		63 *	ا		0 Z J	002:4
Form	. 99	10	Return of Organization Exempt From In	come Ta	X	OMB No. 1545-0047
(Rev	. January	2020)	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (exc	cept private fou	ndations)	2019
Овр	•	the Treasury	 Do not enter social security numbers on this form as it may t Go to www.irs.gov/Form990 for instructions and the latest 	•		Open to Public Inspection
Ā	For the	2019 calen	dar year, or tax year beginning , 2019, and endin	9	_	, 20
В	Check if a	applicable:	C Name of organization Friends of Blackwater inc		D Employ	er identification number
	Address o	change	Doing business as			55-0778211
=	Name cha Initial retu	•	Number and street (or P.O. box if mail is not delivered to street address) PO Box 247	toom/suite	E Telepho	ne number 304-345-7663
H		rvterminated	City or town, state or province, country, and ZIP or longin postal code			
Ħ	Amended		Thomas WV 26292		G Gross r	ecelpts \$ 236441.99
ō		on pending	F Name and address of principal officer: Judith S, Rodd	H(a) to this a gr	oup return for	subordinates? 🗌 Yes 🗹 No
			PO Box 247 Thomas WV 26292	H(b) Are all s	ubordinate	s included? 🔲 Yes 🔲 No
	Tex-exer	opt status:]	attach a list	. (see instructions)
1_			aveblackwater.org V	H(c) Group e	xemption n	
			Corporation ☐ Trust ☐ Association ☐ Other ► ☐ L Year of forms	etion:	M State o	f legal domicile: WV
	arti	Summa				
	•	•	cribe the organization's mission or most significant activities: The mi	ssion is to eau	cate the p	Subjic about the
چ		environme	/K. 			
Ē	2	Chack this	box ► If the organization discontinued its operations or disposed	of more than	25% of i	te net gegete
Q Ve			f voting members of the governing body (Part VI, the 1a) RECEI		3	4
4			findependent voting members of the governing body(Part VI, line 16		4	4
Activities & Governance			her of individuals employed in calendar year 2019 (1941) V line 2a)	1001	5	5
Ē	•		ber of volunteers (estimate if necessary) [3]. JUN. 1.7	2020: 0	6	500
Ą			lated business revenue from Part VIII, column (C), inel12		78	0
	b	Net unrela	ted business taxable income from Form 990-T, line 39 OGDEN	<u>I, UT · · · </u>	7b	0
	_			PHOTVE		Current Year
3	1		ons and grants (Part VIII, line 1h)	24	3069 53	236441.99
Revenue	l .	•	service revenue (Part VIII, line 2g)		+	
æ	,		t income (Part VIII, column (A), lines 3, 4, and 7d)			
	}		nue-add lines 8 through 11 (must equal Part Vill, column (A), line 12)	24	3069.53	236441.99
			d similar amounts paid (Part IX, column (A), lines 1-3)		150.00	0
	14	Benefits p	aid to or for members (Part IX, column (A), line 4)		0	0
9			ther compensation, employee benefits (Part IX, column (A), lines 5-10)	8	2142.75	72340.48
Š			nal fundraising fees (Part IX, column (A), line 11e)		0	0
Ехфепзет	1		raising expenses (Part IX, column (D), line 25) 4958.82		45.45.33	154165.62
-			enses (Part IX, column (A), lines 11a-11d, 11f-24e)		4545.77 6838.52	226506.10
	1		ess expenses. Subtract line 18 from line 12		6231.01	9935.89
<u> </u>		LIBABITO N	356 BAPRISES, Subtract time to from time (2 , , , , , , , , , , , , , , , , , ,	Beginning of Cur		End of Year
Net Assets or Fund Balances	20	Total asse	its (Part X, line 16)	7	1865.01	81800.90
A B	21		ities (Part X, line 26)		0	0
Ž	22	Net assets	s or fund balances. Subtract line 21 from line 20	7	1865.01	81800.90
P	art II		re Block			
Un	der penat e. correct	ties of perfury	f, I declare that I have examined this return, including eccompanying achedules and state. Declaration of preparer (other than officer) is based on all information of which preparer.	tements, and to the rer has any knowle	e best of m dge.	y knowledge and belief, it is
		\ \ \				· · · · · · · · · · · · · · · · · · ·
Sig	gn	Signal	flure of officer and a company of the company of th	Date	,	1 - 1 -
	re	4	deth & Kodd Judith S Rodd, Di	rector		110/20
			or print name and title			,
Pa	id			Dete G-1-2020	Check [
	epare		Simmons Pam Holliday CPA AC		S EN D	20-4292788

☑ Yes ☐ No

Form 990 (2019)

304-965-0025

Firm's EIN ▶

Phone no.

Rm's name ► Pam Holliday CPA AC

Use Only | Firm's address ▶ 1032 Shawnee Trail Elkview WV 25071

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

1111 03	0 (20)	,
art	Ш	Statement of Program Service Accomplishments
1	Bro	Check if Schedule O contains a response or note to any line in this Part III
•		
	lile	mission is to educate the public about the environment.

