Department of the Treasury

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.

20**18** Open to Public

OMB No 1545-0047

Inspection ▶ Go to www.irs.gov/Form990 for instructions and the latest information. 2018, and ending For the 2018 calendar year, or tax year beginning D Employer identification number Check if applicable C Name of organization Appalachian Forest Heritage Area Inc. Address change 20-0815517 Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number П Name change Initial return 304-636-6182 City or town, state or province, country, and ZIP or foreign postal code Final return/terminated G Gross receipts \$ Amended return Elkins, WV 26241 Application pending F Name and address of principal officer H(a) is this a group return for subordinates? Yes Vo H(b) Are all subordinates included? ☐ Yes ☐ No **☑** 501(c)(3) 501(c) (If "No," attach a list (see instructions) 4947(a)(1) or Tax-exempt status Website: ▶ www.appalachianforest.us H(c) Group exemption number ▶ Form of organization 🗸 Corporation 🔲 Trust 🔲 Association L Year of formation M State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities. Provide coordinating support for organizations and SCANNED FEB 1 8 2020 Activities & Governance agencies within the Appalachian Forest Heritage Area who regularly support forest heritage culture, historic preservation, conservation, and community development within our organizational themes. 2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a). 10 RECEIVED Number of independent voting members of the governing body (Part V line-16 10 Total number of individuals employed in calendar year 2018 (Part V, line 2) 78 Total number of volunteers (estimate if necessary) 500 Total unrelated business revenue from Part VIII, column (C), line 12 0 Net unrelated business taxable income from Form 990-T, line 38 0 **Current Year** 8 Contributions and grants (Part VIII, line 1h). 456,211 572,203 9 Program service revenue (Part VIII, line 2g) 171,806 188,840 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 0 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 711 0 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 628,728 761,043 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) O 0 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) 565,905 616,184 16a Professional fundraising fees (Part IX, column (A), line 11e) ol Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 58,028 76,438 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 624,944 692.622 19 Revenue less expenses. Subtract line 18 from line 12 3,795 68,421 End of Year Beginning of Current Year 20 Total assets (Part X, line 16) 78,971 146,244 Total liabilities (Part X, line 26) . 21 16,959 9,122 22 Net assets or fund balances. Subtract line 21 from line 20 62,012 137,122 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 Deglaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Date Here Preparer's signature Print/Type preparer's name Date Paid Check I If self-employed Preparer Firm's EIN ▶ Firm's name **Use Only** Firm's address ▶ Phone no May the IRS discuss this return with the preparer shown above? (see instructions)] Yes [] No

Form 99	J (2018)	Page 2
Part l	•	
	Check if Schedule O contains a response or note to any line in this Part III	🗸
1	Briefly describe the organization's mission:	
	The Appalachian Forest Heritage Area integrates central Appalachian forest history, culture, natural history, products, and forestry management into a heritage tourism initiative to promote rural community development.	
	and to estry management into a heritage tourism mittative to promote rural community development.	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	-]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.	Jies Elito
4	Describe the organization's program service accomplishments for each of its three largest program services, a	s measured by
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocathe total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 640,947 including grants of \$ 539,024) (Revenue \$	723,992)
	AFHA AmeriCorps "Enhancing Assets to Benefit to Benefit Communities deployed 40 National Service members throu	ghout the state
	West Virginia to support organizations serving within the themes of Conservation, Historic Preservation, and Heritage	
	Community Development. Members provided over 45,000 hours of service to their sites. Conservation service specific	
	activities such as watershed restoration, environemental education, non-native species management, field data collect	
	planting, trail building and maintenance, environmental recreation support, archaelogical support, among others. Historic structures of providing hands on services for rehabilitation of historic structures. Co	
	Development members supported organizations such as Mainstreet, Rural Development organizations, planning office	
	members provided support for volunteer management activities for their sites and added greatly the volunteer capacity	
	of their specific organizations. AC members managed over 1350 unique volunteers for their sponsoring sites in 2017, in	
	capacity and supporting over 6500 additional volunteer hours. Members provided direct service resulting in the improv	ement of over
	1550 acres of public land in 2018.	
4b	(Code:) (Expenses \$ 6,137 including grants of \$) (Revenue \$	550.00)
70	AFHA Discovery Visitor Center hosted interpretive displays showcasing the Appalachian Fotrest Heritage Area's diversity	· ′
	cultural assets. Visitors are able to take a tour of what the area has to offer within the Discovering AFHA display area,	
	the WV European immigration patterns in our rotating exhibit space.	
		
	······································	
	7	
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
		·
		·
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ 3,884 including grants of \$ 459) (Revenue \$ 9,259)	
40	Total program service expenses	



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	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		1
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		1
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? <i>If "Yes," complete Schedule C, Part II</i>	4	1	
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		1
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		v
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
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		√
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		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
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		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	^	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		√
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
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		√
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		1
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		√
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		√
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		√
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a		20a		1
	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		1

Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
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		√
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		√
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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		✓
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		
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_		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓_
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		1
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		-
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
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		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	✓	
Part				_
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>		للے
4	Enter the number reported in Boy 2 of Form 1006 Fator 0 of and applicable	LIE W	Yes	No
1a h	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 4 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 5			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
С	reportable gaming (gambling) winnings to prize winners?	1c	**************************************	
	- openius gamma (gammama) miningo to prizo minio o		n 990	(2018)

art	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1	,	
L	Statements, filed for the calendar year ending with or within the year covered by this return 2a 78			
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	Y	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		7
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		✓
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		✓_
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		1
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).			
а	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		✓_
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			,
a	required to file Form 8282?	7c		-
ď	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f		-
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
_	sponsoring organization have excess business holdings at any time during the year?	8		✓
9	Sponsoring organizations maintaining donor advised funds.	_		
a b	Did the sponsoring organization make any taxable distributions under section 4966?	9a 9b	_	
10	Section 501(c)(7) organizations. Enter	90		
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			1
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
100	against amounts due or received from them.)	120		<u> </u>
12a b	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a		<u> </u>
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		√
	Note. See the instructions for additional information the organization must report on Schedule O.		,	
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	1		,
C	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		✓_
b •=	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15	j	/
	If "Yes," see instructions and file Form 4720, Schedule N.			<u> </u>
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		/
	If "Yes," complete Form 4720, Schedule O.			
		Form	₁990	(2018)

