	
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	3,428	2,511	661	256
13 Office expenses	5,609	2,114	3,495	
14 Information technology	1,591		1,591	
15 Royalties . .				
16 Occupancy	54,434	47,624	6,810	
17 Travel	7,223	5,520	400	1,303
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	2,108	1,528	291	289
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization . .	3,979		3,979	
23 Insurance . . .	11,642	2,250	9,392	
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)				
a CONTRACT SERVICES	79,486	67,376	12,110	
b SUPPLIES	20,351	20,241	43	67
c VEHICLE MAINTENANCE/REG	19,079	11,902	7,148	29
d INTERN & ALUMNI STIPEND	9,715	9,715		
e All other expenses	40,893	21,564	18,105	1,224
25 **Total functional expenses.** Add lines 1 through 24e	880,394	654,924	191,496	33,974
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 Part IX . . . . ☐

				(A) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing		48,238	1	51,854
	2	Savings and temporary cash investments		182,852	2	72,349
	3	Pledges and grants receivable, net		53,838	3	38,917
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L			6	
	7	Notes and loans receivable, net			7	
	8	Inventories for sale or use		3,954	8	3,758
	9	Prepaid expenses and deferred charges		4,945	9	3,771
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a 56,047			
	b	Less accumulated depreciation	10b 5,622	44,437	10c	50,425
	11	Investments—publicly traded securities		299,448	11	335,569
	12	Investments—other securities See Part IV, line 11			12	
	13	Investments—program-related See Part IV, line 11		509	13	509
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11			15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)		638,221	16	557,152
Liabilities	17	Accounts payable and accrued expenses		69,236	17	84,342
	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 D			21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated third parties			23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			25	
	26	**Total liabilities.** Add lines 17 through 25		69,236	26	84,342
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**				
	27	Unrestricted net assets		513,818	27	455,033
	28	Temporarily restricted net assets		55,167	28	17,777
	29	Permanently restricted net assets			29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds			30	
	31	Paid-in or capital surplus, or land, building or equipment fund			31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
	33	Total net assets or fund balances		568,985	33	472,810
	34	Total liabilities and net assets/fund balances		638,221	34	557,152

Part 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**	760,599
2	Total expenses (must equal Part IX, column (A), line 25)	**2**	880,394
3	Revenue less expenses Subtract line 2 from line 1	**3**	-119,795
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	**4**	568,985
5	Net unrealized gains (losses) on investments	**5**	23,620
6	Donated services and use of facilities	**6**	
7	Investment expenses	**7**	
8	Prior period adjustments	**8**	
9	Other changes in net assets or fund balances (explain in Schedule O)	**9**	0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	**10**	472,810

Part XII **Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line in this Part XII . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	**2a**		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	**2b**		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☐ 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 oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	**2c**		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	**3a**		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	**3b**		

Additional Data

Software ID:
Software Version:
EIN: 81-0512368
Name: SWAN VALLEY CONNECTIONS

Form 990 (2017)

Form 990, Part III, Line 4a:

STEWARDSHIP AND RESTORATION SWAN VALLEY CONNECTIONS (SVC), WORKING WITH THE MONTANA DEPARTMENT OF NATURAL RESOURCES AND CONSERVATION, ASSISTED 187 PRIVATE LANDOWNERS IN THE SWAN VALLEY DURING 2017 TO PROVIDE FOREST HEALTH AND STEWARDSHIP ASSESSMENTS PRIVATE LANDOWNERS ALSO RECEIVE TECHNICAL ASSISTANCE TO REDUCE WILDFIRE RISK THROUGH FOREST FUELS THINNING, MANAGE TREE BEETLE INFESTATIONS, AND MONITOR TREE DISEASE OUTBREAKS WITH FUNDING FROM SEVERAL GOVERNMENTAL AGENCIES, FOREST STEWARDSHIP COST SHARE GRANTS WERE AWARDED TO 16 LANDOWNERS AND TREATED 131 ACRES IN 2017 SINCE BEGINNING THE PROGRAM IN 2004, LANDOWNER GRANTS HAVE BEEN AWARDED, FACILITATING THE TREATMENT OF 2,306 ACRES OF FOREST LAND AT RISK FROM WILDFIRE, TREE AND FOREST HEALTH DECLINE, OR TREE INSECT AND DISEASE OUTBREAKS IN 2017, 5,540 BEETLE PHEROMONE PACKETS WERE DISTRIBUTED TO 112 LANDOWNERS IN THE SWAN VALLEY PROTECTING 40 ACRES OF TREES AND PROVIDING A BUFFER ZONE TO REDUCE THE SPREAD OF A BEETLE INFESTATION TO HUNDREDS OF ADDITIONAL ACRES MITIGATING THE ENCROACHMENT OF NOXIOUS AND NON-NATIVE PLANT SPECIES REMAINS AN IMPORTANT PART OF MAINTAINING ECOSYSTEM INTEGRITY FOR THE SWAN VALLEY HERBICIDE AND SEED TREATMENTS FOR 12 LANDOWNERS ON 323 ACRES WITH GRANT SUPPORT FOR WEED MANAGEMENT WERE COMPLETED DURING THE 2017 GRANT CYCLE THE SWAN VALLEY HAS OVER 4,000 WETLANDS, THE MOST ABUNDANT WETLAND HABITAT IN MONTANA AND IS HOME TO SEVERAL RARE AND ENDANGERED SPECIES IN PARTNERSHIP WITH THE U S FISH AND WILDLIFE SERVICE, SVC IS ENHANCING EXISTING WETLAND HABITAT AND RESTORING DEGRADED WETLANDS THROUGHOUT THE SWAN VALLEY IN 2017, A 48 ACRE DRAINED WETLAND WAS RESTORED SINCE THE INCEPTION OF THE PROGRAM IN 2010, SVC HAS RESTORED 10 WETLANDS ON 143 ACRES STEWARDSHIP AND RESTORATION PROJECTS STIMULATE THE LOCAL ECONOMY, EMPLOYING LOCAL CONTRACTORS SVC'S STEWARDSHIP PROGRAM RESULTED IN OVER 29 FOREST, WEED AND WETLAND PROJECTS DURING 2017 TREATING 542 ACRES IMPROVING FOREST HEALTH, INCREASING FIRE SAFETY, REDUCING INVASIVE WEEDS, AND RESTORING WETLANDS IN TOTAL, 200 LANDOWNERS WERE SERVED AND 1,639 ACRES EVALUATED OR IMPROVED THOUGH SVC PROGRAMS FOR THE YEAR 2017

Form 990, Part III, Line 4b:

EDUCATION SWAN VALLEY CONNECTIONS' (SVC) EDUCATION PROGRAMS AIM TO STRENGTHEN THE RELATIONSHIP BETWEEN PEOPLE AND LANDSCAPES THROUGH PLACED-BASED EXPERIENCES SVC TEACHES ECOLOGICAL LITERACY TO PEOPLE OF ALL AGES AND BACKGROUNDS, CULTIVATING COMPASSION AND ENTHUSIASM FOR THE NATURAL WORLD IN CHILDREN, CHALLENGING YOUNG ADULTS TO UNDERSTAND THE COMPLEXITIES OF LAND AND RESOURCE MANAGEMENT, AND PROVIDING RESIDENTS WITH OPPORTUNITIES TO ENGAGE WITH THE PLACE WHERE THEY LIVE, WORK, AND PLAY DURING 2017, SVC'S YOUTH EDUCATION PROGRAMS SERVED RURAL STUDENTS IN GRADES K-12 FROM CONDON, SEELEY LAKE, POTOMAC, OVANDO, HELMVILLE, LINCOLN, AND BIGFORK THESE PROGRAMS FOCUS ON NATURAL HISTORY AND OUTDOOR EXPLORATION, RANGING FROM TOPICS SUCH AS WILDLIFE TRACK AND SIGN, WETLAND ECOLOGY, AND SNOW SCIENCE OUR EXPERIENTIAL COLLEGE FIELD PROGRAMS HOSTED 19 STUDENTS FROM AROUND THE NATION IN 2017 SVC PROMOTES A PLACE-BASED, CASE-STUDY APPROACH TO CONSERVATION AND STUDIES PROCESS AND COLLABORATION TO MAKE THESE LESSONS APPLICABLE IN OTHER GEOGRAPHIC LOCATIONS THROUGH THESE PROGRAMS STUDENTS EARN UP TO 25 SEMESTER CREDITS FROM THE UNIVERSITY OF MONTANA STUDYING ECOLOGY, NATURAL RESOURCE MANAGEMENT, AND COMMUNITY-BASED CONSERVATION OUR COLLEGE PROGRAMS ARE INTERDISCIPLINARY IN NATURE AND OFFER A BALANCE OF LEARNING THROUGH FIELD WORK, ACADEMIC READINGS, PRESENTATIONS BY STAFF AND SPEAKERS, PROBLEM SOLVING ACTIVITIES, AND PERSONAL REFLECTION WE BELIEVE THAT A DEEP UNDERSTANDING OF ECOLOGICAL PROCESSES COMBINED WITH EMPATHY FOR HUMAN COMMUNITIES LEADS TO INNOVATIVE AND THOUGHTFUL STEWARDSHIP OF PUBLIC AND PRIVATE LANDSCAPES OUR NATURAL RESOURCE SPEAKER SERIES BROUGHT DIFFERENT PRESENTERS TO THE CONDON COMMUNITY, SHARING INFORMATION ABOUT LOCAL WILDLIFE POPULATIONS, AQUATIC INVASIVE SPECIES, AND THE CROWN OF THE CONTINENT WE HELD TWO MULTI-DAY WORKSHOPS, ONE CENTERED AROUND FOREST STEWARDSHIP ON PRIVATE LAND AND ANOTHER ON WILDLIFE TRACK AND SIGN INTERPRETATION WE HOSTED SEVERAL EDUCATIONAL EVENTS THAT ATTRACTED ATTENDEES THROUGHOUT WESTERN MONTANA INCLUDING A SPRING BEAR WAKE-UP SOCIAL, WETLAND RESTORATION TOUR, AND BEAR FAIR WE ALSO HOSTED EDUCATIONAL DISPLAYS AT THE SWAN LAKE HUCKLEBERRY FESTIVAL AND CONDON 4TH OF JULY CELEBRATION OUR OUTREACH PROGRAMS SHARED INFORMATION ABOUT ONGOING NATURAL RESOURCE ISSUES TO LOCAL AND REGIONAL COMMUNITIES IN 2017, THE RICE RIDGE FIRE BURNED OUTSIDE OF SEELEY LAKE AS THE NATION'S HIGHEST PRIORITY FIRE FOR OVER 2 MONTHS SVC ACTED AS A CENTRAL LOCATION FOR INFORMATION RELATED TO RISK MITIGATION, UPDATES, AND EDUCATION SUCH AS HOSTING THE ERA OF MEGAFIRES FILM IN SEELEY LAKE SIMILARLY, THE FLATHEAD NATIONAL FOREST'S FOREST MANAGEMENT PLAN REVISION BECAME A MAJOR TOPIC OF DISCUSSION WITHIN THE LOCAL COMMUNITY AND SVC PROVIDED INFORMATION, EDUCATION, AND ASSISTANCE IN CONTRIBUTING PUBLIC COMMENTS TO THE PLANNING PROCESS SVC IS COMMITTED TO MAINTAINING PARTNERSHIPS THAT PROMOTE EDUCATION TO A BROADER AUDIENCE IN 2017, SVC PARTNERED WITH THE MONTANA NATURAL HISTORY CENTER, EARTHWATCH INSTITUTE, CHILL EXPEDITIONS, THE CLEARWATER RESOURCE COUNCIL, THE UNIVERSITY OF MONTANA, THE UNITED STATES FOREST SERVICE, MONTANA FISH, WILDLIFE AND PARKS, MONTANA DEQ, TROUT UNLIMITED, BACKCOUNTRY HUNTERS AND ANGLERS, THE UNITED STATE GEOLOGIC SURVEY, AND OTHERS TO PROMOTE STATE-WIDE AND OUT OF STATE EDUCATION PROGRAMS TO A DIVERSE AUDIENCE THESE PARTNERSHIPS BUILD TRUST, ENHANCE COLLABORATION, AND EXTEND THE REACH OF ANY INDIVIDUAL ORGANIZATION

Form 990, Part III, Line 4c:

WILDLIFE & AQUATICS SWAN VALLEY CONNECTIONS (SVC) WORKS TO CONSERVE THE INTACT ECOSYSTEMS WITHIN AND SURROUNDING THE SWAN VALLEY AND TO STRENGTHEN THE CONNECTION BETWEEN PEOPLE AND THE NATURAL WORLD THROUGH COLLABORATION AND EXPERIENTIAL LEARNING LOCATED IN THE HEART OF ONE OF THE LAST REMAINING WILD AND INTACT LANDSCAPES IN NORTH AMERICA HOSTING ITS FULL COMPLEMENT OF NATIVE FISH AND WILDLIFE SPECIES IN THEIR NATURAL HABITAT, SVC'S VISION IS THAT THE SWAN WATERSHED WILL REMAIN AN INTACT ECOSYSTEM, SUPPORTING A RESILIENT COMMUNITY THAT VALUES ITS NATURAL RESOURCES, AND SERVING AS A MODEL FOR ENDURING STEWARDSHIP SVC IS A COLLABORATIVE PARTNER IN SWAN VALLEY BEAR RESOURCES (SVBR), WHOSE MISSION IS TO OFFER COMMUNITY RESOURCES TO PROMOTE COEXISTENCE BETWEEN PEOPLE AND BEARS A COLLABORATIVE EFFORT OF SVC AND THE U S FOREST SERVICE (USFS), SVBR PARTNERS WITH MONTANA FISH WILDLIFE & PARKS (FWP), U S FISH & WILDLIFE SERVICE (FWS), AND THE COMMUNITY IN PURSUIT OF ITS MISSION SVBR STAFF HELP REDUCE BEAR CONFLICTS BY OFFERING PRIVATE PROPERTY CONSULTATIONS, ADVICE FOR LANDOWNERS TO MINIMIZE BEAR ATTRACTANTS, ASSISTANCE WITH TEMPORARY AND PERMANENT ELECTRIC FENCING PROJECTS TO CONTAIN BEAR ATTRACTANTS, EDUCATIONAL EVENTS, AND OUTREACH SVBR HAS DISTRIBUTED 244 BEAR RESISTANT TRASH CONTAINERS TO LOCAL BUSINESSES AND RESIDENTS IN 2017, SVBR BUILT THREE PERMANENT ELECTRIC FENCES TO CONTAIN BEAR ATTRACTANTS AND HAS NOW BUILT A TOTAL OF 15 PERMANENT ELECTRIC FENCES IN THE REGION TO CONTAIN BEAR ATTRACTANTS SVBR SPONSORS A NUMBER OF OUTREACH EFFORTS AND EVENTS TO PROMOTE PUBLIC AWARENESS OF ITS MISSION TO REDUCE HUMAN/BEAR CONFLICTS IN THE SWAN VALLEY SVBR PUBLISHES THE SWAN VALLEY BEAR NEWS, AN ANNUAL COMMUNITY NEWSLETTER THAT HIGHLIGHTS CURRENT EVENTS RELATING TO BEARS AND HAS A CURRENT DISTRIBUTION OF 1,247 INDIVIDUALS SVBR HOSTS SEVERAL DIFFERENT TYPES OF COMMUNITY EVENTS DESIGNED TO ENGAGE COMMUNITY MEMBERS AND PROVIDE FORUMS TO DISCUSS AND DISSEMINATE INFORMATION ABOUT LIVING WITH BEARS IN 2017, SVBR HOSTED THE ANNUAL BEAR FAIR - AN INFORMATIONAL, SOCIAL EVENT THAT IS AIMED AT PROMOTING HUMAN/BEAR COEXISTENCE AND MINIMIZING BEAR CONFLICTS SVBR ALSO HOSTED A SPRING BEAR WAKE UP SOCIAL IN 2017, WHICH IS ALSO AIMED AT PROMOTING HUMAN/BEAR COEXISTENCE AND MINIMIZING CONFLICTS, AND SERVES AS AN ANNUAL REMINDER FOR RESIDENTS TO CONTAIN THEIR BEAR ATTRACTANTS AS BEARS EMERGE FROM HIBERNATION SVC IS THE POINT OF CONTACT LOCALLY TO REPORT BEAR INCIDENTS, PROBLEMS, AND CONFLICTS AND WORKS TO HELP RESOLVE ISSUES OR RELAY INFORMATION TO APPROPRIATE MANAGEMENT EXPERTS THE SOUTHWESTERN CROWN OF THE CONTINENT (SW CROWN) IS A PRIMARILY FORESTED LANDSCAPE