_	00		Deturn	of Organization Examp	t From Inc		Tax		OMB No. 1545-0047	
Form 990 Return of Organization Exempt From Income Tax							2020			
			Under section 501(c),	527, or 4947(a)(1) of the Internal Re	evenue Code (ex	cept p	rivate foun	dations)	2020	
Denart	ment of t	the Treasury	Do not er	ter social security numbers on this	form as it may	be ma	de public.		Open to Public	
		ue Service	► Go to	www.irs.gov/Form990 for instruction	ons and the late	est info	rmation.		Inspection	
A F	or the	2020 calenda	ar y <u>ear, or tax year begi</u> i	nning	, 2020, a	and end	ding		, 20	
B c	heck if a	pplicable:	C Name of organization	RIENDS OF WEISER RIVER TH	RAIL INC			D Emp	loyer identification number	
А	ddress cl	hange	Doing business as						82-0495183	
<u></u> N	ame cha	ange	Number and street (or P	.O. box if mail is not delivered to street address)		Room/s	suite	E Telep	ohone number	
l Ir	itial retur	rn	C/O PAT TRAIN	OR PO BOX 472						
F	inal retur	n/terminated	City or town, state or pro	ovince, country, and ZIP or foreign postal code				G Gros	s receipts	
A	mended	return	COUNCIL, ID 8	3612				\$	192,533	
A	pplicatior	n pending	F Name and address of pr	incipal officer: PAT TRAINOR			H(a) Is this a	group return	for subordinates? Yes X No	
			Same as C abo	ve			H(b) Are all	subordinat	es included? Yes No	
і т	ax-exem	pt status: X	501(c)(3) 501(c) () < (insert no.) 4947(a)(1) or	527		If "No,	" attach a li	st. See instructions	
JΝ	/ebsite:	► www	.WEISERRIVERTRAI	L.ORG			H(c) Group	exemption	number 🕨	
K F	orm of or	rganization: X	Corporation Trust As	sociation 🗌 Other 🕨	L Year of format	tion: 19	97 м	State of leg	gal domicile: ID	
Par	't I	Summary	/							
	1	Briefly descri	be the organization's miss	sion or most significant activities:	O PRESERVE	THE	INTEGRI	ry of	THE 84 MILE RAIL	
		TO TRAIL	CORRIDOR; TO DEV	/ELOP, MANAGE, AND MAINT	AIN A PUBLI	C RE	CREATION	JAL TR	AIL FOR	
Governance		NON-MOTOR	RIZED USES; AND 1	TO PROTECT AND ENHANCE T	HE RIPARIAN	I AND	NATURAI	L HABI	TATS ALONG THE	
nai		CORRIDOR	•							
Ievo	2	Check this bo	ox ► 🗌 if the organizatio	n discontinued its operations or dispos	sed of more than	25% of	f its net asse	ets.		
	3	Number of vo	oting members of the gove	erning body (Part VI, line 1a)				. 3	10	
Activities &	4	Number of in	dependent voting membe	rs of the governing body (Part VI, line	1b)			. 4	10	
itie	5	Total number	of individuals employed i	n calendar year 2020 (Part V, line 2a)				. 5	1	
ctiv	6	Total number	of volunteers (estimate if	necessary)				. 6	20	
Ă	7a	Total unrelate	ed business revenue from	Part VIII, column (C), line 12				. 7a	0	
	b	Net unrelated	d business taxable income	e from Form 990-T, Part I, line 11				. 7b	0	
							Prior Year	r	Current Year	
	8	Contributions	and grants (Part VIII, line	1h)			13	2,100	184,830	
е	9								7,688	
Revenue	10	Investment in	come (Part VIII, column (15						
Re	11	Other revenu	e (Part VIII, column (A), li	0						
	12	Total revenue	e - add lines 8 through 11	(must equal Part VIII, column (A), line	12)		15	1,244	192,533	
	13	Grants and si	milar amounts paid (Part	IX, column (A), lines 1-3)					0	
	14	Benefits paid	to or for members (Part I	X, column (A), line 4)					0	
	15	Salaries, othe	er compensation, employe	e benefits (Part IX, column (A), lines 5			2	8,958	30,513	
ses	16a	Professional	0							
Expenses	b	Total fundrais	sing expenses (Part IX, co	olumn (D), line 25) 🕨	0					
EXE				nes 11a-11d, 11f-24e)			7	9,607	105,225	
	18	Total expense	es. Add lines 13-17 (mus	t equal Part IX, column (A), line 25)				8,565	135,738	
_	19	Revenue less	s expenses. Subtract line	18 from line 12	<u></u>		4	2,679	56,795	
r s							ginning of Cur	rent Year	End of Year	
Net Assets or Fund Balances	20	Total assets	(Part X, line 16)				12,32	7,556	12,419,449	
Ass Ass	21	Total liabilitie	s (Part X, line 26)					2,312	1,952	
Fund	22	Net assets or	fund balances. Subtract	line 21 from line 20			12,32	5,244	12,417,497	
Par	't II	Signatu	re Block							
				urn, including accompanying schedules and state		t of my kn	owledge and be	elief, it is		
true, o	correct, a	and complete. Dec	iaration of preparer (other than of	ficer) is based on all information of which prepare	r nas any knowledge.					
		BARBA	ARA MCGANN							
Sign		Signature	e of officer					Da	ite	
Here	e	BARBA	ARA MCGANN, TREAS	SURER						
Type or print name and title										
	I	Print/Type pre	parer's name	Preparer's signature	Date		Check	X if	PTIN	
Paid Barbara J McGann CPA Barbara J McGann CPA 02-11-2022 self-employed							_	P00828593		
	barer			ancial Solutions LLC			Firm's EIN		.	
	Only			andmason Pl			Phone no.			
_	,		Eagle II				-	208-	286-7279	

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

No

orm	1 990 (2020) FRIENDS OF WEISER RIVER TRAIL INC 82-0495183 Page 2
Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO PRESERVE THE INTEGRITY OF THE 84 MILE RAIL TO TRAIL CORRIDOR; TO DEVELOP, MANAGE, AND MAINTAIN
	A PUBLIC RECREATIONAL TRAIL FOR NON-MOTORIZED USES; AND TO PROTECT AND ENHANCE THE RIPARIAN AND
	NATURAL HABITATS ALONG THE CORRIDOR.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 58,665 including grants of \$) (Revenue \$ 12,935)
	TRAIL MAINTENANCE INCLUDING WEED ABATEMENT AND CONTROL EFFORTS, BRIDGE REPAIRS, TRAIL SURFACE
	UPKEEP (I.E GRADING, ROLLING, CLEARING ROCKS) AND FENCING. THESE MAINTENANCE SERVICES ARE
	PERFORMED BY THE ORGANIZATION'S ONE EMPLOYEE, VOLUNTEERS, AND LOCAL VENDORS.
4b	(Code:) (Expenses \$44,778 including grants of \$) (Revenue \$)
	TRAIL AWARENESS PROMOTED AS A RECREATIONAL SOURCE AS WELL AS AN ECONOMIC DRIVER FOR THE LOCAL
	COMMUNITIES BY BRINGING IN PEOPLE TO EVENTS ON THE TRAIL (WALKING, BIKING, AND HORSEBACK RIDING).
4c	(Code:) (Expenses \$ 16,949 including grants of \$) (Revenue \$ 12,000)
	TRAIL DEVELOPMENT ON 84 MILE RAIL TO TRAIL CORRIDOR CONCENTRATING ON FURTHER DEVELOPING
	TRAILHEADS FOR PUBLIC ACCESS AND PARKING ALONG THE CORRIDOR. FENCING AND RELATED IMPROVEMENTS IN
	KEY AREAS FOR HABITAT PROTECTION AND ERVECETATION PROJECTS IN RIPARIAN AND WETLAND AREAS.
	KEY AREAS FOR HABITAT PROTECTION AND ERVEGETATION PROJECTS IN RIPARIAN AND WETLAND AREAS.
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	KEY AREAS FOR HABITAT PROTECTION AND ERVEGETATION PROJECTS IN RIPARIAN AND WETLAND AREAS.
łd	Other program services (Describe on Schedule O.)
łd	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
4d 4e	Other program services (Describe on Schedule O.)
	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