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Part					
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sci				
	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>	<u>.</u> .		✓
Secti	on A. Governing Body and Management				
				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	10			
	If there are material differences in voting rights among members of the governing body, or		100 m		
	if the governing body delegated broad authority to an executive committee or similar				2
	committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent . 1b	10			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation	ship with	34.4		
	any other officer, director, trustee, or key employee?		2		✓
3	Did the organization delegate control over management duties customarily performed by or under				
	supervision of officers, directors, or trustees, or key employees to a management company or other person		3		✓
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was		4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets? .	5		✓_
6	Did the organization have members or stockholders?		6	✓	
7a	Did the organization have members, stockholders, or other persons who had the power to elect of	r appoint		,	
	one or more members of the governing body?		7a	✓	
b	Are any governance decisions of the organization reserved to (or subject to approval by) restablished are no reserved at the state of t	nembers,			,
_	stockholders, or persons other than the governing body?		7b	£1.34958°2	√
8	Did the organization contemporaneously document the meetings held or written actions undertake	en during			
_	the year by the following: The governing body?			4000	
a b	Each committee with authority to act on behalf of the governing body?		8a 8b	*	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be re	· · ·	OD	•	
3	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	acrieu at	9		1
Section	on B. Policies (This Section B requests information about policies not required by the Inter	nal Reven	_	nde.)	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	[10a		✓
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 purp		10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing		11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		1. 12 mg		1757
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	✓	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	conflicts?	12b	✓	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy?	If "Yes,"			
	describe in Schedule O how this was done		12c		✓
13	Did the organization have a written whistleblower policy?		13		✓_
14	Did the organization have a written document retention and destruction policy?		14		√
15	Did the process for determining compensation of the following persons include a review and ap				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and	decision?		X State	
a	The organization's CEO, Executive Director, or top management official	• • •	15a		<u>√</u>
b	Other officers or key employees of the organization		15b	5 DESTRIBU	√
40	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 arrawith a taxable entity during the year?		160		
		<u> </u>	16a		V 234234
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to ev participation in joint venture arrangements under applicable federal tax law, and take steps to safet				
	organization's exempt status with respect to such arrangements?	Juaru lile	16b	36.37 S.	
Section	on C. Disclosure	<u>· · · </u>	100		
17	List the states with which a copy of this Form 990 is required to be filed ▶ West Virginia				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990,	and 990-T	(Sect	ion 5	01(c)
_	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply		,,	J	(-)
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	· ·	erest c	olicy	, 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 bo	oks and rec	ords	>	
	Logan Smith, 401 Davis Avenue Rm 312, Elkins, WV 304-636-6182	_			

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

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

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

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

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 no	r any relate	d orga	anız	atio	n c	ompe	nsa	ited any curren	t officer, director	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any hours for	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the	(E) Reportable compensation from related organizations	(F) Estimated amount of other. compensation
	related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Bob Johnson - President	.5	1		1				0	0	
(2) Dave McGill - V. President	.25	1		1				0	0	- (
(3) Joseph Sabatino - Treasurer	.25	1		1				0	0	
(4) Travis Miller - Secretary	.25	1		1			_			
(5) Frank Stewart	.25	1						0	0	(
(6) Phyllis Baxter	25					_		7,926	0	(
(7) Terry Hackney	.25	1		_		-		0	-	
(8) Kent Walker	.25	1						0	0	(
(9) Jen Durben	.25	1						0	0	(
(10) Anne Beardslee	.5	1						_ 0	0	(
(11) Jackie Burns	.25							0	0	(
(12)										
(13)										
(14)										

Part		tees, Key E	mploy	yees	(6	C)	lighe	st C			contin	ued)
	(A) Name and title	(B) Average hours per	box, unless person is both					n an	(D) Reportable compensation	(E) Reportable compensation from		(F) Estimated amount of
	•	week (list any hours for related organizations below dotted line)	Individua or directo	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizatii (W-2/1099-N	ons	other compensation from the organization and related organizations
(15)												,
(16)			-	-								
(17)			-	-	-	-		-	 			
(18)					-	-		-				
(19)			-									
(20)			-	-								
(21)			-	-	-							
(22)						-		-				
(23)					 -	-		-				
(24)			_	-	-	-		-				
(25)			-		_	_	-	-				
1b	Sub-total		-	<u> </u>	<u> </u>		L	>	7926		0	0
c d		<u>.</u>	. <u>.</u>					<u> </u>	7926		0	0
2	Total number of individuals (including but reportable compensation from the organ		d to th	nose	list	ted	above	e) w	rho received m	ore than \$1	00,00	0 of
3	Did the organization list any former of employee on line 1a? If "Yes," complete							emp	oloyee, or high	nest compe	ensate	Yes No d 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
4	For any individual listed on line 1a, is the organization and related organizations individual											
5	Did any person listed on line 1a receive of for services rendered to the organization	or accrue co	ompe compi	nsat lete	tion <i>Sch</i>	fro ned	m any ule J i	un for s	irelated organiz	zation or inc		al 25 √ 5 ✓
	on B. Independent Contractors											
1	Complete this table for your five highest compensation from the organization. Repyear.											
	(A) Name and business add	lress						_	(B) Description of s	ervices		(C) Compensation
								-				
2	Total number of independent contractor	ors (include	na bi	ıt n	ot	lımıt	ed to) th	nose listed abo	ove) who	14000	774457
	received more than \$100,000 of compens								0			AN STREET