2	Did	the organization undertake any significant program services during the year which were not listed on the
		r Form 990 or 990-EZ?
	If "Y	es," describe these new services on Schedule O.
3	Dıd	the organization cease conducting, or make significant changes in how it conducts, any program
	ser	ices?
	If "Y	es," describe these changes on Schedule O.
4	ехр	cribe the organization's program service accomplishments for each of its three largest program services, as measured enses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to othe total expenses, and revenue, if any, for each program service reported.
4a	(Co	de:) (Expenses \$ 33035.69 including grants of \$) (Revenue \$ 86276.05) ands of Blackwater
	We	communicated with our membership through our website, guarterly newsletter, monthly E-news, direct mail, FaceBook, and
		ter. We hosted speakers and ran tours of the Blackwater area. We managed our central office in Thomas, WV where we
	part	cipated in local events, ran roadside clean-ups and gave talks on our projects. We kept accounting records of individual
		ations and grants and expenses by project and other administrative duties. We continued work on protecting Blackwater Canyo
		successfully stopped an industrial development on the edge of the Canyon that would have negatively impacted a National
	Nati	ral Landmark. We took part in the Tucker Foundation Run for It Race and had booths at the Cheat Fest and Leaf Peepers.
		The same and the s
4b	(Co	de:) (Expenses \$ 44219.46 including grants of \$) (Revenue \$ 20000.00)
	•	lic Lands/MNF/SOS
		continued to advocate for the rara WV northern flying squirrel under the Save Our Squirrel ((SOS) Project. "Ginny" the flying
		rrel is the most unique mammal of the Allegheny Highlands and the signature species of Blackwater Canyon. We continued to
	adv	ocate for state park funding. We also challenged commercial logging plans in the Monongahela National Forest. We went to
,	Was	hington DC to discuss initiatives to fund the Abandoned Mine Lands program and the Land and Water Conservation Fund and
	edu	cated the public about the ESA and the Land and Water Conservation Fund.
4c	(Co	de:) (Expenses \$ 109066.89 including grants of \$) (Revenue \$ 83439.94)
		hfork Watershed
	The	North Fork of the Blackwater River flows along the Blackwater Canyon Rail Trail and is negatively impacted by acid mine drains
		D) pollution from old underground mines. We received a grant from the WV Department of Environmental Protection watershed
	pro	gram to monitor, and re-engineer a water treatment facility on the North Fork located in the Monongahela National Forest. The
	re-e	ngineering project became an active treatment system project in the fall of 2019. We finished a Watershed Based Plan for
	Bea	ver Creek of the Blackwater River with funds from the WV DEP grants program and formed a stakeholders group for this
	trib	itary of the Blackwater.
		r
4d	Oth	er program servićes (Describe on Schedule O.)
-		penses \$ 40184.06 including grants of \$) (Revenue \$ 46726.00)
4e	_	al program service expenses > 226506.10



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		~
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	•	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-197 if "Yes," complete Schedule C, Part III	5		~
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		~
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		~
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		~
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		v
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10		~
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		~
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 167 if "Yes," complete Schedule D, Part VII	11b		~
C	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 167 if "Yes," complete Schedule D, Part VIII	11c		~
đ	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		•
0	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	111		~
12a	Oid the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		•
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		7
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		-
14a	The state of the s	146		-
b	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		,
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		7
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b	 	7
ь	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200	 	 -
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	000	V

Part	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	ŕ	•
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	23	\vdash	-
	\$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		~
þ	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		~
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		~
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		~
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L. Part I	25 a		٧
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 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		•
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		~
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a	1201000,	~
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		~
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		•
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		7
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		,
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		٧
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		~
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		,
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		~
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	• •	Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 7 Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0	<u> </u>		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			<u> </u>
_	reportable gaming (gambling) winnings to prize winners?	1c	~	<u> </u>

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 5			
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	~	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) Did the organization have unrelated business gross income of \$1,000 or more during the year?	 3a		-
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	3U		
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		4
	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).			ل ۔ ا
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		-
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	<u> </u>		
	organization solicit any contributions that were not tax deductible as charitable contributions?	6 a		~
	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	<u>6b</u>		<u> </u>
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	-	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			l
	required to file Form 8282?	7c		
	If "Yes," indicate the number of Forms 8282 filed during the year			,
6	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		
1	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
_	If the organization received a contribution of cars, boats, simplanes, 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	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			,
8	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]			
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders			
8	Gross income from other sources (Do not net amounts due or paid to other sources			
b	against amounts due or received from them.)			l
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		-
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			<u> </u>
a	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		l	
	the organization is licensed to issue qualified health plans			
C	Enter the amount of reserves on hand	10-		
14a h	Did the organization receive any payments for Indoor tanning services during the tax year?	14a 14b	-	<u> </u>
b 15	Is the organization subject to the section 4960 tax on payments) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15	L	~
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	L	~
	If "Yes," complete Form 4720, Schedule O.	<u> </u>		<u></u>
		Fort	n 990	(2019)