IN THE ROCKY MOUNTAINS OF WESTERN MONTANA THE SW CROWN WAS CHOSEN AS ONE OF THE FIRST TEN PROJECT AREAS NATIONALLY AWARDED FUNDING UNDER THE FEDERAL COLLABORATIVE FOREST LANDSCAPE RESTORATION (CFLR) PROGRAM THE CFLR PROGRAM REQUIRES MULTI-PARTY MONITORING TO ASSESS THE POSITIVE OR NEGATIVE ECOLOGICAL, SOCIAL, AND ECONOMIC EFFECTS OF RESTORATION PROJECTS IMPLEMENTED UNDER THE PROGRAM SVC, IN PARTNERSHIP WITH THE U S FOREST SERVICE, BUREAU OF LAND MANAGEMENT, THE NATURE CONSERVANCY, AND BLACKFOOT CHALLENGE WORKED TO SYSTEMATICALLY SURVEY APPROXIMATELY 1 5 MILLION ACRES THE SW CROWN FOR FOREST CARNIVORES, PARTICULARLY FOCUSING ON LYNX, FISHER, AND WOLVERINE IN 2017 AS PART OF A LONG-TERM MONITORING EFFORT THAT BEGAN IN 2012 MAINTAINING OR RESTORING A HEALTHY LANDSCAPE THAT SUPPORTS THESE THREE SPECIES IS A PRIMARY FOCUS OF NATIONAL FOREST MANAGEMENT IN THE SW CROWN AND, AS LISTED OR SENSITIVE SPECIES, THE CFLR PROGRAM AS SUCH, FOREST MANAGERS CONSIDER THE IMPACTS TO THESE SPECIES BEFORE IMPLEMENTING ANY MAJOR FOREST MANAGEMENT, INCLUDING BUILDING OR REMOVING ROADS, FUELS REDUCTION, AND FOREST RESTORATION PROJECTS THE PRIMARY OBJECTIVE OF MONITORING FOREST CARNIVORES IN THE SW CROWN OF THE CONTINENT IS TO FACILITATE AND COORDINATE THE ADAPTIVE MANAGEMENT OF WOLVERINES, CANADA LYNX, AND FISHER BY AGENCY MANAGERS ACROSS THE LANDSCAPE THIS MONITORING PROJECT WAS DESIGNED TO PROVIDE A BASELINE OF THE CURRENT DISTRIBUTION OF THE FOCAL SPECIES IN THE SW CROWN AND TO ALLOW FOR TRACKING CHANGES IN THAT DISTRIBUTION OVER TIME THE SW CROWN CARNIVORE PROJECT UTILIZES NON-INVASIVE SURVEY METHODS TO MAXIMIZE THE ABILITY TO DETECT MULTIPLE SPECIES ACROSS A LARGE LANDSCAPE IN AN EFFICIENT AND COST-EFFECTIVE MANNER SVC CONDUCTED SNOW TRACK SURVEYS AND USED DNA COLLECTION METHODS (HAIR SNARES AND BAIT STATIONS) DEVELOPED BY RESEARCHERS WITH THE USFS ROCKY MOUNTAIN RESEARCH STATION SVC COORDINATES AND HOSTS AN ANNUAL NATIVE FISH SUBCOMMITTEE MEETING, WHICH IS A COLLABORATIVE GROUP OF PARTNERS FROM MONTANA FWP, U S GEOLOGICAL SURVEY, MONTANA DNRC, U S FOREST SERVICE, THE UNIVERSITY OF MONTANA, MPG RANCH, AND PRIVATE CITIZENS THE NATIVE FISH SUBCOMMITTEE WORKS TO INFORM THE CONSERVATION STRATEGY WHICH WILL BEST PROTECT AND RESTORE WESTSLOPE CUTTHROAT TROUT IN THE SWAN RIVER BASIN TO ADDRESS KNOWLEDGE GAPS ABOUT THE DISTRIBUTION, ABUNDANCE, AND GENETIC STATUS OF CUTTHROAT TROUT IN THE SWAN, SVC WORKED TO MONITOR KNOWN CONSERVATION POPULATIONS IN 2017 THE SVC VISITOR CENTER PROVIDES INFORMATION ABOUT LIVING WITH ALL SPECIES OF WILDLIFE, INCLUDING A 'LIVING WITH WILDLIFE' INFORMATIONAL PACKET FOR NEW LANDOWNERS IN THE VALLEY AND OTHER INTERESTED PARTIES