Part	VIII	Statement of Rever						_
P		Check if Schedule O	contains a re	esponse or note to				
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Grants	1a	Federated campaigns	<u>1</u> 8	0				
Gra	b	Membership dues	<u>11</u>			1		
Arr	С	Fundraising events .		+		i		
Gif	d	Related organizations						
ži ži	е	Government grants (conta		556,330				
atio er \$	f	All other contributions, gift		_				
현취		and similar amounts not inclu						
Contributions, Gifts, Grants and Other Similar Amounts	g	Noncash contributions include				į		
$\overline{}$	<u>h</u>	Total. Add lines 1a-1f	<u>·_·</u>		572,203			
JUK	200	UC Forest Comice		Business Code			·····	
Jeve	2a	US Forest Service		110000	38,563	38,563		
Program Service Revenue	b	Arthurdale Heritage Inc East WV Comm & Tech		519100	12,719	12,719		
į	d	Woodlands Dev Group		110000	12,475 11,883	12,475 11,833	<u> </u>	
ع ي	e	Beverly Heritage Center	-	540400	11,755	11,755		
graı	f	All other program servi			101,445	101,445		<u> </u>
Pro	g	Total. Add lines 2a-2f		🕨	188,840	101,440		
	3	Investment income (i						
		and other similar amou	unts)	▶	o	o		
	4	Income from investment	of tax-exempt	bond proceeds ▶	0	0		
	5	Royalties		. <u></u> ▶ ∫	0	O		
Í		_	(i) Reaf	(ii) Personal				
	6a	Gross rents .			1	}		
	b	Less rental expenses						
	С	Rental income or (loss)						
	d	Net rental income or (lo			0	0		
	7a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory		 		ŀ		
	b	Less: cost or other basis						
		and sales expenses .				[
	d	Gain or (loss) L			0	0		
	u	iver gain or (loss) .						X
/enne	8a	Gross income from fur events (not including \$	ndraising					
Other Reve		of contributions reported See Part IV, line 18		a				
뀱	b	Less: direct expenses		b				
	С	Net income or (loss) fro			0			
	9a	Gross income from gar						
		See Part IV, line 19 .		a				
		Less: direct expenses		b				
		Net income or (loss) fro			0	0		
	10a	Gross sales of inv	-	1				
		returns and allowances		a 0	1			
	b	Less: cost of goods so		b				
	<u> </u>	Net income or (loss) fro			<u>0</u>	0		
	44-	Miscellaneous Re	venue	Business Code				<u> </u>
	11a			 				
	b			, -				
	d c	All other revenue .		 	0	0		
	e	Total. Add lines 11a-1		<u> </u>	0	- 9	,,,, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
	12	Total revenue. See ins		, , , , , , , , , , , , , , , , , , ,	761.043	188.840	المارية	<u></u>

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must con	plete all columns. Al	l other organization	s must complete co	lumn (A).
	Check if Schedule O contains a respon	se or note to any lin	e in this Part IX .		🗆
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	0		,	, , , , , , , , , , , , , , , , , , , ,
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0			
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				<i>"</i>
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	0			
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	o			
7 8	Other salaries and wages Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	567,544	557,223	10,321	0
9	Other employee benefits	3,811	3,734	77	
10	Payroll taxes	44,829	43,932	897	
11 a	Fees for services (non-employees): Management	10,359	10,359	0	
b	Legal	0			
۲ د	Accounting	0			
d e	Lobbying	0			
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column			,	
	(A) amount, list line 11g expenses on Schedule O.)	3,853	3,853	o	
12	Advertising and promotion	7,144	7,144	0	
13	Office expenses	5,036	4,935	101	
14	Information technology	1,979	990	989	
15	Royalties	0			
16	Occupancy	5,148	0	5,148	
17 18	Travel	13,548	13,328	220	
	for any federal, state, or local public officials	o			
19	Conferences, conventions, and meetings	1,009	856	153	
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0			
23	Insurance	9,455	0	9,455	···········
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
а	Project Supplies	11,617	9,422	2,195	
b	Staff Training	3,508	3,083	425	
c	Memberships and Dues	400	350	50	
d	All obbar overseen				
е 25	All other expenses Total functional expenses. Add lines 1 through 24e	3,382	3,219	163	
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs	692,622	662,428	30,194	
	from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

P	art X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Par	t X		🗆
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	14,607	1	9,829
	2	Savings and temporary cash investments	0	2	0
	3	Pledges and grants receivable, net	38,349	3	98,565
	4	Accounts receivable, net	25,708	4	34,394
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L	0	5	0
Assets	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L			
	,	 -	0	_	
Ass	7	Notes and loans receivable, net	0		0
	8	Inventories for sale or use	0		420
	9 10a	Prepaid expenses and deferred charges	0	9	3,035
	ь	Less: accumulated depreciation 10b		10c	0
	11	Investments—publicly traded securities	0	H	0
	12	Investments—other securities See Part IV, line 11			0
	13	Investments—program-related. See Part IV, line 11			0
	14	Intangible assets			0
	15	Other assets. See Part IV, line 11		15	1
	16	Total assets. Add lines 1 through 15 (must equal line 34)	78,971		146,244
	17	Accounts payable and accrued expenses	14,403		1,694
	18	Grants payable		18	0
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D .	963	21	0
ŝ	22	Loans and other payables to current and former officers, directors,			
2		trustees, key employees, highest compensated employees, and			
Liabilities	1	disqualified persons. Complete Part II of Schedule L	0	22	0
Ξ.	23	Secured mortgages and notes payable to unrelated third parties [0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X	ı		
	i _	of Schedule D	1,593		7,428
	26	Total liabilities. Add lines 17 through 25	16,959	26	9,122
ces		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.	· · · · · · · · · · · · · · · · · · ·		
Įa,	27	Unrestricted net assets	62,013		137,122
Ba	28	Temporarily restricted net assets	0	_	0
Net Assets or Fund Balances	29	Permanently restricted net assets	0	29	0
ţ	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Ä	32	Retained earnings, endowment, accumulated income, or other funds .		32	
Sel	33	Total net assets or fund balances	62,013	33	137,122
	34	Total liabilities and net assets/fund balances	78.971	34	146.244
					Form 990 (2018)