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.	See in	struc	tions.
Saction	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>		. v
30Cu	on A. Governing Body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a			1
	If there are material differences in voting rights among members of the governing body, or	1		ľ
	if the governing body delegated broad authority to an executive committee or similar		_	ŀ.,
	committee, explain on Schedule O.			•
þ	Enter the number of voting members included on line 1a, above, who are independent . 1b 4	<u> </u>	· ·	1
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	-	
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, trustees, or key employees to a management company or other person? .	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		~
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		~
6	Did the organization have members or stockholders?	6	<u> </u>	~
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint	_	1	١.
_	one or more members of the governing body?	7a		~
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		~
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	7	
b	Each committee with authority to act on behalf of the governing body?	86	-	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at		<u> </u>	
	the organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	ode.)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		~
þ	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	118	~	\vdash
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	>	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	~	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"		1	1
	describe in Schedule O how this was done	12c	~	
13	Did the organization have a written whistleblower policy?	13	L_	1
14	Did the organization have a written document retention and destruction policy?	14		-
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			ł ·
a	The organization's CEO, Executive Director, or top management official	15a	7	-
b	Other officers or key employees of the organization	15b	-	
U	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		 	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
. 🕶	with a taxable entity during the year?	16a		1
b				
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		-
Secti	on C. Disclosure	1		
17	List the states with which a copy of this Form 990 is required to be filed ▶ WV			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-	T (Sec	tion	501(c
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	•		,-
	Own website Another's website Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of	of inte	rest _l	oolicy
	and financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and re Judith S Rodd PO Box 247 Thomas, WV 26292	LUTUS		
	JUNIUI 3 ROUGI FU QUA 497 INGINGS, 999 AGE7A			

F	Page 7	
,	and	

Form	990	(20)	g

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

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

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

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.										
(A) Name and title	(B) Average hours	box, e	uniles or and	Posieck eck e pe	more rson irect	e than o is both or/trust	(99)	(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	from the organization and related organizations
(1) Judith S Rodd, president	20 1			١				1500.00		
(2) Donna Cook, treasurer				,				0		
(3) Jeannie Dalporto, secretary	1			,				0		
(4) Thomas Rodd	1	,						- 0		
(5)								<i>,</i>		
(6)										
(7)										
(8)										
(9)										
(10)										
(11)									·	
(12)								-		
(13)										
(14)		-								

rarı	(A) Name and title	(E) Average hours per week (list any hours for related organizations below dotted line)	(do n bax, offici or direct	ot ch unlea	Pos Neck us pe	c) itlen mon mon	e than o	one ien tee)	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Report compen from re organizs (W-2/1095	able sation lated ations	(F) Estimated amount of other compensation from the organization and related organizations
(15)												
(16)												
(17)			-	-	-	-		-				
(18)				-	-	-		-				
				├	-	-		-				
<u>/00)</u>				-	-	-		-				
				_	_	_		-				
	<u> </u>			_	_	_		_			·	
						L		L				
		<u> </u>										
(24)												
(25)												
	Subtotal		• •					-	1500.00			
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)				•			▶ ▶	1500.00			
2	Total number of individuals (including but reportable compensation from the organi	t not limited	to th	1036	lis	ted	above	e) w		e than \$1	00,000	of
3	Did the organization list any former of employee on line 1a? If "Yes," complete is For any individual listed on line 1a, is the organization and related organizations individual	officer, dire Schedule J sum of re	for si porta	uch ble	<i>indi</i> con	<i>ivid</i> e npe:	<i>ual</i> nsatio	na	nd other compe	nsation fr	om the	3 /
5	Did any person listed on line 1a receive of for services rendered to the organization									tion or inc	dividual	5
Secti	on B. Independent Contractors											
1	Complete this table for your five high compensation from the organization. Rep											
	(A) Name and business add	· · · · · · · · · · · · · · · · · · ·							(B) Description of serv		7	(C) Compensation
2	Total number of independent contractor received more than \$100,000 of compens) th	ose listed abov	e) who		