	990 (2020) FRIENDS OF WEISER RIVER TRAIL INC 82-0495	.83	Р	age 3
Pa	rt 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	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2	x	
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		x
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		x
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		x
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	"Yes," complete Schedule D, Part I	0		x
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		v
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i>	-		x
0	complete Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	0		
5	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		x
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		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a	x	
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		x
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		x
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		х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		x
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		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		x
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		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		x
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		x
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		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
4-	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	4-		
40	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	40		
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	x	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	40		
<u> </u>	If "Yes," complete Schedule G, Part III.	19		x
20 a		20a		x
	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 approximation or Rate L. Schump (A), line 12, If "Yes," complete Schedule L. Parts Land II.	21		v
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	<u> </u>		X

Form	990 (2020) FRIENDS OF WEISER RIVER TRAIL INC 82-0495	183	P	age 4
Pa	rt IV 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		х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		х
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		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
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		x
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 or any of these persons? If "Yes," complete Schedule L, Part. II	26		x
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		x
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, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		х
с	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		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		x
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M.	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		x
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		x
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		x
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		x
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?			х
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		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
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	x	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			\square
		-	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	x	

Form	990 (2020) FRIENDS OF WEISER RIVER TRAIL INC 82-04951	83	P	age 5
Par	rt V 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			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on 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		х
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		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		x
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	01		
-	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	70		
h	and services provided to the payor?	7a 7b		x
b		70		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		v
d	If "Yes," indicate the number of Forms 8282 filed during the year	10		x
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		x
f	Did the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract?	76 7f		x
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		<u> </u>
9 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.	-		
а	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:			
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			
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			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
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			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule Q	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		х
	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		х
	If "Yes," complete Form 4720, Schedule O.			

Form **990** (2020)

Form	990 (2020) FRIENDS OF WEISER RIVER TRAIL INC 82-049	5183	F	Page 6					
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for	r a "No"							
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.								
	Check if Schedule O contains a response or note to any line in this Part VI			. x					
Sec	tion A. Governing Body and Management								
			Yes	No					
1a		0							
	If there are material differences in voting rights among members of the governing body, or								
	if the governing body delegated broad authority to an executive committee or similar								
	committee, explain on Schedule O.								
b		0							
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	x						
3	Did the organization delegate control over management duties customarily performed by or under the direct								
	supervision of officers, directors, or trustees, or key employees to a management company or other person?			x					
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			x					
5	Did the organization become aware during the year of a significant diversion of the organization's assets?			x					
6 70	Did the organization have members or stockholders?	. 6	x						
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	. 7a	x						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	. 1a							
b	stockholders, or persons other than the governing body?	. 7b		x					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during								
U	the year by the following:								
а	The governing body?	. 8a	x						
b	Each committee with authority to act on behalf of the governing body?	. 8b	x						
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at								
-	the organization's mailing address? If "Yes," provide the names and addresses on Schedule Q	. 9		x					
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)								
			Yes	No					
10a	Did the organization have local chapters, branches, or affiliates?	. 10a		x					
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,								
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	. 10b							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form 2	. 11a	x						
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	x						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	. 12b	x						
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	x						
13	Did the organization have a written whistleblower policy?		x						
14	Did the organization have a written document retention and destruction policy?	. 14		x					
15	Did the process for determining compensation of the following persons include a review and approval by								
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?								
a	The organization's CEO, Executive Director, or top management official			x					
b	Other officers or key employees of the organization	. 15b		x					
	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	40-							
	with a taxable entity during the year?	. <u>16a</u>		x					
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its								
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	166							
Sec	organization's exempt status with respect to such arrangements?	. 16b	1	L					
17	List the states with which a copy of this Form 990 is required to be filed Idaho								
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)								
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.								
	Image: The second state of the seco								
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy,								
-	and financial statements available to the public during the tax year.								
20	State the name, address, and telephone number of the person who possesses the organization's books and records								
	BARBARA MCGANN (208)388-0343, 9201 GRANDMASON PL, Eagle, ID 83616								

Form 990 (202	0) FRIENDS OF WEISER RIVER TRAIL INC	82-0495183	Page 7
·	Compensation of Officers, Directors, Trustees, Key Employees, Highest C	ompensated Employee	s, 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 t	his table for all persons required to be listed. Report compensation for the calendar year ending with	or within the	
organization's t	ax 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.

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

<u> </u>				((C)	,				
(A)	(B)	Position (do not check more than one box, unless person is both an				(D)	(E)	(F)		
Name and title	Average				n	Reportable	Reportable	Estimated amount		
	hours	office	er and	l a dir	rector	/trustee)		compensation	compensation	of other
	per week (list any							from the organization	from related organizations	compensation from the
	hours for	or d	Inst	Officer	Key	emp	Forme	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and
	related	rect	tutio	ĕr	emp	loye	ner			related organizations
	organizations	Individual trustee or director	Institutional trustee		Key employee	e com				
	below	stee	ruste		õ	pens				
	dotted line)		ĕ			Highest compensated employee				
(1) ALAN STONEMAN	5.00									
DIRECTOR		x						0	0	0
(2) ELSA FREEMAN	5.00									
DIRECTOR		х						0	0	0
(3) JOSH STALLINGS	5.00									
DIRECTOR		х						0	0	0
(4) KARIN LAKEY										
DIRECTOR	5.00	x						0	0	0
(5) MICHAEL BEAVERS	5.00									
DIRECTOR		x						0	0	0
(6) PAM LAKEY	5.00									
DIRECTOR		х						0	0	0
(7) RON HUNDAHL	10.00									
VICE PRESIDENT		х		x				0	0	0
(8) PAT TRAINOR	30.00									
PRESIDENT		х		x				0	0	0
(9) PAM HAYNES	10.00									
SECRETARY		х		x				0	0	0
(10)BARBARA MCGANN	20.00									
TREASURER		х		x				0	0	0
(11)										
<u>(12)</u>										
<u>(13)</u>										
<u>(14)</u>										
										F ame 200 (0000)

	90 (2020) FRIENDS OF WEISER										2-0495	183	P	'age 8
Part	VII Section A. Officers, Directors, Trustee	es, Key Emp	oloyee	s, ar		-	est Co	omp	ensated Employe	es (contin	ued)			
	(A) Name and title	(B) (do not check more than one hours officer and a director/trustee per week					s both ar /trustee)	n Reportable		(E) Reportable compensation from related organizations	able ation ated	cor	(F) Estimated amo of other compensatio from the	
		(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		(W-2/1099-I		orga	nization a	
(15)														
<u>(</u> 16)														
<u>(17)</u>														
(18)														
(19)														
(20)														
(21)														
(22)														
(23)														
(24)														
(25)														
1b	Subtotal		• • •	•••	•••	••		• •						
c d	Total from continuation sheets to Part VII, Sect Total (add lines 1b and 1c)		· · ·	•••	•••	•••	 	· •	0		0			0
2	Total number of individuals (including but not limit reportable compensation from the organization	ed to those I								of			Yes	0 No
3	Did the organization list any former officer, direc employee on line 1a? <i>If</i> "Yes," <i>complete Schedu</i>						-					3		x
4	For any individual listed on line 1a, is the sum of re organization and related organizations greater th													
5	individual											4		x
	for services rendered to the organization? If "Yes			-			-					5		х
Secti 1	on B. Independent Contractors Complete this table for your five highest compensa	ted independ	dent co	ntra	ctore	that	t racai	Vod	more than \$100.00	0. of				
•	compensation from the organization. Report comp										ax year.			
	(A) Name and business addres	SS							(B) Description of servic	ces		(C) Compens	ation	
2	Total number of independent contractors (includin received more than \$100,000 of compensation fro	-				ted a	above) wh	0					