Form 9	90 (2018)			Pe	age 12
Par	XI Reconciliation of Net Assets		-		<u> </u>
	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		76	61,043
2	Total expenses (must equal Part IX, column (A), line 25)	2			92,622
3	Revenue less expenses Subtract line 2 from line 1	3			68,42
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			62,013
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			$\overline{}$
7	Investment expenses	7			
8	Prior period adjustments	8			6,68
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		13	37,122
Part	XII Financial Statements and Reporting	1			,
	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				127
	If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain ir	n J		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	1	A30000
	If "Yes," check a box below to indicate whether the financial statements for the year were comreviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	piled o			
þ	Were the organization's financial statements audited by an independent accountant?		2b		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were audit separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	ed on a			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o of the audit, review, or compilation of its financial statements and selection of an independent accounts.				1
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in	1		

the Single Audit Act and OMB Circular A-133?......

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.

За

3b

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047

Open to Public Inspection

Name	of the organization					Employer identification	number		
	achian Forest Heritage Area Inc.					20-08			
Par							ns.		
The 6 2 3 4	organization is not a private foundation of church, convention of church A school described in section A hospital or a cooperative how A medical research organization hospital's name, city, and state	thes, or association 170(b)(1)(A)(ii). Spital service orgon on operated in co	on of churches descr (Attach Schedule E (F panization described i	ibed in se form 990 n sectior	ection 17 or 990-E n 170(b)(1	0(b)(1)(A)(i). Z)) i)(A)(iii) .	(iii). Enter the		
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 7									
8	A community trust described	n section 170(b)	(1)(A)(vi). (Complete	Part II.)					
9	An agricultural research organ or university or a non-land-grauniversity:	ant college of agr	iculture (see instruction	ons). Ente	r the nan	ne, city, and state of	the college or		
10	An organization that normally receipts from activities related support from gross investment acquired by the organization and	I to its exempt fui it income and uni after June 30, 197	nctions—subject to c related business taxa 75. See section 509(a	ertain exc ble incom a)(2). (Cor	ceptions, ne (less so mplete Pa	and (2) no more that ection 511 tax) from art III.)	n 331/3% of its		
11	An organization organized and	•	•	-					
12	An organization organized and of one or more publicly support Check the box in lines 12a through	orted organizatio	ns described in sect i	ion 509(a)(1) or se	ection 509(a)(2). Se	e section 509(a)(3).		
а	☐ Type I. A supporting organithe supported organization supporting organization. Y	n(s) the power to	regularly appoint or e	elect a ma	yority of t				
b	Type II. A supporting orga control or management of organization(s). You must	the supporting o	rganization vested in	the same					
С	Type III functionally integ its supported organization						ally integrated with,		
d	Type III non-functionally that is not functionally inte requirement (see instructional see instructions).	grated. The orga	nization generally mu	st satisfy	a distribi	ution requirement an			
е	Check this box if the organ functionally integrated, or						e II, Type III		
f	Enter the number of supported	organizations							
g	Provide the following information	n about the supp	orted organization(s)						
	(i) Name of supported organization	(II) EIN	(III) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization or governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
				Yes	No				
(A)									
(B)									
(C)									
(D)									
(E)		_					-		

Total

Schedule A (I	Form 990 or 990-EZ) 2018						Pag		
Part II	Support Schedule for Organiza	tions Descr	ibed in Secti	ions 170(b)(1)(A)(iv) and 1	170(b)(1)(A)(v	(i)		
	(Complete only if you checked the	ne box on line	5, 7, or 8 of	Part I or if th	e organizatio	n failed to qu	alify 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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total		

Calen	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	267.452	467 210	440.702	440.999	E72 202	2 206 255
•	· · · · · · · · · · · · · · · · · · ·	367,153	467,219	449,792	449,888	572,203	2,306,255
2	Tax revenues levied for the organization's benefit and either paid						
	to or expended on its behalf	_		_[_[_[_
_	· •	0	0	- 0	0	9	0
3	The value of services or facilities	J			j		
	furnished by a governmental unit to the	1					
	organization without charge	2,400	2,400		2,400	2,400	12,000
4	Total. Add lines 1 through 3	369,553	469,619	452,192	452,288	574,603	2,318,255
5	The portion of total contributions by						
	each person (other than a	1					
	governmental unit or publicly	· .				Ì	
	supported organization) included on						
	line 1 that exceeds 2% of the amount	[
	shown on line 11, column (f)						. 0
6	Public support. Subtract line 5 from line 4						2,318,255
Secti	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	369,553	469,219	452,192	452,288	574,603	2,318,255
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from	ļ					
	similar sources	o	0	ol	o	o	0
9	Net income from unrelated business					<u>-</u>	
	activities, whether or not the business						
	is regularly carried on	ام	0	٥	0	o	0
10	Other income. Do not include gain or			"			<u> </u>
	loss from the sale of capital assets						
	(Explain in Part VI.)	o	o	162,444	174,106	188,840	525,390
11	Total support. Add lines 7 through 10			102,444	174,100	100,040	2,843,645
12	Gross receipts from related activities, etc.	(see instruction	nel	<u> </u>		12	<u>2,843,645</u> 812,615
13	First five years. If the Form 990 is for the						
	organization, check this box and stop her						
Secti	on C. Computation of Public Suppor			<u>`</u>			
14	Public support percentage for 2018 (line 6			1 column (f)		14	82 %
	,, ,		•	• • •	• •	15	86 %
15 160	Public support percentage from 2017 Sch 331/3% support test—2018. If the organi			 con line 13 on	 d line 14 is 33		
16a	box and stop here. The organization qual				u iiile 14 is 33	17376 OF THOTE,	• 🗸
_	331/3% support test—2017. If the organization						
b	this box and stop here. The organization						
	· · · · · · · · · · · · · · · · · · ·	•					_
17a	10%-facts-and-circumstances test—20						
	10% or more, and if the organization me						
	Part VI how the organization meets the "	facts-and-circi	umstances" te	st. The organiz	ation qualifies	as a publicly	
	organization						▶ □
b	10%-facts-and-circumstances test - 20	017. If the orga	anization did n	ot check a box	on line 13, 1	6a, 16b, or 17a	a, and line
	15 is 10% or more, and if the organiza						
	Explain in Part VI how the organization in	neets the "fact	s-and-circums	stances" test. 1	The organization	on qualifies as	a publicly
	supported organization	. •					▶ 🛚
18	Private foundation. If the organization die	d not check a l	oox on line 13,	, 16a, 16b, 17a,	or 17b, checi	k this box and	see
	instructions						▶ □