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493318123418

SCHEDULE A
(Form 990 or 990EZ)
Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047
2017
Open to Public Inspection

Name of the organization
SWAN VALLEY CONNECTIONS

Employer identification number
81-0512368

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 12, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ))

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170 (b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An agricultural research organization described in **170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture See instructions Enter the name, city, and state of the college or university

10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

11 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations

g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170 (b)(1)(A)(ix)**

(Complete only if you checked the box on line 5, 7, 8, or 9 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 in) ▶	**(a)** 2013	**(b)** 2014	**(c)** 2015	**(d)** 2016	**(e)** 2017	**(f)** Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant ")	416,615	659,551	590,321	613,172	573,936	2,853,595
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	416,615	659,551	590,321	613,172	573,936	2,853,595
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)						256,645
6 **Public support.** Subtract line 5 from line 4						2,596,950

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	**(a)**2013	**(b)**2014	**(c)**2015	**(d)**2016	**(e)**2017	**(f)**Total
7 Amounts from line 4	416,615	659,551	590,321	613,172	573,936	2,853,595
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	15,232	15,843	9,481	8,533	11,035	60,124
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 VI)		220	5,716	16,730	2,680	25,346
11 **Total support.** Add lines 7 through 10						2,939,065

12 Gross receipts from related activities, etc (see instructions) | **12** | 504,625

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) | **14** | 88 360 %

15 Public support percentage for 2016 Schedule A, Part II, line 14 | **15** | 89 980 %

16a **33 1/3% support test—2017.** 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—2016.** 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—2017.** 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2016.** 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

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

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2016 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2017** (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from **2016** Schedule A, Part III, line 17	18	

19a **331/3% support tests—2017.** 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—2016.** 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 ▶ ☐

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

Part IV **Supporting Organizations**

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	**11a**		
b	A family member of a person described in (a) above?	**11b**		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI*	**11c**		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization*	**2**		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)*	**1**		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? *If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s)*	**2**		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard*	**3**		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**

- **a** ☐ The organization satisfied the Activities Test Complete **line 2** below
- **b** ☐ The organization is the parent of each of its supported organizations Complete **line 3** below
- **c** ☐ The organization supported a governmental entity Describe in **Part VI** how you supported a government entity (see instructions)

			Yes	No
2	Activities Test **Answer (a) and (b) below.**			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities*	**2a**		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement*	**2b**		
3	Parent of Supported Organizations **Answer (a) and (b) below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in **Part VI.***	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in **Part VI.** the role played by the organization in this regard*	**3b**		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 (explain in Part VI) **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	**Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	**Total** (add lines 1a, 1b, and 1c)	1d		
e	**Discount** claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	**Minimum Asset Amount** (add line 7 to line 6)	8		

	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	**Current Year**
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in **Part VI**) See instructions	
7 **Total annual distributions.** Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**) See instructions	
9 Distributable amount for 2017 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	**(i) Excess Distributions**	**(ii) Underdistributions Pre-2017**	**(iii) Distributable Amount for 2017**
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013.			
c From 2014.			
d From 2015.			
e From 2016.			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2017 from Section D, line 7 $			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 **Excess distributions carryover to 2018.** Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2013.			
b Excess from 2014.			
c Excess from 2015.			
d Excess from 2016.			
e Excess from 2017.			

Additional Data

Software ID:
Software Version:
EIN: 81-0512368
Name: SWAN VALLEY CONNECTIONS

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b, Part V, line 1, Part V, Section B, line 1e, Part V Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See instructions)

Facts And Circumstances Test

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
SWAN VALLEY CONNECTIONS

Employer identification number
81-0512368

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ________

4 Number of states where property subject to conservation easement is located ▶ ________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ ________

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ $ ________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ ________

(ii) Assets included in Form 990, Part X ▶ $ ________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ $ ________

b Assets included in Form 990, Part X ▶ $ ________

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☐

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a)Current year	(b)Prior year	(c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance					
b Contributions . . .					
c 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 current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶

b Permanent endowment ▶

c Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		32,000		32,000
b Buildings				
c Leasehold improvements				
d Equipment		24,047	5,622	18,425
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))* . . ▶				50,425

Part VII **Investments—Other Securities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(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)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII **Investments—Program Related.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX **Other Assets.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15)* . . . . ▶	

Part X **Other Liabilities.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
SWAN VALLEY CONNECTIONS

Employer identification number
81-0512368

Part I General Information on Grants and Assistance

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? . . . . . ☑ **Yes** ☐ **No**

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

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000 Part II can be duplicated if additional space is needed