Part V	90 (2020) FRIENDS OF WEISER RIV VIII Statement of Revenue	VER IRAIL IN	C		82-04951	. 83 Pag
	Check if Schedule O contains a response or not	te to any line in this	s Part VIII			
	· · · · · · · · · · · · · · · · · · ·		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
	1a Federated campaigns 1a					
ŝ	b Membership dues 1b	24,727				
contributions, Gitts, Grants and Other Similar Amounts	c Fundraising events	54,919				
ν Α Πο Γ	d Related organizations					
lar /	e Government grants (contributions) 1e	24,935				
, ini	f All other contributions, gifts, grants,					
je je	and similar amounts not included above 1f	80,249				
ð	g Noncash contributions included in	¢				
and	lines 1a-1f 1g h Total. Add lines 1a-1f		104 020			
		Business Code	184,830			
	2a LEASES	531190	7,688	7,688		
		51190	7,000	7,000		
ne						
ven	d					
Revenue	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f	• • • • • •	7,688			
	3 Investment income (including dividends, interest, ar	nd				
	other similar amounts)	-	15	15		
	4 Income from investment of tax-exempt bond procee	F				
	5 Royalties	· · · · · ►				
	(i) Real	(ii) Personal				
	6a Gross rents 6a					
	b Less: rental expenses 6b					
	c Rental income or (loss) 6c d Net rental income or (loss)					
		(ii) Other				
	7a Gross amount from (i) Securities					
	other than inventory 7a					
	b Less: cost or other basis					
e	and sales expenses 7b					
Uther Kevenue	c Gain or (loss) 7c					
Кe	d Net gain or (loss)	· · · · · ►				
ner	8a Gross income from fundraising					
5	events (not including \$ 54,919					
	of contributions reported on line					
	1c). See Part IV, line 18 8a					
	b Less: direct expenses	· · · · · •				
	9a Gross income from gaming	F				
	activities, See Part IV, line 19 9a					
	b Less: direct expenses					
		· · · · · ►				
	10a Gross sales of inventory, less					
	returns and allowances					
	b Less: cost of goods sold 10b					
	c Net income or (loss) from sales of inventory	· · · · · •				
		Business Code				
1	11a					
anue	b					
Kevenue						
۷	d All other revenue					
	e Total. Add lines 11a-11d			_		
	12 Total revenue. See instructions		192,533	7,703	0	

Part IX

020) FRIENDS OF WEISER RIVER TRAIL INC

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a response or note to a	,			
Do n	not include amounts reported on lines 6b, 7b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
8b, 9	9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
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				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	27,751	27,751		
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes	2,762	2,762		
11	Fees for services (nonemployees):				
а	Management				
b	Legal	1,030		1,030	
С	Accounting				
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17 .				
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.)				
12	Advertising and promotion	2,783	2,558	225	
13	Office expenses	1,154		1,154	
14	Information technology	433		433	
15	Royalties				
16	Occupancy	186	186		
17	Travel				
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	5,831	5,831		
23		11,853	1,183	10,670	
24	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 Schedule O.)				
а	TRAIL DEVELOPMENT EXPENSES	16,949	16,949		
b	TRAIL MAINTENANCE	58,665	58,665		
с	MEMBERSHIP AND NEWSLETTER	1,668	1,668		
d	DUES	940	-	940	
е	All other expenses	3,733	2,839	894	
25	Total functional expenses. Add lines 1 through 24e	135,738	120,392	15,346	0
26	Joint costs. Complete this line only if the		-		
	organization reported in column (B) joint costs				
	from a combined educational campaign and fundraising solicitation. Check here				
	following SOP 98-2 (ASC 958-720)				

Form	990 (20	,	8	2-0495	5183 Page 11
Part	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X		••••	
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	58,427	1	120,696
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	5	Loans and other receivables from 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		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) \ldots		6	
	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 12,068,067			
	b	Less: accumulated depreciation 10b 58,493	12,015,405	10c	12,009,574
	11	Investments - publicly traded securities	253,724	11	289,179
	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)	12,327,556	16	12,419,449
	17	Accounts payable and accrued expenses	2,312	17	1,952
	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	
SS	22	Loans and other payables to any current or former officer, director,			
iliti		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		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		25	
	26	Total liabilities. Add lines 17 through 25	2,312	26	1,952
		Organizations that follow FASB ASC 958, check here			
Se		and complete lines 27, 28, 32, and 33.			
ance	27	Net assets without donor restrictions		27	
Bala	28	Net assets with donor restrictions		28	
l pu		Organizations that do not follow FASB ASC 958, check here			
Fu		and complete lines 29 through 33.			
šor	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds	12,325,244		12,417,497
Net	32	Total net assets or fund balances	12,325,244		12,417,497
	33	Total liabilities and net assets/fund balances	12,327,556	33	12,419,449
EEA					Form 990 (2020)

EEA

Form	990 (2020) FRIENDS OF WEISER RIVER TRAIL INC	82-049518	3	Pa	age 12
Par	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				. 🗌
1	Total revenue (must equal Part VIII, column (A), line 12)	. 1		192,	,533
2	Total expenses (must equal Part IX, column (A), line 25)	. 2		135,	,738
3	Revenue less expenses. Subtract line 2 from line 1	. 3		56,	,795
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	. 4	12,	325,	,244
5	Net unrealized gains (losses) on investments	. 5		35,	,458
6	Donated services and use of facilities	. 6			
7	Investment expenses	. 7			
8	Prior period adjustments	. 8			
9	Other changes in net assets or fund balances (explain on Schedule O)	. 9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	. 10	12,	417,	,497
Par	t 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: X Cash Cash Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		x
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b		x
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Single Audit Act and OMB Circular A-133?		3a		x
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 on Schedule O and describe any steps taken to undergo such audits	<u></u> .	3b		
EEA			Form	990 (2020)