Part	VIII	Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII								
		Check if Schedule O contains a respon	nse of note to an		/T VIII	(C)	(0)			
				(A) Total revenue	Related or exempt function revenue.	Unrelated business revenue	Revenue excluded from tax under sections 512-614			
है है	1a	Federated campaigns 1a					{			
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues 1b					İ			
3.5	C	Fundraising events 1c	1640.50							
불교	d	Related organizations 1d	0(220.04	1			ł			
S E	e 4	Government grants (contributions) 1e	86239.94				•			
P S	f	All other contributions, gifts, grants, and similar amounts not included above 11	148561.55							
₹ 5	a	Noncash contributions included in	140001.03							
50	9	lines 1a-1f 1g	\$				·			
2 2	h	Total. Add lines 1a-1f		236441 99						
			Business Code							
2	2a	***************************************								
5 9	þ									
8 5	C						ļ			
gram Ser Revenue	đ									
Program Service Revenue	8	All other program service revenue								
•	9	Total. Add lines 2a-2f			·····	<u>.</u>				
	3	Investment income (including dividend								
ł		other similar amounts)								
	4	Income from investment of tax-exempt b								
- 1	5	Royalties	🕨				٠			
- 1		(f) Real	(ii) Personal							
	6a	Gross rents 6a					!			
- 1	þ	Less: rental expenses 6b	<u> </u>							
	C	Rental income or (loss) 6c								
	ď	Net rental income or (loss)	(N) Other				}			
- 1	7a	Gross amount from	(1) 0010							
	•	sales of assets other than inventory 7a								
	.	Less: cost or other basis					•			
Revenue		and sales expenses . 7b								
8	C	Gain or (loss) 7c								
<u> </u>	đ		<u> ▶</u>		A					
ŧ	8a	Gross income from fundraising								
0		events (not including \$				·				
		of contributions reported on line 1c). See Part IV, line 18 8a					•			
		1c). See Part IV, line 18 8a Less: direct expenses 8b					}			
	b	Net income or (loss) from fundraising ev	· 				<u> </u>			
	_	Gross income from gaming	1							
	-	activities. See Part IV, line 19 . 98				Ī				
		Less: direct expenses 9b								
		Net income or (loss) from gaming activit	ies >]			-			
	10a	Gross sales of inventory, less		!		ļ	1			
		returns and allowances 10a		-			1			
		Net income or (loss) from sales of inventions				 	 			
9	-	The state of the s	Business Code							
9	11a									
and and	b						1			
scellaneo Revenue	C	wassaga as a sa a sa a sa a sa a sa a a a				ļ	 			
Miscellaneous Revenue		All other revenue		 		<u> </u>				
	12	Total. Add lines 11a-11d	::::::	236441.99	 	 	1			
	14	· · · · · · · · · · · · · · · · · · ·	<u> </u>		 	/	Form 990 (2019			

	90 (2019)				Page 10
	IX Statement of Functional Expenses			· · · · · · · · · · · · · · · · · · ·	
Secti	on 501(c)(3) and 501(c)(4) organizations must compl			must complete colum	ın (A).
	Check if Schedule O contains a response			· · · · · · · · ·	<u> </u>
	ot include amounts reported on lines 6b, 7b, b, 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	0		
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16		1		1
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	1500.00	0	15 00 .00	O
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	65806.25	56593.38	4606.44	4606.43
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				· · · · · · · · · · · · · · · · · · ·
10	Payroll taxes	5034.23	4329.44	352.40	352.39
11	Fees for services (nonemployees):				
a	Management				
b	Legal				
C	Accounting	4981.00	4981.00		
đ	Lobbying				
8	Professional fundraising services. See Part IV, line 17				· ·
f	Investment management fees				
.9	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	3595.37	3595.37		···
13	Office expenses	22521.34	22521.34		
14	Information technology	22321.34	22321.34		
15	Royalties				
16	Occupancy	9400.52	9400.52		
17	Travel	5104.62	5104.62		
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				· · · · · · · · · · · · · · · · · · ·
19	Conferences, conventions, and meetings .				
20	Interest				······································
21	Payments to affiliates				
22	Depreciation, depletion, and amortization .				
23	Insurance	4149.03	4149.03		

24

Professional fees

Membership dues

Miscellaneous

e All other expenses

Printing

Other expenses, Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schodule O.)

Total functional expenses. Add lines 1 through 24e
Joint costs. Complete this line only if the
organization reported in column (B) joint costs

from a combined educational campaign and fundraising solicitation. Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)

6458.84	4958.82
	Form 990 (2019)

94264.72

7561.03

1760 66

215088.44

827.33

94264.72

7561.03

827.33

1760.66

226506.10

P	art X	Balance Sheet		-	
		Check if Schedule O contains a response or note to any line in this Par	tX		<u> </u>
			(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing	71865.01	1	81800.90
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		41	
	5	Loans and other receivables from any current or former officer, director,			3.5
		trustee, key employee, creator or founder, substantial contributor, or 35%			1
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			, in
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).		8	
2	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
A	9	Prepaid expenses and deferred charges		9	,
	10a	Land, buildings, and equipment: cost or other			·
		basis. Complete Part VI of Schedule D 10a	- 4		,
	b	Less: accumulated depreciation 10b		10c	
	11	Investments—publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets, See Part IV, line 11	· · · · · · · · · · · · · · · · · · ·	15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	71865 00		81800.90
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
83	22	Loans and other payables to any current or former officer, director,			
≣		trustee, key employee, creator or founder, substantial contributor, or 35%			
Labilities		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D		06	
	26	Total liabilities. Add lines 17 through 25	0	25 26	
_	20			20	
8		Organizations that follow FASB ASC 958, check here ► ☑ and complete lines 27, 28, 32, and 33.			
B	27	Net assets without donor restrictions	71865.01	27	81800.90
Ba	28	Net assets with donor restrictions	71003.01	28	01000.70
ğ		Organizations that do not follow FASB ASC 958, check here ▶ □			,
2	ł	and complete lines 29 through 33.	•		· g
5	29	Capital stock or trust principal, or current funds		29	
\$	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
200	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	718105	32	1
Ž	33	Total liabilities and net assets/fund balances	7146	33	181800.90
					Form 990 (2019)