Part							
	(Complete only if you checked the						nder Part/ll.
	If the organization fails to qualify	under the te	sts listed belo	ow, please co	omplete Part	!!.)	
Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2014_	(b) 2015	(c) 2016	(d) 2017	(e) 2018	/(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the				1		•
	organization's tax-exempt purpose				<u> </u>		
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		1				
	or expended on its behalf						
5	The value of services or facilities						
•	furnished by a governmental unit to the	,	` `		y	'	
	organization without charge	[1		
6	Total. Add lines 1 through 5			/			
	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .		1		}		
h	Amounts included on lines 2 and 3			/			
. b	received from other than disqualified				į.	1	
	persons that exceed the greater of \$5,000						•
	or 1% of the amount on line 13 for the year				Ì		
_	• • •				 		
C	Add lines 7a and 7b	#E####################################	76537713 <i>00667 (1110068</i> 2	TO SERVICE AND LINES AND L	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
8	Public support. (Subtract line 7c from line 6.)	型				216	
Coot	on B. Total Support		MANAGER LANGE		100 Company		<u> </u>
	idar year (or fiscal year beginning in)	(a) 2014	/(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	(a) 2014	(6) 2013	(0) 2010	(4) 2017	(e) 2010	(i) Total
10a	Gross income from interest, dividends,	 /			 		 -
IVA	payments received on securities loans, rents,				1	,	
	royalties, and income from similar sources.						
L	Unrelated business taxable income (less				 		
b	section 511 taxes) from businesses						
	acquired after June 30, 1975						
_	,	/		-			
	,	<u> </u>					
11	Net income from unrelated business]	ļ	
	activities not included in line 10b, whether or not the business is regularly carried on	l					
12	Other income. Do not include gain or		4		İ		
	loss from the sale of capital assets				1		
	(Explain in Part VI.)				 	ļ	
13	Total support. (Add lines 9, 10c, 11,				ľ		,
	and 12.)	L		<u> </u>		L	504(1/0)
14	First five years. If the Form 990 is for the	-			_		
	organization, check this box and stop he			<u>· · · · · · · · · · · · · · · · · · · </u>	<u> </u>	<u> </u>	<u>· · · </u>
	on C. Computation of Public Suppor			 			
15	Public support percentage for 2018 (line						%
16	Public support percentage from 2017 Sci				<u> </u>	16	%
	on D. Computation of Investment In						
17	Investment income percentage for 2018 (17	<u>%</u>
181	Investment income percentage from 2017					18	%
19a	33 ¹ / ₃ % support tests—2018. If the organ						
	17 is not more than 331/3%, check this box						
X	331/3% support tests—2017. If the organiz						
	line 18 is not more than 331/3%, check this						
/20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o	check this box	and see instru	ctions 🕨 🔲

Part IV Supporting Organizations

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

Section	on 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	_	
С	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		
С	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		ļ
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		
С	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 (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	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		<u> </u>
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		
С	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 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)			<u> </u>
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	, ,	, ,	,
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c	<u> </u>	
Secti	on B. Type I Supporting Organizations		r 	T
			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	1		
	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	<u> </u>	
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		
Secti	on 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).	<u> </u>		
		1	<u> </u>	_
Secti	on D. All Type III Supporting Organizations		V	N
1	Did the exceptation exclude to each of its supported exceptations, by the last day of the fifth month of the		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		<u>. </u>	
	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	Ĺ	<u> </u>
	on E. Type III Functionally Integrated Supporting Organizations		. 4	-1
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see i	nstru	Ction	S).
a b	☐ The organization satisfied the Activities Test. Complete line 2 below. ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization is the parent of each of its supported organizations. Complete line's below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	strict	ions)
2	Activities Test. Answer (a) and (b) below.	, ,	Yes	
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			110
-	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	<u></u>		
_	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			<u> </u>
L	trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	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	3h		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jan	izations					
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)				
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):							
a Average monthly value of securities	1a						
b Average monthly cash balances	1b						
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-functionall	y in	tegrated Type III supporting	organization (see				

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organi	zations (continued)	,_
Secti	on D-Distributions			Current Year
1	Amounts paid to supported organizations to accomplish			
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	rted	
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
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	h the organization is res	ponsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2018 from Section C, line 6			
_10	Line 8 amount divided by line 9 amount			
Secti	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6		, , , , , , , , , , , , , , , , , , , ,	
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See			
	Instructions		<u> </u>	
	Excess distributions carryover, if any, to 2018		······································	
	From 2013	·		
<u>b</u>	5 0045			
<u>c</u>	From 2015			
<u>d</u> _	5 0017		······································	
	Total of lines 3a through e			
<u>f</u>			·	1
<u>g</u>	Applied to underdistributions of prior years Applied to 2018 distributable amount			
<u>;</u> ;	Carryover from 2013 not applied (see instructions)	1		
-	Remainder Subtract lines 3g, 3h, and 3i from 3f.		1	
4	Distributions for 2018 from		1	
7	Section D, line 7:			
a	Applied to underdistributions of prior years		<u> </u>	
b	Applied to 2018 distributable amount			
C	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2018, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			,
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2019. Add lines 3 _j and 4c.			,
8	Breakdown of line 7:		······································	
а	Excess from 2014			
b	Excess from 2015 .		······································	,
С	Excess from 2016			
d	Excess from 2017			
е	Excess from 2018			

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.)
	·
	,
	,

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ.