SCHEDULE A			Р	ublic Charit	y Status and Po	ublic S	unnor	•	OMB No. 1545-0047
(Form 990 or 990-EZ)		0 or 990-EZ)							2020
			Complete if the organiz		01(c)(3) organization or a s		7(a)(1) none	exempt charitable trust	Open to Public
Department of the Treasury Internal Revenue Service Got			► Got		ch to Form 990 or Form 1077990 for instructions		atest info	rmation	Inspection
		e organization	P 001	o www.ii3.gov/i			atestimo	Employer identificat	
		-	R RIVER TRAIL	INC				82-049518	
	rt I				organizations must o	complete	this par		
					s 1 through 12, check on			,	-
1	Π		•	•	urches described in sect	•	,		
2	Π				Schedule E (Form 990 d				
3	Π		•		n described in section 1	,			
4	Π	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the							
			e, city, and state:	•					
5		An organizatio	n operated for the bene	efit of a college or	university owned or operation	ated by a g	governmen	tal unit described in	
		-)(1)(A)(iv). (Complete	-					
6		A federal, stat	e, or local government	or governmental u	unit described in section	170(b)(1)	(A)(v).		
7	х	An organizatio	n that normally receive	s a substantial par	t of its support from a gov	vernmental	unit or from	m the general public	
		described in s	ection 170(b)(1)(A)(vi). (Complete Part	II.)				
8		A community t	rust described in sect i	on 170(b)(1)(A)(v	i). (Complete Part II.)				
9		An agricultura	research organization	described in sect	i on 170(b)(1)(A)(ix) ope	rated in co	onjunction	with a land-grant colle	ege
		or university of	r a non-land-grant colle	ge of agriculture (see instructions). Enter th	e name, ci	ty, and stat	e of the college or	
		university:							
10		An organizatio	n that normally receive	s: (1) more than 33	3 1/3% of its support from	n contributi	ons, memb	ership fees, and gross	6
		receipts from a	activities related to its e	exempt functions - s	subject to certain excepti	ons; and (2	2) no more	than 33 1/3% of its	
		support from g	ross investment incom	e and unrelated bu	isiness taxable income (l	ess sectior	n 511 tax) f	rom businesses	
		acquired by th	e organization after Ju	ne 30, 1975. See	section 509(a)(2). (Com	plete Part	III.)		
11		An organizatio	n organized and opera	ated exclusively to	test for public safety. Se	e section	509(a)(4).		
12		An organizatio	n organized and opera	ted exclusively for	the benefit of, to perform	the functio	ons of, or to	carry out the purpose	S
		of one or more	e publicly supported or	ganizations descril	bed in section 509(a)(1)	or section	n 509(a)(2)). See section 509(a)	(3).
		Check the box	in lines 12a through 12	2d that describes th	ne type of supporting org	anization a	ind comple	te lines 12e, 12f, and 7	12g.
	а				vised, or controlled by its	•••	-		ing
			• • • •		/ appoint or elect a majo	rity of the c	directors or	trustees of the	
		•	-	•	IV, Sections A and B.				
	b	_ ,,		•	ontrolled in connection w		•		
			e 1		on vested in the same pe	rsons that	control or r	nanage the supported	
		_ *	on(s). You must com	•					
	С				anization operated in co				vith,
			0 ()(,	u must complete Part I	•	• •		
	d				g organization operated				
				• •	generally must satisfy a d		•	nt and an attentiveness	
	-		. ,	•	e Part IV, Sections A a				
	е		-		determination from the II ntegrated supporting org		sa rypei,	туре п, туре п	
	f								
			lowing information abo			• • • • •	• • • • •		••••
	g) Name of supported		(ii) EIN	(iii) Type of organization	(iv) is the o	organization	(v) Amount of monetary	(vi) Amount of
	(I	I) Name of supported	organization		(described on lines 1-10	1	ir governing	support (see	other support (see
					above (see instructions))	docum		instructions)	instructions)
						Yes	No	1	
						103			
(A)									
(B)									
(C)									

(D)

(E)

		F WEISER RI				82-049518	
Pa	rt II Support Schedule for Organiza	ations Descri	bed in Secti	ons 170(b)(1)(A)(iv) and	170(b)(1)(A)(v	/i)
	(Complete only if you checked th	e box on line	5, 7, or 8 of I	Part I or if the	organization	failed to quali	fy under
	Part III. If the organization fails to	o qualify unde	r the tests list	ted below, ple	ease complet	e Part III.)	-
Se	ction A. Public Support				•		
_	endar year (or fiscal year beginning in)►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and	(.,	(,	(0) = 0.10	(-)	(1) = 1 = 1	()
•	membership fees received. (Do not						
	include any "unusual grants.")	221 724	101 272	00 227	122 100	192,518	926 962
2	Tax revenues levied for the	231,734	181,273	99,337	132,100	192,510	836,962
2							
	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	231,734	181,273	99,337	132,100	192,518	836,962
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)						92,303
6	Public support. Subtract line 5 from line 4						744,659
_	ction B. Total Support						, 11,055
	endar year (or fiscal year beginning in)►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7	Amounts from line 4	231,734	181,273		132,100		836,962
		231,/34	181,2/3	99,337	132,100	192,518	830,902
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties, and income from						
_	similar sources	6,915	1		5,850	15	12,781
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.)	7,823	3,267	3,693	2,265		17,048
11	Total support. Add lines 7 through 10						866,791
12	Gross receipts from related activities, etc. (se	ee instructions)				12	
	First five years. If the Form 990 is for the or			d, fourth, or fift	h tax year as a	a section 501(c)	(3)
	organization, check this box and stop here						
Se	ction C. Computation of Public Support						
_	Public support percentage for 2020 (line 6, c			column (f))		14	85.91 %
	Public support percentage from 2019 Sched		•			15	83.63 %
	33 1/3% support test - 2020. If the organization					-	
100	box and stop here. The organization qualifie						
ŀ	33 1/3% support test - 2019. If the organization		•••				
K							
47-	this box and stop here. The organization qu			-			
178	10%-facts-and-circumstances test - 2020.	-					
	10% or more, and if the organization meets				-	-	
	Part VI how the organization meets the facts			-			_
	organization						_
k	0 10%-facts-and-circumstances test - 2019.	-					
	15 is 10% or more, and if the organization m						
	in Part VI how the organization meets the factor	cts-and-circums	stances test. T	he organizatior	n qualifies as a	publicly suppo	rted
	organization						🕨 🗌
18	Private foundation. If the organization did r	ot check a box	on line 13, 16	a, 16b, 17a, or	17b, check thi	is box and see	
	instructions						

Sche	dule A (Form 990 or 990-EZ) 2020 FRIENDS OI	F WEISER R	IVER TRAIL	INC		82-049518	3 Page 3
Pa	Int III Support Schedule for Organiz						
	(Complete only if you checked the	he box on lin	e 10 of Part I	or if the orga	inization failed	d to qualify und	ler Part II.
	If the organization fails to qualify	under the te	ests listed bel	ow, please co	omplete Part	II.)	
See	ction A. Public Support			-			
Cal	endar year (or fiscal year beginning in)►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(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 fumished 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						
3	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
6	•						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
D	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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from						
	line 6.)						
See	ction B. Total Support			•		· · · · · · ·	
Cal	endar year (or fiscal year beginning in)►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
с	Add lines 10a and 10b						
	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,						
10	and 12.)						
11	First 5 years. If the Form 990 is for the orga	nization's first	second third	fourth or fifth	tax year as a s	ection $501(c)(3)$	
14					-		
800	organization, check this box and stop here ction C. Computation of Public Suppor						· · · · ► 📋
_						45	0/
	Public support percentage for 2020 (line 8, c		-			15	<u>%</u>
	Public support percentage from 2019 Schedu					16	%
	ction D. Computation of Investment Ind						
	Investment income percentage for 2020 (line					17	%
18	Investment income percentage from 2019 So					18	%
19a	33 1/3% support tests - 2020. If the organiz						
	17 is not more than 33 1/3%, check this box						
b	33 1/3% support tests - 2019. If the organiz						
	line 18 is not more than 33 1/3%, check this	box and stop	here. The orga	anization qualif	ies as a publicl	y supported orga	anization 🕨 🗌
20	Private foundation. If the organization did n	ot check a bo	x on line 14, 19	a, or 19b, che	ck this box and	see instructions	; ▶ 🗌

Part	e A (Form 990 or 990-EZ) 2020 FRIENDS OF WEISER RIVER TRAIL INC 82-0495 IV Supporting Organizations		-	age
	(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete only if you checked a box in line 12 on Part I.	ete Sec	tions	А
	and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Pa	rt I, con	nplete	•
	Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete	e Part \	/.)	
ecti	ion A. All Supporting Organizations		, ,	
	Are all of the experimetical experimetical listed by some in the experimetical program		Yes	N
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			
	lines 3b and 3c 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 lines 4b and 4c below.	4a		
b				
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination			
C	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)			
		10		
F -	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
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		
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		
h	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which	54		
5	the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
~		30		
С		0-		
10-	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9c		
iva	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		

Schedule A (Form 990 or 990-EZ) 2020 FRIENDS OF WEISER RIVER TRAIL INC	82-0495183	Р	age 5
Part IV Supporting Organizations (continued)			
		Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?			
a A person who directly or indirectly controls, either alone or together with persons described in line	s 11b and		
11c below, the governing body of a supported organization?	11a		
b A family member of a person described in line 11a above?	11b		
c A 35% controlled entity of a person described in 11a or 11b above? If "Yes" to line 11a, 11b, or 1	1c, provide		
detail in Part VI.	11c		
Section B. Type I Supporting Organizations			
		Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership	o of one or		

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 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.