Form 9	90 (2019)			Pe	ige 12
Par	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)			2364	41,99
2	Total expenses (must equal Part IX, column (A), line 25)			2265	06.10
3	Revenue less expenses. Subtract line 2 from line 1			, 99	35.89
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4			718	65.01
5	Net unrealized gains (losses) on investments	T			
6	Donated services and use of facilities				
7	Investment expenses	1			
8	Prior period adjustments	T			
9	Other changes in net assets or fund balances (explain on Schedule O)	\mathbf{I}			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))			818	100.90
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
. 1	Accounting method used to prepare the Form 990: 🗹 Cash 🔲 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting from a prior year or checked "Other," explanation changed its method of accounting the prior of the prior	ain in	,	÷	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	1	28		
	If "Yes," check a box below to indicate whether the financial statements for the year were compile reviewed on a separate basis, consolidated basis, or both:	ed or			1
	Separate basis Consolidated basis Both consolidated and separate basis	į	Actornoon		
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 wore audited separate basis, consolidated basis, or both:	on a	3 C C T	, c	
	Separate basis Consolidated basis Both consolidated and separate basis	1			
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign the audit raview or compilation of its financial statements and selection of an independent accountant?	-	20		

If the organization changed either its oversight process or selection process during the tax year, explain on

Schedule O.

Form 990 (2019)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

> Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection
Employer Identification number.

Frien	ds of E	Blackwater, Inc.					55-07	78211
Pai	d	Reason for Public Char	ity Status (All	organizations must	complet	te this p	art.) See instructio	ns.
The	organiz	zation is not a private founda	tion because it is	s: (For lines 1 through	12, chec	k only or	e box.)	·
1 2 3 4	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).)							
5	☐ An	n organization operated for tection 170(b)(1)(A)(iv). (Comp	he benefit of a	college or university	owned o	r operate	d by a government	al unit described in
6 7	☐ Ar	federal, state, or local govern n organization that normally escribed in section 170(b)(1)	receives a subst	tantial part of its supp				the general public
8		community trust described in	section 170(b)	(1)(A)(vI). (Complete i	Part II.)			
9	or un	n agricultural research organi university or a non-land-grai alversity:	nt college of agri	culture (see instruction	ns). Ente	r the nam	ne, city, and state of	the college or
10	re	n organization that normally r celpts from activities related upport from gross investment cquired by the organization at	to its exempt fuil income and uni	nctions—subject to co related business taxal	ertain exc ble incom	eptions, e (less se	and (2) no more that ection 511 tax) from	n 331/2% of its
11	☐ Ar	organization organized and	operated exclus	sively to test for public	safety. S	See secti	on 509(a)(4).	
12	of	n organization organized and one or more publicly suppo neck the box in lines 12a thro	rted organization	ns described in secti	on 509(a)(1) or se	ection 509(a)(2). Sec	section 509(a)(3).
8		Type I. A supporting organ the supported organization supporting organization. Yes	(s) the power to	regularly appoint or e	lect a ma	jority of t		
b	• 🗆	Type II. A supporting organization(s). You must of	the supporting o	rganization vested in	the same			
C		Type III functionally integrated its supported organization(• •					ally integrated with,
d		Type III non-functionally integrated is not functionally integrequirement (see instruction	grated. The organ	nization generally mus	st satisfy	a distribu	rtion requirement an	
e		Check this box if the organ functionally integrated, or T						li, Type lii
f		er the number of supported o						
	Prov	vide the following information			.			
	(i) Nan	ne of supported organization	(ii) EIN	(III) Type of organization (described on lines 1-10 above (see instructions))	fisted in you docu	rgentzation ir governing ment?	(v) Amount of monetary support (see instructions)	(V) Amount of other support (see instructions)
					Yes	No		
(A)							•	
(B)								
(C)								
(D)		,						
(E)								