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

OMB No 1545-0047 2018

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

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

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

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

	of organization	· · · · · · · · · · · · · · · · · · ·		Employer ide	ntification number
	_	- I		Limployer ide	
	achian Forest Heritage Area I-A Complete if the	e organization is exempt u	nder section 501	(c) or is a soction 527	20-0815517
1 2 3	Provide a description of definition of political campaign activities.	of the organization's direct and	indirect political c	ampaign activities in Par	t IV. (see instructions fo
Par	I-B Complete if th	e organization is exempt u	nder section 501	(c)(3).	
1 2 3 4a b Pari 1 2 3 4 5	Enter the amount of any If the organization incurr Was a correction made? If "Yes," describe in Part Enter the amount direct activities Enter the amount of the 527 exempt function act Total exempt function line 17b Did the filing organizatio Enter the names, address organization made payments.	e organization is exempt untily expended by the filing organization's funds consisting organization's funds consisting organization. expenditures. Add lines 1 and the filing organization for this years and employer identification ents. For each organization lister contributions received that were presented that the presented that were presented that were presented that the presented that the presented that the presented that were presented that the presented tha	nder section 501(Inization for section tributed to other or 2. Enter here and ear? d, enter the amount bromptly and directly	r section 4955 . rear?	Yes No. Yes No. No.
	(a) Name	I fund or a political action commi	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1)					
2)					
3)	١				
4)					
				 	
(5)					

Da	_	_	2

Schedule	C (Form	ം വയവ	ጉ ዓባብ.	F7	201R

Part II-A		-A	Complete if the organizati section 501(h)).	Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).								
A	Che	eck D	if the filing organization beloaddress, EIN, expenses, an		iliated group membe	er's name,						
В	Che	eck 🕨	■ If the filing organization che	cked box A and '	'limited control" pr	ovisions apply.						
				obying Expendit			(a) Filing	(b) Affiliated				
			(The term "expenditures"				organization's totals	group totals				
•			lobbying expenditures to influence									
	b	Total	lobbying expenditures to influence	ce a legislative bo	ody (direct lobbying	3)						
			lobbying expenditures (add lines									
			r exempt purpose expenditures .									
	e	Total	exempt purpose expenditures (a	dd lines 1c and 1	d)							
		Lobb colur	oying nontaxable amount. Enter	the amount fr	om the following	table in both						
	\Box	If the	amount on line 1e, column (a) or (b)	is: The lobbying	nontaxable amount	is:						
		Not o	ver \$500,000	20% of the an	nount on line 1e							
		Over S	\$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000						
		Over S	\$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000						
		Over S	\$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess or	ver \$1,500,000						
		Over S	\$17,000,000	\$1,000,000								
	g	Gras	sroots nontaxable amount (enter	25% of line 1f)								
	h	Subt	ract line 1g from line 1a If zero or	less, enter -0-								
			ract line 1f from line 1c. If zero or				L					
			ere is an amount other than zer rting section 4911 tax for this yea		1h or line 1i, did		i -	Yes No				
		(So	me organizations that made a s	ection 501(h) ele	Period Under Sec ection do not have ructions for lines	e to complete all	of the five column	s below.				
			Lobbyii	ng Expenditures	During 4-Year Av	eraging Period						
		Ca	alendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) Total				
:	2a	Lobb	bying nontaxable amount									
			ying ceiling amount % of line 2a, column (e))									
	С	Total	lobbying expenditures									
	d	Gras	sroots nontaxable amount									
			sroots ceiling amount % of line 2d, column (e))		***************************************							
	f	Gras	sroots lobbying expenditures			· 						

Eor 4	(election under section 501(h)). each "Yes," response on lines 1a through 11 below, provide in Part IV a detailed	(a)		(b)
	iption of the lobbying activity.	Yes	No	Aı	nount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.				
а	Volunteers?	1	<u> </u>	7	苏格兰
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	✓	<u> </u>		
С	Media advertisements?	✓	<u> </u>		105
ď	Mailings to members, legislators, or the public?	✓	<u> </u>		300
е	Publications, or published or broadcast statements?	<u> </u>	<u> </u>		
f	Grants to other organizations for lobbying purposes?	<u> </u>	1	<u> </u>	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	1	<u> </u>		
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .	 	✓		
į	Other activities?	√	189950, 2000		750
j	Total Add lines 1c through 1			.256535248982	1,15
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	343174.53	√		
b	If "Yes," enter the amount of any tax incurred under section 4912		Total		
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.			#322## <i>7</i> //2	11 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2
Part	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	2//5/	<u></u>	otion	lialit kiraka liiteksi 111,22
Fait	501(c)(6).	J(J),	ńi se	Cuon	
	00 ((0)(0)		_		Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the		vear?		
Part	III-B Complete if the organization is exempt under section 501(c)(4), section 501(l <u></u>
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No,"				line 3, is
	answered "Yes."				
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid).	s of			
a	Current year		2a_	<u> </u>	
b	Carryover from last year	•	2b		
C	Total		2c	ļ	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion cexcess does the organization agree to carryover to the reasonable estimate of nondeductible lobble and political expenditure next year?				
5	and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions)	• •	4	 	
5		<u> </u>	_ 5_	L	
Par		01.00 100	t). Do	+11 ^ 1	nac 1 and
	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gr instructions); and Part II-B, line 1. Also, complete this part for any additional information.	oup iis	il), Pai	I II-A, I	illes i aliu
2 (300	modulong, and rait in b, into 1.7 186, complete the part for any additional information.				
			·		
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	990 or 990-EZ) 2018	Page 4
Part IV	Supplemental Information (continued)	
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No 1545-0047