Section C. Type II Supporting Organizations

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).

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

- 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
- c 🗌 The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify** those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No," provide details in Part VI.*
- **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.*

1

2

1

Yes No

chedule A (Form 990 or 990-EZ) 2020 FRIENDS OF WEISER RIVER TRAIL INC		82-049	95183 Page
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting C			
1 Check here if the organization satisfied the Integral Part Test as a qualifyin	-		-
instructions. All other Type III non-functionally integrated supporting orga	nizations	must complete Sectio	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (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 Yea (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):			
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 0.015 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 0.035.	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 0.85 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		
		ted Type III supporting	g organization
(see instructions).			
	ly integra	ted Type III supporting	g organization

Schedule A (Form 990 or 990-EZ) 2020

	le A (Form 990 or 990-EZ) 2020 FRIENDS OF WEISER RIVER I		82-0		5183 Page 7
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organiz	zations (continue	a)	
Sec	tion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exem	npt purposes		1	
2	Amounts paid to perform activity that directly furthers exempt	purposes of supported			
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purposes	s of supported organizat	ions	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required) - pr	rovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is respons	ive		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sec	tion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2020	ns	(iii) Distributable Amount for 2020
-	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020				
	(reasonable cause required - explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2020				
	From 2015				
b	From 2016				
	From 2017				
	From 2018				
е	From 2019				
	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from				
	Section D, line 7: \$				
	Applied to underdistributions of prior years			_	
	Applied to 2020 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, 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 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
	and 4c.				
	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
FFA				Schod	ule A (Form 990 or 990-E7) 2020

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Fo	e A (Form 990 or 990-EZ) 2020 Page					
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 B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

OMB No. 1545-0047

2020

►	Attach	to Form 990	, Form 990-EZ,	or Form 990-PF.
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▶ Go to www.irs.gov/Form990 for the latest information.

Name of the organization Employer identification number FRIENDS OF WEISER RIVER TRAIL INC 82-0495183

Organization type (check one):

Section:
X 501(c)(3) (enter number) organization
4947(a)(1) nonexempt charitable trust not treated as a private foundation
527 political organization
501(c)(3) exempt private foundation
4947(a)(1) nonexempt charitable trust treated as a private foundation
501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

x For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Part I

(a)

Νó.

Schedule B (Form 990, 990-EZ, or 990-PF) (2020) Name of organization

FRIENDS OF WEISER RIVER TRAIL INC

(b)

Name, address, and ZIP + 4

Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

Person x 1 CARVER MEAD Payroll Noncash \$ 20,000 \square PO BOX 66488 (Complete Part II for noncash contributions.) SEATTLE WA 98166 (d) (a) (b) (c) **Total contributions** No. Type of contribution Name, address, and ZIP + 4 Person х 2 RICHARD AND MARY ELLEN PUGH Payroll Noncash \square \$ 20,000 432 134TH AVE (Complete Part II for Andover MN 55304 noncash contributions.) (b) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** No. Type of contribution 3 JOHN AND ANNE OLDEN Person х Payroll Noncash S 5,000 6101 N PORTSMOUTH AVE (Complete Part II for Garden City ID 83714 noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Pavroll \$ Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person Payroll Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll \$ Noncash \square (Complete Part II for noncash contributions.) Schedule B (Form 990, 990-EZ, or 990-PF) (2020)

Employer identification number 82-0495183

(c)

Total contributions

(d)

Type of contribution

SCHEE	DULE D
(Form	990)

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.