Total

T. CILL	(Complete only if you checked the Part III. If the organization fails to	e box on line	5, 7, or 8 of	Part I or if th	e organizatio	n/failed to qu	
Secti	on A\ Public Support			, p	/	te rat iii.j	
	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
, 1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	17 -5:0	(3) 2010	(0) 2017	/	(6) 2013	(i) Total
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf				/ .		
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (f)					ور ما در	
6	Public support. Subtract line 5 from line 4	4, 4,		<u> </u>	وغرون والتراك		·
	on B. Total Support		/	· · · · · · · · · · · · · · · · · · ·		·	
	dar year (or fiscal year beginning in) 📐	(a) 2015 /	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 8	Amounts from line 4						
, 9	Net income from unrelated business activities, whether or not the business is regularly carried on			,		·	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11		et 15 (a luca			,	
12	Gross receipts from related activities, etc.				•, • • •	12	
13	First five years. If the Form 990 is for th		n's first, secon	d, third, fourt	h, or fifth tax y	ear as a sectio	n 501(c)(3)
	organization, check this box and stop her			· · · · ·			· · • □
	on C. Computation of Public Suppor						· · · · · · · · · · · · · · · · · · ·
14	Public support percentage for 2019 (line 6		•	11, column (f))		14	<u>%</u>
15	Public support percentage from 2018 Sch					15	<u>%</u>
16a	331/3% support test—2019. If the organization qual				14 IS 3	OF MORE,	
þ		zation did not	check a box o	on line 13 or 1	•	is 331,a% or m	ore, check
17a)19. If the org ets the "facts	antzation did r and-circumst	not check a bo ances" test, c	ox on line 13, 1 sheck this box	and stop here.	d line 14 is . Explain in
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organiza Explain in Part VI how the organization of supported organization	ition meets the "fac	ne "facts-and- cts-and-circum	circumstances stances" test.	s" test, check The organizat	this box and to ion qualifies as	stop here. s a publicly
18	Private foundation. If the organization distructions					k this box and	see □

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

(Complete only if you checked to	the hox on line 10 of Part	Lor if the organization fail	led to qualify under Part II
(complete only if you officered i		1 of it the organization is	iou to quanty undon i air in
If the execution fails to qualif	a condex the teets listed by	alow places complete De	ا ۱۱ ام ر
If the organization fails to qualif	y unities the tests listed or	BIOW, please complete ra	v i i.j
	المستحد المتفاد المتبار المتبار والمستحد والمستحد المتار المتار المتبار المتبار المتبار المتبار المتبار المتبار		

Section	on A. Public Support					,	
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Grits, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	146943.00	155524.00	169033.00	243069.53	236441.99	951011.52
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons .	146943.00	155524.00	169033.00	243069.53	236441.99	951011.52
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
8 8	Add lines 7a and 7b	3				,	951011.52
Secti	on B. Total Support						***************************************
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
8	Amounts from line 6	146943.00	155524.00	169033.00	243069.53	236441.99	951011.52
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on		•				
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)	146943.00	155524 00	169033.00	243069.53	236441.99	951011.52
First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here							
Section C. Computation of Public Support Percentage							
15	Public support percentage for 2019 (line to						100 %
16	Public support percentage from 2018 Sch	nedule A, Part I	II, line 15 .	<u> </u>	<u> </u>	16	100 %
	on D. Computation of Investment In	come Percer	ntage	na line 42	mn (6)	1491	
17	Investment income percentage for 2019 (iine iuc, colum	in (1), divided t	y ine 13, colu	mm (T))	17	0 %
18	Investment income percentage from 2018 331/n% support tests—2019. If the organ	ization did act	check the how	on line 14 or	nd line 15 is m		
19a	17 is not more than 331,5%, check this box	and ston home	The organizati	on qualifies as a	a publiciv supo	orted organizati	on . ► 🗗
b	331/3% support tests—2018. If the organization 18 is not more than 331/3%, check this	cation did not cl	neck a box on	line 14 or line 1	9a, and line 16	is more than 3	31,5%, and
20	Private foundation. If the organization di						

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 A.	All	Supporting	Organizations
--	------------	-----	------------	---------------

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? It "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		
3 a	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	- 404	-
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and If you checked 12a or 12b in Part I, answer (b) and (c) below.	48	~	أخت
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
C				
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).	4c 5a	-	3
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
8	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 filling 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		
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.	98		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
C	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
0a	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	*******	- 1
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.)	10h		

P	ıge	5

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)		į	
	below, the governing body of a supported organization?	11a		
	A family member of a person described in (a) above?	11b 11c		
	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. on B. Type I Supporting Organizations	116	نــــا	<u> </u>
Secu	on b. Type I supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the	i i		Ì
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.			1
		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		
Sact	on C. Type II Supporting Organizations		L	L
0000	On O. Typo it Capporally 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		1	l
	the supported organization(s).	1		
Sect	on D. All Type III Supporting Organizations	-		,
			Yes	No
1	Old 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	1	
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how		}	
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		<u> </u>
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	1	۱ '	1
	supported organizations played in this regard.		ļ	
Coot	on E. Type III Functionally Integrated Supporting Organizations	3	L	<u> </u>
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see it	nshu	ction	s)
a	The organization satisfied the Activities Test. Complete line 2 below.			- /-
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (190 in:		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			1
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			1
	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	İ		1
	that these activities constituted substantially all of its activities.	2a	1	1
ь	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		1	1
	activities but for the organization's Involvement.	26	ļ	
3	Parent of Supported Organizations. Answer (a) and (b) below.	1	1	1
8	Old the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details In Part VI.	3a	1	1
	does do selection and selectio	-	 	
ь	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b	1]