Open to Public Inspection

Name o	t the organization		Employer identification number
	chian Forest Heritage Area		20-0815517
Par			
	Complete if the organization answered "		
		(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 h	neld in donor advised
	funds are the organization's property, subject to the	e organization's exclusive legal contro	ol? 🗌 Yes 🗌 No
6	Did the organization inform all grantees, donors, ar	nd donor advisors in writing that grain	nt funds can be used
	only for charitable purposes and not for the benefit	it of the donor or donor advisor, or f	for any other purpose
	conferring impermissible private benefit?		· · · · · · · · · · · · · · · · · · ·
Par	Conservation Easements.		
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the		
	Preservation of land for public use (e.g., recreati		f a historically important land area
	Protection of natural habitat	·	f a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organization he	ld a qualified conservation contribution	on in the form of a conservation
	easement on the last day of the tax year	,	Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified h		. 2c
d	Number of conservation easements included in (` ,	
_			
3	Number of conservation easements modified, trans		
•	tax year ►	ronou, ronousou, eminguieneu, er ten	a.co by the organization caring the
4	Number of states where property subject to conser	vation easement is located ▶	
5	Does the organization have a written policy reg		spection, handling of
-	violations, and enforcement of the conservation eas		•
6	Staff and volunteer hours devoted to monitoring, inspec	ting handling of violations, and enforcin	
•	Land volunteer mount devoted to mountaining, mapes	ang, nanding of violations, and omoroin	ig conservation decomente during the year
7	Amount of expenses incurred in monitoring, inspecting	handling of violations, and enforcing	conservation easements during the year
•	►\$	g, nariding or violations, and emorning	conscivation describing the year
8	Does each conservation easement reported on line	2(d) above satisfy the requirements of	f section 170(h)(4)(B)(i)
•	and section 170(h)(4)(B)(ii)?	· ·	· · · · · · · · · · · · Yes · No
9	In Part XIII, describe how the organization reports c		
•	balance sheet, and include, if applicable, the text of		·
	organization's accounting for conservation easemei	<u>_</u>	
Part			Other Similar Assets
	Complete if the organization answered "		
12	If the organization elected, as permitted under SFA		
14	works of art, historical treasures, or other similar		
	public service, provide, in Part XIII, the text of the fo		
b	If the organization elected, as permitted under SF		
b	works of art, historical treasures, or other similar		
	public service, provide the following amounts relating		addation, or research in future diffee of
			▶
	(i) Revenue included on Form 990, Part VIII, line 1		
2	(ii) Assets included in Form 990, Part X	historical transition	P \$
2	If the organization received or held works of art, following amounts required to be reported under SE		
	following amounts required to be reported under SF		
a	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		▶ \$

Sung the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection terms (check at that apply):	Part	Organizations Maintaining								
b Scholarly research e Other	3			other reco	rds, chec	k any of the	ne follo	wing that are a	significant i	ise of its
c	а	☐ Public exhibition		d	☐ Loan	or exchan	ge prog	rams		
c	b	☐ Scholarly research		, е	☐ Other	r		,		
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 of collection? Yes No	С	☐ Preservation for future generations	S							
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	4		tion's collections	and expl	aın how t	hey further	the or	ganization's exe	mpt purpos	e in Part
Part IV	5									-
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: Complete if the organization and the part XIII and complete the following table: Amount Id Id Id Id Id Id Id I	Doc			ained as	part of the	e organizai	ion's co	Direction? .	Yes	_ <u></u> No_
included on Form 990, Part X? If "Yes," explain the arrangement in Part XIII and complete the following table: Amount C Beginning balance 1c	Pall	Complete if the organization	•	s" on For	m 990, I	Part IV, lin	e 9, or	reported an ar	mount on I	-orm
c Beginning balance d Additions during the year 1 d	1a								_	——— □ No
d Additions during the year Distributions during the year Ending balance Distributions during the year Tending balance Tending	b	If "Yes," explain the arrangement in P	art XIII and comp	lete the fo	ollowing to	able:			mount	
d Additions during the year Distributions during the year Ending balance Distributions during the year Tending balance Tending	С	Beginning balance					10	:		
E Distributions during the year f Ending balance 20 Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	d						<u> </u>			
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 on Part XIII. Part V Endowment Funds. (a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years back	е	• ,								
Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	f						_			
Part V Endowment Funds. Camplete if the organization answered "Yes" on Form 990, Part IV, line 10.	2a								√? ☐ Yes	No
Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part IV, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part IV, line 11a. Complete if the organization described by the surface of the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part X, line 10. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a, See Form 990, Part X, line 10. Complete if the organization answere										
Complete if the organization answered "Yes" on Form 990, Part IV, line 10. Complete if the organization answered "Yes" (b) Pnor year (c) Two years back (d) Three years back (e) Four years back			<u> </u>		Apianatio	Triad book	piovid	ou on run zun .		_ <u></u>
(a) Current year (b) Pror year (c) Two years back (d) Three years back (e) Four years (answered "Ye	s" on For	m 990. F	Part IV. lin	e 10.			
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 ▶ % 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: (i) unrelated organizations (ii) related organizations b if "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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. Describtion of property (a) Cost or other basis (c) Accumulated (d) Book value depreciation b Buildings c Leasehold improvements d Equipment Other Other		<u></u>						(d) Three years bac	k (e) Four ye	ears back
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 ▶ % 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: (i) unrelated organizations (ii) related organizations b if "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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. Describtion of property (a) Cost or other basis (other) b Buildings c Leasehold improvements d Equipment Other Other	1a	Beginning of year balance		+		<u> </u>			+	
c Net investment earnings, gains, and losses	_			 		-			+ -	
e Other expenditures for facilities and programs		Net investment earnings, gains, and								
e Other expenditures for facilities and programs	d	Grants or scholarships			<u></u>			-	+	
f Administrative expenses	_	Other expenditures for facilities and							·	
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 ▶ % 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: (i) unrelated organizations 3a(i) b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 3b 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 (b) Cost or other basis (c) Accumulated depreciation (d) Book value (e) Other	f			 					+	
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 ▶ % 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: (i) unrelated organizations (ii) related organizations (iii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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 (b) Cost or other basis (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other Other	_			┼──					+	
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: (i) unrelated organizations (ii) related organizations (iii) related o		•	he current year e	nd balanc	e (line 1o	column (s	a)) hald	ae:		
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: (i) unrelated organizations			-		ic (iiiic ig	, coluitii (c	a)) Held	ш.		
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: (i) unrelated organizations				'0						
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: (i) unrelated organizations (ii) related organizations B If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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 (b) Cost or other basis (c) Accumulated depreciation 1a Land b Buildings c Leasehold improvements d Equipment e Other	_									
Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	·	· · · · · · · · · · · · · · · · · · ·		100%						
organization by: (i) unrelated organizations (ii) related organizations (iii) related organizations (iv) definitions (iv) Accumulated organizations (iv) Accumulated organiz	За				zation tha	at are held	and ad	ministered for th	ne	
(ii) unrelated organizations (iii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? 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 (b) Cost or other basis (c) Accumulated depreciation (investment) 1a Land b Buildings c Leasehold improvements d Equipment e Other			, possocia c	o organi		11 4.0 1.0.4	ana aa			es No
(ii) related organizations						•				-
b if "Yes" on line 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 (other) (c) Accumulated depreciation (other) (other) (other) (other) (other) (c) Equipment (c) Leasehold improvements (c)										_
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 (other) (c) Accumulated depreciation (other) (other) (d) Book value (other) (ot	b						• •	.,		
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 (other) (other) (c) Accumulated depreciation (other) (oth									_ <u></u>	
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 (other) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value b Buildings c Leasehold improvements d Equipment e Other	Part						_			
Description of property (a) Cost or other basis (other) (investment) (b) Cost or other basis (other) (c) Accumulated depreciation (d) Book value				s" on For	m 990. F	Part IV. lin	e 11a.	See Form 990.	Part X. lin	e 10.
b Buildings	· -		(a) Cost or o	ther basis	(b) Cost o	r other basis	(c)	Accumulated		
b Buildings	1a	Land			 			454 11 2 24		
c Leasehold improvements d Equipment e Other			·		 		W///635967711177	**************************************		
d Equipment		•					 			
e Other		•	·		 					
		Oil 1					 			
			nust equal Form 9	990 Part	Column	(R) line 11	1			