OMB No. 1545-0047

2020

Determinant statute backet F Go to unweiting gov/Form990 for instructions and the latest information. Depict of instructions for instructions of the instruction of the instructions of the instructions of the instructions of the instruction of the instruction of the instructions of the instruction of the instructin the instruction of the instruction of the instructin				Attach to Form 990.	,	-	Open to Public
					e latest inform	ation	-
PartINCS OF VEISER RIVER TRATE INC					e latest inform		
PartIL Organization Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. 1 Total number at end of year		-	R RIVER TRATI. INC				
Complete if the organization answered "Yes" on Form 990, Part IV, line 6. 1 Toti number it end of year 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants tonn (during year) 4 Aggregate value of and of year 5 Dot the organization inform diarons and doorn advisors in writing that the assets held in door advised funds are the organization inform advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the doorn or doorn advisor, or for any other purpose conforming impensible private benefit? Impensible if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements. Complete in the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(s) of conservation easements. 2 Organization of land for public use (e.g., mecreation or education) 2 Preservation of a historically important land area 3 Totia introber 2 and trobit 2 of the organization held a qualified conservation construction in the family the organization introber is structure. 2 Complete into organization answered "Yes" on Form 990, Part IV, line 7. 1 Valia and ye				unds or Other Similar F	unds or Acco		
Total number at end of year			-				
1 Total number at end of year Image: sequence of the sequence of						(b) Funds a	and other accounts
2 Aggregate value of contributions to (duing year)	1	Total number at er	nd of year				
Aggregate value of grants from (during year)							
A Aggregate value at end of year							
5 Did the organization inform all donors and door advisors in writing that the assets held in doors advised funds are the organization inform all garnese, doors, and door advisors in writing that grant funds can be used orly for charitable purposes and not the benefit of the donor of doror advisor, for any other purpose conferring intermistible purposes and not the benefit of the donor of door advisor, for any other purpose conferring intermistible purposes and not the benefit of the donor of door advisor, or for any other purpose conferring intermistible purposes and not the benefit of the donor of door advisor, for any other purpose conferring intermistible purposes (i of conservation easements. Held by the organization nanswered "Ves" on Form 990, Part IV, line 7. Proprox (i) of conservation easements held by the organization (check all that appt). Preservation of a lar for public use (e.g., recreation or education) Preservation of a cartified historic structure Preservation of pane pace Preservation of a cartified historic structure 2 Complete line to conservation easements Za d Index at the End of the Tax Yes 3 Total number of conservation easements Za d Za d 4 Number of conservation easements Za d Za d 5 Does the organization number of generation easements included in (a) acquired atter 72500; and not on a historic structure is leaded to the organization easements included to conservation easements included to							
funds are the organization's property, subject to the organization's exclusive legal control? Yes No 6 Did the organization inform all grantees, donors, and donor advisor, or for any other purpose conterning impermissible private benefit? Yes No PartIII Conservation Easements. Yes No 0 Propose(o) do conservation easements hed by the organization (check all that apply). Preservation of a historically important land area Preservation of a certified historic structure Preservation of a certified historic structure 2 Complete lines.2a through 2d if the organization heid a qualified conservation contribution in the form of a conservation easement hot heis at yop to the tax year. Held at the End of the Tax Year. 8 Total number of conservation easements in cluded in (c) acquired after 7/25(0), and not on a historic structure listed in the National Register Za 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > 4 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization relation resonants holds? Yes 5 Does the organization have a written policy regarding the periode montroing, inspection, handling of violations, and enforcing conservation easements the hold? 6 Does stach conservation easements in hold? Conservation easements during the year	5	00 0		riting that the assets held in	donor advised	I	
6 Did the organization inform all grantees, donors and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose confering impermissible private benefit? Yes No Part IU Conservation Easements. Yes or Form 990, Part IV, line 7. 1 Purpose(s) of conservation assements held by the organization (check all that apply). Preservation of an labitat Preservation of open space 2 Complete in the organization had a qualified conservation contribution in the form of a conservation 2 assement on the last day of the tax year. 2 Total number of conservation easements. 2 a Number of conservation easements. 3 a Number of conservation easements. 3 a Number of conservation easements included, transferred, released, extinguished, or terminated by the organization have a written policy regarding the periodic monitoring, inspecting, handling of violations, and enforcing conservation easements includes? 6 Staff and voluneer hours deviced to monitoring, inspecting, handling of violations, and enforcing conservation easements during the yea		-		-			. Yes No
orly for chaintable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Image: The second seco	6	•		-			
confering impermissible private benefit? □ Yes □ No Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 1 Purpose(6) of conservation easements held by the organization (check all that apply). □ Preservation of land for public use (e.g., crectation or education) □ □ Preservation of land for public use (e.g., crectation or education) □ □ Preservation of land to public use (e.g., crectation or education) □ □ Preservation of land to public use (e.g., crectation or education) □ □ Preservation of land to public use (e.g., crectation or education) □ □ Preservation of land to public use (e.g., crectation or education) □ □ Preservation of land to public use (e.g., crectation or education) □ □ Preservation easements □ □ □ Total anreage restricted by conservation easements □ □ □ Number of conservation easements included in (e) acquired lart 7250(6, and on a historic structure inducid in the National Register □ □ 3 Number of conservation easements includer, released, extinguished, or terminated by the organization during the tax year ▶ □ 0 4 Number of co		-	-				
Part II Conservation Easements. Complete if the organization naswered "Yes" on Form 990, Part IV, line 7. □ Purpose(s) of corservation easements held by the organization (check all that apply). □ Preservation of land for public use (e.g., recreation or education) □ □ Preservation of and for public use (e.g., recreation or education) □ □ Preservation of and for public use (e.g., recreation or education) □ □ Preservation of a conservation a conservation easement on the last day of the tax year. ■ 2a 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. ■ 2 Complete lines 2a through 2d if the organization during the fax Yea 3 Total acreage restricted by conservation easements included in (a)							. 🗌 Yes 🗌 No
1 Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of a historically important land area 2 Preservation of a land for public use (e.g., recreation or education) Preservation of a certified historic structure 2 Preservation of open space Preservation of a certified historic structure 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation a Total number of conservation easements 2a 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation a Total accage restricted by conservation easements 2b 2 2d 3 Number of conservation easements included in (a) 2c 4 Number of conservation easements included in (c) eacquired atri 7/25/06, and not on a historic structure lisket in the National Register 2d 4 Number of states where property subject to conservation easement is lockated ▶ 2d 5 Does the organization have a written policy regarding the periodic montoring, inspecting, handling of violations, and enforcing conservation easements during the year ★	Pa						
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□ Protection of natural habitat □ Preservation of open space 2 Complete lines 2a trough 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Image: Complete lines 2a trough 2d if the organization easements Image: Complete lines 2a trough 2d if the organization held a qualified conservation contribution in the form of a conservation a Total number of conservation easements Image: Complete lines 2a trough 2d v conservation easements Image: Complete lines 2a trough 2d v conservation easements c Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Image: Complete lines 2a trough 2d v conservation easements is located > 3 Number of states where property subject to conservation easements is located > Image: Complete lines 2a trough 2d v conservation easements is located > 4 Number of states where property subject to conservation easements includer monitoring, inspection, handling of violations, and enforcing conservation easements during the year *	1						
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Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 3 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 3 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 3 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 3 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 4 Number of states where property subject to conservation easements in located > 5 Does the organization have a written policy regarding the periodic montoring, inspecting, handling of violations, and enforcing conservation easements during the year > *		_					
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easement on the last day of the tax year. a Total number of conservation easements b Total acreage restricted by conservation easements c Number of conservation easements on a certified historic structure included in (a) 2a 2b 2c 2d 2d<	2			conservation contribution in	the form of a c	onservation	
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d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶		•	-	cture included in (a)		2c	
historic structure listed in the National Register 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ 4 Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶	d						
 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶						2d	
 tax year ▶	3		-				
 A Number of states where property subject to conservation easement is located ▶						, c	
 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? 6 Staff and volunter hous devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶	4		where property subject to conservation ease	ement is located >			
 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \$	5				andling of		
 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \$		violations, and enfo	prcement of the conservation easements it h	nolds?			. Yes No
 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \$	6	Staff and volunteer	hours devoted to monitoring, inspecting, ha	ndling of violations, and enfo	orcing conservat	tion easements durin	g the year
 ▶ \$		•		-	-		
 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ii) and section 170(h)(4)(B)(ii)? 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990,	7	Amount of expense	es incurred in monitoring, inspecting, handlir	ng of violations, and enforcin	g conservation	easements during the	e year
 and section 170(h)(4)(B)(iii)?		▶\$					
 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 	8	Does each conser	vation easement reported on line 2(d) above	e satisfy the requirements of	section 170(h)(4)(B)(i)	
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organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) (ii) Revenue included on Form 990, Part VIII, line 1 > \$ 2 If the organization received or held works of art, historical treasures, or other FASB ASC 958 relating to these items: > \$ a Revenue included on Form 990, Part VIII, line 1 Sector the similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 > \$	9	In Part XIII, describ	be how the organization reports conservation	on easements in its revenue a	and expense sta	tement and	
Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:		balance sheet, and	include, if applicable, the text of the footnot	e to the organization's financ	cial statements t	hat describes the	
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 of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 		Complet	te if the organization answered "Yes" of	on Form 990, Part IV, line	e 8.		
 service, provide, in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 	1a	If the organization	elected, as permitted under FASB ASC 958	3, not to report in its revenue	statement and l	balance sheet works	
 b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X (iii) Assets included in Form 990, Part X (iii) Assets included or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 		of art, historical tre	asures, or other similar assets held for publi	ic exhibition, education, or re	search in furthe	rance of public	
 art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 		service, provide, in	Part XIII the text of the footnote to its finan	cial statements that describe	s these items.		
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 provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1		-					,
 (i) Revenue included on Form 990, Part VIII, line 1							
 (ii) Assets included in Form 990, Part X		•				▶ \$	
 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1							
following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1	2						
a Revenue included on Form 990, Part VIII, line 1		-				×.	
	а	-		-		· · · · · ▶ \$	

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Sched	ule D (Form 990) 2020 FRIENDS OF WEISER						82-049			age 2
Pa	rt III Organizations Maintaining Co	ollections of	Art, Hist	orical T	reasures	, or Ot	her Similar A	Assets (d	contin	ued)
3	Using the organization's acquisition, accession, a	nd other records,	, check any	of the follo	owing that ma	ake signi	ficant use of its			
	collection items (check all that apply):									
а	Public exhibition		d [Loan	or exchange	program	IS			
b	Scholarly research		е [Other						
С	Preservation for future generations									
4	Provide a description of the organization's collect	ions and explain	how they fu	urther the c	organization's	sexempt	t purpose in Part			
	XIII.									
5	During the year, did the organization solicit or rec							_		
_	assets to be sold to raise funds rather than to be		art of the or	ganization	's collection?			🗌 Ye	s	No
Pa	rt IV Escrow and Custodial Arrange		_			~			_	
	Complete if the organization and	swered "Yes"	on Form	990, Pa	art IV, line	9, or re	eported an an	nount on	Form	
	990, Part X, line 21.									
1a	Is the organization an agent, trustee, custodian or		-					_		
								Ye	s	No
b	If "Yes," explain the arrangement in Part XIII and	complete the follo	owing table							
								mount		
С	Beginning balance									
d	Additions during the year									
е	Distributions during the year									
f	Ending balance									
2a	Did the organization include an amount on Form 9									No
	If "Yes," explain the arrangement in Part XIII. Che	eck here if the exp	planation ha	as been pr	ovided on Pa	art XIII			•	
Pa	rt V Endowment Funds.			000 D-	at D/ Base	10				
	Complete if the organization ans									
		(a) Current year	(b) Pric	r year	(c) Two years	s back	(d) Three years bac	k (e) For	ur years b	ack
1a	Beginning of year balance									
b										
С	Net investment earnings, gains, and									
								_		
d	Grants or scholarships									
е	Other expenditures for facilities and									
	programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the current y	ear end balance	(line 1g, co	lumn (a)) l	held as:					
а	Board designated or quasi-endowment	%								
b	Permanent endowment %									
С	Term endowment %									
_	The percentages on lines 2a, 2b, and 2c should e									
3a	Are there endowment funds not in the possession	n of the organizat	tion that are	held and	administered	for the				
	organization by:							a (1)	Yes	No
	(i) Unrelated organizations							3a(i)		
	(ii) Related organizations							- · · ·		
	If "Yes" on line 3a(ii), are the related organization	•			••••		•••••	3b		
4 Do	Describe in Part XIII the intended uses of the org		wment fund	S.						
ra	rt VI Land, Buildings, and Equipme		on Earm	000 0-	ort IV/ line	11~ 0	oo Earm 000	Dort V	ina 11	h
	Complete if the organization and									J.
	Description of property	(a) Cost or oth (investme		• •	r other basis other)	• • •	Accumulated epreciation	(d) Bo	ok value	
10	Land	(investini				u	op. solution	10	000	000
1а ь	Land			12,0	000,000			12,	000,0	
b	Buildings									
с С	Leasehold improvements				60 007		E0 402		0	E 77 4
d	Equipment				68,067		58,493		У,	574
e Tota	Other	In Form 000 Day	rt X oolum	n (R) line	100)			10	000	574
rota	. Aud intes la uniough le. (Column (a) must equ	ai ruitti 990, Pal	πΛ, colum	י (<i>ם</i>), וווופ	100	• • • •	🕨	14,	009,	4/ ر