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org			
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of pnor-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			1
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		1
d Total (add lines 1a, 1b, and 1c)	10		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):	1		
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	1	Ì
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-functional	v int	egrated Type III support	ing omanization (see
instructions).	,		3 (000

Part	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	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe	impt 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 whic (provide details in Part VI). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2019 from Section C, line 6			
10			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
<u></u> -		_	(11)	(IJI)
Secti	on E-Distribution Allocations (see instructions)	(I) Excess Distributions	Underdistributions Pre-2019	Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required—explain in Part VI). See instructions.		•	
3	Excess distributions carryover, if any, to 2019			
a	From 2014			, , , , , , , , , , , , , , , , , , ,
ь	From 2015			
c				-
d	From 2017			
	From 2018			,
Ť	Total of lines 3a through e			
	Applied to underdistributions of prior years			· · · · · · · · · · · · · · · · · · ·
	Applied to 2019 distributable amount			· · · · · · · · · · · · · · · · · · ·
ī	Carryover from 2014 not applied (see instructions)			
-	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from			**************************************
•	Section D, line 7:			
а	Applied to underdistributions of prior years			
ь	Applied to 2019 distributable amount			
	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			***************************************
3	any. Subtract lines 3g and 4a from line 2. For result			'
	greater than zero, explain in Part VL See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
•	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			1
	and 4c.	<u></u>		\$
8	Breakdown of line 7:			b
а	Excess from 2015			
b	Excess from 2016	4		
С	Excess from 2017			
d	Excess from 2018			
8	Excess from 2019	<u>L</u>		i
			0-4-4-	A (Easts 000 as 000 ET) 2010

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tex 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.

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)): Complete Part II-B. Do not complete Part II-A.

	rganization answered "Yes oo separate instructions), th	," on Form 990, Part IV, line 5 (Proxy ten	Tex) (see separate	e instructions) or Form 990	-EZ, Part V, line 35c (Proxy
• Se	ction 501(c)(4), (5), or (6) orga	nizations: Complete Part III.			
Name of organization					tification number
Friend	s of Blackwater, Inc.			İ	55-0778211
Part	-A Complete if the	organization is exempt und	er section 501(c) or is a section 527 o	organization.
1	Provide a description of definition of political can	the organization's direct and incompaign activities")	direct political ca	mpaign activities in Part	IV. (see instructions for
2	•	y expenditures (see instructions) .		\$	
3	Volunteer hours for politic	cal campaign activities (see instruc	tions)		
Part	-B Complete if the	organization is exempt und	er section 501(c)(3).	,
1		excise tax incurred by the organiza			0
2		excise tax incurred by organization			0
3	If the organization incurre	ed a section 4955 tax, did it file For	m 4720 for this y	mar?	Yes No
48	Was a correction made?				Yes No
<u> </u>	If "Yes," describe in Part				
Part		e organization is exempt und			<u>(c)(3).</u>
1	activities	• • • • • • • • • • •		▶ \$	
2		filing organization's funds contribution		anizations for section	
3	Total exempt function e	expenditures. Add lines 1 and 2.		on Form 1120-POL,	
4	Did the filing organization	file Form 1120-POL for this year		<i></i>	Yes No
5	organization made payme the amount of political co	ses and employer identification nul ents. For each organization listed, ontributions received that were pro- fund or a political action committe	enter the amount mptly and directly	paid from the filing organi delivered to a separate p	zation's funds. Also enter olitical organization, such
	(e) Name	(b) Address	, (C) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization if none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)	, ,				•
(A)					

20190	ma c (Lown aan ot aan-Ex) 501a					Page 2
	Complete if the organization 501(h)).				•	ction under
A C	theck I if the filing organization below address, EIN, expenses, an	ongs to an affiliate d share of excess	d group (and list i lobbying expendi	n Part IV each affi itures).	liated group memb	er's name,
8 0	check > if the filing organization che					
	Limits on Lo	bying Expenditu	ires		(a) Fiting	(b) Afflizted
	(The term "expenditures"	means amounts	paid or incurred.)	organization's totals	group totals
1a	Total lobbying expenditures to influence	e public opinion (grassroots lobbyi	ng)	500.00	······································
b	Total lobbying expenditures to influence	e a legislative bo	dy (direct lobbying	3)	500.00	
C	c Total lobbying expenditures (add lines to and 1b)				1000.00	
d	Other exempt purpose expenditures .				225506.10	
е	Total exempt purpose expenditures (a	dd lines 1c and 1c)		226506.10	
1	Lobbying nontaxable amount. Enter columns.	the amount fro	om the following	table in both	45301.22	
	If the amount on line 1e, column (a) or (b)	is: The lobbying	nontaxable amoun	l is:		
	Not over \$500,000	20% of the am	ount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus	15% of the excess	over \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus	10% of the excess	over \$1,000,000.		٠ - خين-
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus	5% of the excess or	ver \$1,500,000.		
	Over \$17,000,000	\$1,000,000.				
9	Grassroots nontaxable amount (enter:	25% of line 1f)			11325.31	
h	Subtract line 1g from line 1a. If zero or less, enter -0			0		
į		Subtract line 1f from line 1c. If zero or less, enter -0		0		
j	If there is an amount other than zer		1h or line 11, did	the organization	file Form 4720	
	reporting section 4911 tax for this yea			· · · · · ·	<u> </u>	Yes No
`	(Some organizations that made a	ection 501(h) ele	Period Under Sec ction do not hav uctions for lines	e to complete ali	of the five column	ns below.
	Lobbyi	ng Expenditures	During 4-Year Av	eraging Period		
	Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
28	Lobbying nontaxable amount	27324.00	29616.00	45367.70	45301.22	147608.92
b	Lobbying ceiling amount (150% of line 2a, column (e))				<u>-</u>	
c	Total lobbying expenditures	1000 00	1000.00	1000.00	1000.00	4000.00
d		6831.00	7404.00	11341.93	11325.31	36902.24
	Grassroots ceiling amount (150% of line 2d, column (e))				,	
f	Grassroots lobbying expenditures	50 0.00	500.00	500.00	500.00	2000.00