Part VII	Investments—Other Securities					
	Complete if the organization ans					<u>12.</u>
	(a) Description of security or categor (including name of security)	y	(b) Book value		thod of valuation d-of-year market value	
(1) Financial	derivatives					
	neld equity interests					
(3) Other					<u> </u>	
(A)						
(B)			L			
(C)						
(D)						
(E) (F)						
(G)				 		
(H)						
	b) must equal Form 990, Part X, col. (B) line 12) ▶					 -
Part VIII	Investments-Program Relate		000 Dart IV II-	- 110 C [- 000 Part V line 1	10
	Complete if the organization ans	wered res on For				13.
	(a) Description of investment		(b) Book value		ethod of valuation d-of-year market value	
(1)						
(2)						
(3)						
_(4)						
(5)						
(6)		· · · · · · · · · · · · · · · · · · ·		 		
(7)		-				
(8)				 		
	b) must equal Form 990, Part X, col (B) line 13)					
Part IX	Other Assets.		<u> </u>	<u> </u>		
	Complete if the organization ans	wered "Yes" on For	m 990, Part IV, lin	e 11d. See Forn	n 990, Part X, line 1	15.
		a) Description			(b) Book value	
(1)						
(2)_						
(3)						
(4)						
_(5)					<u> </u>	
_(6)					<u> </u>	
<u>(7)</u>						
(8)					 	
Total (Colu	mn (b) must equal Form 990, Part X, c	ol (R) line 15.)			 	
Part X	Other Liabilities.	OI. (B) III e 13.)	 	· · · · · · · · · · · · · · · · · · ·		
Tartx	Complete if the organization ans	wered "Yes" on For	m 990 Part IV lin	e 11e or 11f Se	e Form 990 Part X	(
	line 25.		iii 000, i ait iv, iii	0 110 01 111.00	C 1 01111 000, 1 are 7	٠,
1.	(a) Description of liability	(b) Book value				- /"
(1) Federal ır	ncome taxes		0		,	ĺ
(2) Employe	er Withholding		7,428			
(3)				,		
(4)				,		
(5)					,	
(6)						
(7)				,	,	
(8)					,	
(9)			}	,		_ ,
	b) must equal Form 990, Part X, col. (B) line 25.) ▶		7,428	·	<u> </u>	
2. Liability for	runcertain tax positions. In Part XIII, prov	ide the text of the footno	ote to the organization	n's financial statem	ents that reports the	. —
organization'	s liability for uncertain tax positions under	r FIN 48 (ASC 740). Che	ck here if the text of t	ne footnote has be	en provided in Part XIII	. \square

		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:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
С	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e			. 2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	25 78.05
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		
Part			
	Complete if the organization answered "Yes" on Form 990,		oo por riotarii.
1	Total expenses and losses per audited financial statements	raitiv, into iza:	
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			
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	<i>i</i>	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)		
C	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, lin		- +
Part		e 18.)	
2; Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to provide any additi	onal information
· 			

Page 5 Part XIII Supplemental Information (continued)						
Part XIII	Supplemental Information (continued)					
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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.

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

OMB No 1545-0047

2019

Open to Public Inspection

Name of the organization Employer identification number Appalachian Forest Heritage Area Inc 20-0815517 990 Part III 4d Expenses and revenues associated with Ad Hoc services rendered such as fiscal sponsorships, administrative support to third party organizations/projects. 990 Part VI 11b: Electronic copies of draft 990 are provided to Directors a minimum of ten days before filing. 990 Part VI 19 Copies of organizational charter, by-laws, and policies are available to the public at our main office and via e-mail upon request