EEA

Schedule D (Form 990) 2020	FRIENDS OF WEISER RIVER TRA	IL INC	82-0495183	Page 3
Part VII Investmen	ts - Other Securities.			
Complete if	f the organization answered "Yes" on For	m 990, Part IV, lin	e 11b. See Form 990, Part X, lir	าe 12.
(a) [Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	e
(1) Financial derivatives				
(2) Closely-held equity interes	ts			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column (b) must equal	I Form 990, Part X, col. (B) line 12.) ►			
Part VIII Investmen	ts - Program Related.			
Complete it	f the organization answered "Yes" on For	m 990, Part IV, lin	e 11c. See Form 990, Part X, lir	ne 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	e
<i>(</i>				

	Cost or end-of-year market value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ►	

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

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

Part X Other Liabilities.

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

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

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

Sched	ule D (Form 990) 2020 FRIENDS OF WEISER RIVER TRAIL INC	82-0495183	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Reven	ue per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	<u> </u>	
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		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.).		
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expe	enses per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.)		
С	Add lines 4a and 4b		
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	
Pa	rt XIII Supplemental Information.		

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

SCHEDULE G	Supplemer	ntal Informatio	on Regard	lina Fund	raising or Gan	nina Act	ivities	OMB No. 1545-0047
(Form 990 or 990-EZ)		if the organization	answered "Y	es" on Form	990, Part IV, line 17,	18, or 19, or		2020
Department of the Treasury		► At	tach to Form	990 or Form				Open to Public
Internal Revenue Service	▶0	So to www.irs.gov/l	-orm990 for ir	nstructions ar	nd the latest information	tion.	Employor id	Inspection entification number
-								
FRIENDS OF WEISER			ha araani-	tion one	warad "Vaa" an	Form 00		195183
	-		-		wered "Yes" on	Form 99	0, Part IV	, line 17.
		t required to con						
1 Indicate whether the	organization rais	ed funds through a	· _	U				
a Mail solicitations	adicitationa				non-government grants			
b Internet and email c Phone solicitation					aising events			
d In-person solicitat			g ∐ S		aising events			
2a Did the organization		oral agreement w	ith any indivi	dual (includin	a officers directors	trustees		
or key employees lis		-	-		-			res 🗌 No
b If "Yes," list the 10 hi		, ,		•	0			
compensated at leas	. .			aloualit to ag				
			(iii) Did fun	draiser have			ount paid to	(vi) Amount paid to
(i) Name and address or entity (fundra		(ii) Activity	custody o	r control of	(iv) Gross receipts from activity		tained by) ser listed in	(or retained by)
			contrib	outions?			ol. (i)	organization
			Yes	No				
1								
2								
3								
4								
5								
6								
0								
7								
•								
8								
9								
10								
Total				►				
3 List all states in which	the organization	is registered or lic	censed to sol	icit contributi	ons or has been no	tified it is ex	cempt from	
registration or licensin	g.							

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		gross receipts greater than	φ0,000.			
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			IDAHOGIVES	LORTZ TREST	None	(add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
Ð						
Revenue	1	Gross receipts	19,302	29,675		48,977
eve	•		19,302	29,075		40,977
œ	2	Less: Contributions				
	2					
	3	Gross income (line 1 minus				
		line 2)	19,302	29,675		48,977
	4	Cash prizes				
	5	Noncash prizes				
ŝ	6	Rent/facility costs				
lse	-					
Direct Expenses	7	Food and hoverages				
ш	7	Food and beverages				
ect	_					
Ē	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lines	4 through 9 in column (d)			
	11	Net income summary. Subtract line				48,977
Pa	rt II	II Gaming. Complete if the c				-
		\$15,000 on Form 990-EZ,	•	····, ···	,,,,	
		\$10,000 011 0111 000 <u>22</u> ,		(b) Dull tabe/instant		(d) Total coming (odd
e			(a) Bingo	(b) Pull tabs/instant		(d) Total gaming (add
			(a) Diligu	bingo/progressive bingo	(c) Other gaming	col (a) through col (c))
/eni			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Reven			(a) Dingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue	1	Gross revenue	(d) Dirigo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Reven	1		(d) bingu	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
	1	Gross revenue	(d) bingu	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
			(d) bingu	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
			(d) bingu	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
	2	Cash prizes		bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
	2 3	Cash prizes		bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Direct Expenses Reven	2	Cash prizes		bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
	2 3 4	Cash prizes		bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
	2 3	Cash prizes				col. (a) through col. (c))
	2 3 4 5	Cash prizes	%	Yes %	Yes %	col. (a) through col. (c))
	2 3 4	Cash prizes				col. (a) through col. (c))
	2 3 4 5	Cash prizes	% % No	□ Yes% □ No	Yes%	col. (a) through col. (c))
	2 3 4 5	Cash prizes	% % No	□ Yes% □ No	Yes%	col. (a) through col. (c))
	2 3 4 5	Cash prizes	% % No	□ Yes% □ No	Yes%	col. (a) through col. (c))
	2 3 4 5	Cash prizes	Yes % No % 2 through 5 in column (d)	□ Yes% □ No	□ Yes% □ No	col. (a) through col. (c))
	2 3 4 5 6 7	Cash prizes	Yes % No % 2 through 5 in column (d)	□ Yes% □ No	□ Yes% □ No	col. (a) through col. (c))
Direct Expenses	2 3 4 5 6 7 8	Cash prizes	Yes% No s 2 through 5 in column (d) tract line 7 from line 1, colu		□ Yes% □ No	col. (a) through col. (c))
6 Direct Expenses	2 3 4 5 6 7 8 En	Cash prizes	Yes% No s 2 through 5 in column (d) tract line 7 from line 1, colu		Yes% No	col. (a) through col. (c))
b c Direct Expenses	2 3 4 5 6 7 8 En Ist	Cash prizes	Yes% No S 2 through 5 in column (d) tract line 7 from line 1, colu tion conducts gaming activities in each of		Yes% No	col. (a) through col. (c))
6 Direct Expenses	2 3 4 5 6 7 8 En Ist	Cash prizes	Yes% No s 2 through 5 in column (d) tract line 7 from line 1, colu		Yes% No	col. (a) through col. (c))
b c Direct Expenses	2 3 4 5 6 7 8 En Ist	Cash prizes	Yes% No S 2 through 5 in column (d) tract line 7 from line 1, colu tion conducts gaming activities in each of		Yes% No	col. (a) through col. (c))
g b G Direct Expenses	2 3 4 5 6 7 8 En Ist	Cash prizes	Yes% No 2 through 5 in column (d) tract line 7 from line 1, colu tion conducts gaming activities in each of	□ Yes % □ No mn (d)	Yes% No	col. (a) through col. (c))
g a 6 Direct Expenses	2 3 4 5 6 7 8 En Is 1 9 If "	Cash prizes	Yes% No 2 through 5 in column (d) tract line 7 from line 1, colu tion conducts gaming activities in each of	□ Yes % □ No mn (d)	Yes% No	col. (a) through col. (c))
g a 6 Direct Expenses	2 3 4 5 6 7 8 En Is 1 9 If "	Cash prizes	Yes% No 2 through 5 in column (d) tract line 7 from line 1, colu tion conducts gaming activities in each of	□ Yes % □ No mn (d)	Yes% No	col. (a) through col. (c))