	(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								

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

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

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22
Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of noncash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of noncash assistance
(1) FOREST STEWARDSHIP AND RESTORATION (FIRE FUELS MITIGATION)	19	101,795		CASH GRANTS	
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	**Explanation**
PART I, LINE 2	INDIVIDUAL/ORGANIZATION APPLIES FOR A COST SHARE GRANT WITH DETAILS OF THE PROJECT AND AN ESTIMATE FROM A CONTRACTOR ONE OF OUR SVC EMPLOYEES WHO MANAGE THE FOREST FUELS REDUCTION AND STEWARDSHIP PROGRAM MAKES A SITE VISIT TO VERIFY THE PROJECT MEETS THE FOREST FUELS REDUCTION CRITERIA SPECIFIED BY DNRC FOR ELIGIBILITY FOR COST SHARE FUNDING AND THAT THE CONTRACTOR COST ESTIMATE IS IN LINE WITH MARKET PRICES AND THE SCOPE OF THE PROJECT A MAXIMUM PROJECT COST AND COST SHARE FUNDING AMOUNT IS SET AND A COST SHARE FUNDING AGREEMENT SIGNED BY BOTH PARTIES SPECIFYING THE GRANT ELIGIBILITY AMOUNT AND TERMS OF THE AGREEMENT THE RECIPIENT ALSO RECEIVES A COPY OF THE TREATMENT GUIDELINES THAT ARE TO BE FOLLOWED BY THE CONTRACTOR WHICH IS ALSO SIGNED AT THE CONCLUSION OF THE PROJECT AN SVC EMPLOYEE INSPECTS THE TREATMENT TO VERIFY THAT THE GUIDELINES HAVE BEEN FOLLOWED AND THE TREATMENT IS COMPLETED ACCORDING TO THE ORIGINAL AGREEMENT AFTER A SUCCESSFUL INSPECTION, A COST SHARE REIMBURSEMENT CHECK IS ISSUED INDIVIDUAL LANDOWNERS (INDIVIDUALS OR ORGANIZATION) ARE RESPONSIBLE FOR CONTRACTING DIRECTLY WITH A LICENSED CONTRACTOR TO DO THE WORK SVC DOES NOT ENTER INTO CONTRACT FOR THE WORK INDIVIDUALS ARE RESPONSIBLE FOR PAYMENTS TO THE CONTRACTOR SVC REIMBURSES THE INDIVIDUALS/ORGANIZATIONS

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | DLN: 93493318123418

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2017

Open to Public Inspection

Name of the organization
SWAN VALLEY CONNECTIONS

Employer identification number
81-0512368

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE CENTER HAS A WRITTEN POLICY THAT REQUIRES THE FORM 990 AND ALL SCHEDULES BE PROVIDED E LECTRONICALLY TO EACH VOTING MEMBER OF THE BOARD OF DIRECTORS PRIOR TO ITS BEING FILED WIT H THE IRS THE FORMS MUST ALSO BE REVIEWED AND APPROVED BY THE PRESIDENT AND TREASURER BEF ORE FILING WITH THE IRS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY REQUIRES THAT ANY POTENTIAL CONFLICT OF INTEREST THAT COULD RESULT IN A DIRECT OR INDIRECT FINANCIAL OR PERSONAL BENEFIT TO A DIRECTOR, OFFICER OR STAFF MEEMBER MUST BE DISCLOSED TO THE BOARD OF DIRECTORS OR COMMITTEE AUTHORIZING A CONTRACT OR OTHER TRANSACTION THE CONFLICT OF INTEREST POLICY IS REVIEWED AND SIGNED ANNUALLY BY ALL DIRECTORS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	COMPENSATION FOR THE PRESIDENT/SECRETARY IS SET ANNUALLY BY THE FINANCE COMMITTEE COMPENS ATION IS REVIEWED AN APPROVED BY THE EXECUTIVE COMMITTEE BEFORE BEING PRESENTED TO THE BOA RD OF DIRECTORS FOR FINAL APPROVAL SALARIES AND WAGES ARE REVIEWED AT LEAST ANNUALLY BY T HE PRESIDENT/SECRETARY PRIOR TO MAKING RECOMMENDATIONS TO THE FINANCE COMMITTEE COMPENSAT ION IS SET BY THE FINANCE COMMITTEE AFTER CONSIDERING THE RECOMMENDATIONS OF THE PRESIDENT SECRETARY

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 18	DOCUMENTS ARE AVAILABLE WHEN REQUESTED IN PERSON OR BY MAIL

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	DOCUMENTS ARE AVAILABLE WHEN REQUESTED IN PERSON OR BY MAIL