500.00

Schedule C (Form 980 or 990-EZ) 2019

2000.00

	e C (Form 990 or 990-EZ) 2019 II-B Complete if the organization is exempt under section 501(c)(3) and has NOT	fied	Eorm		Page 3
Part	(election under section 501(h)).				
For e	r each "Yes" response on lines 1a through 11 below, provide in Part IV a detailed		3)	(b)	
descr	iption of the lobbying activity.	Yes	No	Amoun	t
1	During the year, did the filing organization attempt to influence foreign, national, state, or local			=	-w: d
	legislation, including any attempt to influence public opinion on a legislative matter or		,	,	
_	referendum, through the use of:				
a b	Volunteers?	 			, 1
C	Media advertisements?				
ď	Mailings to members, legislators, or the public?				
θ	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
9	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
ł	Other activities?	-			
J	Total. Add lines 1c through 1i				
2a b	If "Yes," enter the amount of any tax incurred under section 4912	-			
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .	1	,		·
ď	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			-	4
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	;)(5), (or se	ction	
	501(c)(6).	.,			
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	• •	• •	1	ļ
2 3	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	+
	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" O answered "Yes."	Ř (b)	Part	III-A, line	3, is
1	Dues, assessments and similar amounts from members	. ,	1	 	
2	political expenses for which the section 527(f) tax was paid).	5 VI		1	
а	Current year		28		
b	Carryover from last year		2b		
C	Total		2c		
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of	fthe)		
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb and political expenditure next year?	yıngı	4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par				L	
Provid	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated groinstructions); and Part II-B, line 1. Also, complete this part for any additional information.	oup lis	t); Pa	rt II-A, lines	1 and

		*******		•	
				-	

Part IV	m 990 or 990-EZ) 2019 Supplemental Information (continued)	Page 4
	Controlled mornion of continues.	
		
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Schedule C (Form 990 or 990-EZ) 2019

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Name of the organization

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

Open to Public Inspection Employer Identification number --

Friends of Blackwater, Inc.	55-0778211
Part III, Line 4d:	
Blackwater Canyon Trails Project - We spend a third year consulting with the USDA Forest Service on plans	s for trail improvements and
. maintenance on the Monongahela National Forest. We wrote grant proposals for trail work and developed	partnerships to expand our
trail project into Blackwater Falls State Park. Expenses - \$1036.21 Grants - 0 Revenue - 0	
	,
Tucker Country Railroad Heritage	
Under a grant from the WV Humanities Foundation we worked with the Forest Service Archaeologist to place	ce six addition interpretive signs
on railroad history along the rail trail near Thomas, WV. We created a brochure for the trail signs and hoste	ed two lectures on this topic in
Thomas, WV. We began work on historical signage for the Davis City Park which was the center of the time	per industry in Tucker County at
the turn of the last century. Expenses - \$13262.16 Grants - 0 Revenue - \$17726.00	·
Climate Change	
With a grant from the Appalachian Stewardship Foundation and private donors we hosted two major climat	e change conferences in
partnership with the WV University Law School. We spoke at three public meetings and presented climate	science information to school
classes and afterschool high school clubs. We developed a new website and communicated on FaceBook	and other social media platforms
the latest scientific information on climate change. Expenses - \$25885.69 Grants - 0 Revenue - \$29000	.00
Part VI - Line 2a:	•
Judith S. Rodd, president is married to Thomas Rodd, director.	
,	
Part VI - Line 19:	
The organization provides a copy of the Form 990 on its website.	•
	-
,	

Schedule O (Form 990 or 990-EZ) (2019)			Page 2
Name of the organization			Employer Identification number
			Lawa 1
			_
	***************************************		***************************************
		······	
			
	···········		
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