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

Employer identification number

FRIENDS OF WEISER RIVER TRAIL INC

82-0495183

01. Officer, directors, etc. family relationship (Part VI, line 2)

Two of the directors are sisters. Karin Lakey and Pam Lakey. If there is any items

coming to a vote about either one of them, the other is recused from voting. Friends of

Weiser River Trail conducts no business with either director.

02. Members or stockholder classes and rights (Part VI, line 6)

THE ORGANIZATION HAS MEMBERS THAT PAY DUES.

03. Member election for additional members (Part VI, line 7a)

MEMBERS IN GOOD STANDING (HAVE PAID THEIR DUES) VOTE TO ELECT THE BOARD OF DIRECTOR

POSITIONS ANNUALLY. DIRECTORS SERVE A THREE YEAR TERM WITH A ROTATIONAL SCHEDULE. FROM

THE DULY ELECTED BOARD, AN ELECTION IS HELD TO APPOINT OFFICERS ANNUALLY.

04. Form 990 governing body review (Part VI, line 11)

THE FORM 990 IS PRESENTED BY THE TREASURER AND REVIEWED BY THE ENTIRE BOARD OF DIRECTORS

BEFORE IT IS FILED.

05. Conflict of interest policy compliance (Part VI, line 12c)

FRIENDS OF WEISER RIVER TRAIL HAVE A WRITTEN CONFLICT OF INTEREST POLICY. DIRECTORS ARE

REQUIRED TO DISCLOSE ANNUALLY ANY CONFLICTS OF INTEREST. THE POLICY IS MONITORED AND

ENFORCED AT EACH OF THE MONTHLY MEETINGS, WITH EXPLANATIONS OF ANY CONFLICTS RECORDED IN

THE MEETING MINUTES, ALONG WITH HOW IT WAS HANDLED. DIRECTORS THAT HAVE A CONFLICT ARE

RECUSED FROM DISCUSSING OR VOTING ON ANY MATTERS THAT ARE IN ANY WAY A CONFLICT OF

INTEREST.

Name of the organization

FRIENDS OF WEISER RIVER TRAIL INC

Employer identification number

nber

Page 2

82-0495183

06. Form 990 availability to public (Part VI, line 18)

ALL PUBLIC INFORMATION DOCUMENTS ARE MADE AVAILABLE AT THE ORGANIZATION'S ANNUAL MEETING

AND TO THE PUBLIC UPON REQUEST. THE COMPLETED 990 IS ALSO POSTED ON THE ORGANIZATION'S

WEBSITE.

07. Governing documents, etc, available to public (Part VI, line 19)

GOVERNING DOCUMENTS (POLICIES, MINUTES, CONTRACTS, BYLAWS, ARTICLES OF INCORPORATION) ARE

AVAILABLE TO THE PUBLIC UPON REQUEST. REQUESTS CAN BE MADE TO ANY OFFICER, OR AT A

MONTHLY MEETING.

	4562		-	eciation a ng Informatio ► Attach to y	on on Li	isted Pro				OMB No. 1545-0172
	al Revenue Service (99)	► G	o to www.irs.ge	ov/Form4562 for	r instruction	ons and th	e latest infor	mation.		Sequence No. 179
Name	s) shown on return			E	Business or ac	tivity to which	this form relates		Identif	fying number
FRI	ENDS OF WEISE					990 - 1			82-	-0495183
Pa	rt I Election	n To Expens	e Certain Pr	operty Unde	r Sectio	n 179				
	Note: If	you have any	listed property	, complete Part	t V before	you com	plete Part I.		1	
1	Maximum amount	```	·						1	
2	Total cost of sectio	on 179 property p	placed in service	(see instructions))				2	
3	Threshold cost of s	section 179 prop	erty before reduc	ction in limitation	(see instruc	ctions)			3	
4	Reduction in limitat	tion. Subtract line	e 3 from line 2. If	zero or less, ente	er-0				4	
5	Dollar limitation for	tax year. Subtra	ct line 4 from line	e 1. If zero or less	s, enter -0-	. If married	filing			
	separately, see ins	structions							5	
6		(a) Description of pr	roperty		(b) Cost (busi	iness use only) (c)	Elected cost		
7	Listed property. En	iter the amount fi	rom line 29			7				
8	Total elected cost	of section 179 p	roperty. Add amo	ounts in column (c), lines 6 a	and 7			8	
9	Tentative deductio	n. Enter the sm	aller of line 5 or	line 8					9	
10	Carryover of disalle	owed deduction	from line 13 of yo	our 2019 Form 45	562				10	
11	Business income li	mitation. Enter th	he smaller of bus	siness income (no	ot less thar	n zero) or li	ne 5. See instr	uctions	11	
12	Section 179 expen	se deduction. Ac	dd lines 9 and 10	, but don't enter r	more than I	ine 1.1	. <u></u>		12	
13	Carryover of disalle	owed deduction	to 2021. Add line	es 9 and 10, less	line 12	•	13			
Note	: Don't use Part II o	or Part III below	for listed propert	ty. Instead, use F	Part V.					
Pa	rt II Special	Depreciatio	n Allowance	and Other D	Deprecia	tion (Do	on't include l	isted propert	ty. Se	e instructions.)
14	Special depreciation	on allowance for	qualified property	y (other than listed	d property)	placed in a	service			
	during the tax year.	. See instructions	s						14	
15	Property subject to	section 168(f)(1	1) election						15	
16	Other depreciation	(including ACR	S)						16	
Pa	rt III MACRS	S Depreciati	on (Don't inc	clude listed pro	perty. Se	e instructi	ons.)			
				Sec	ction A				1	1
17	MACRS deduction	s for assets plac	ed in service in t	tax years beginni	ng before 2	2020			17	5,831
18	If you are electing	to group any ass	sets placed in se	rvice during the t	ax year into	o one or m	ore general	_		
	asset accounts, ch									
	Section	n B - Assets F	1	vice During 20		ear Using	g the Genera	al Depreciat	ion S	ystem
	(a) Classification of p	property	(b) Month and year placed in	(c) Basis for depr (business/investm		d) Recovery	(e) Convention	(f) Method	(a)	Depreciation deduction
			service	only-see instruc	tions)	period	.,			
19a	3-year property									
b	5-year property									
С	7-year property									
d	10-year property									
е	15-year property									
f	20-year property									
g	25-year property					25 yrs.		S/L		
h	Residential rental					27.5 yrs.	MM	S/L		
	property					27.5 yrs.	MM	S/L		
i	Nonresidential real					39 yrs.	MM	S/L		
	property		L	<u> </u>			MM	S/L	<u> </u>	
		- Assets Pla	ced in Service	e During 2020	Tax Year	r Using th	ne Alternativ	/e Deprecia	tion S	ystem
20a	Class life							S/L		
b	12-year					12 yrs.		S/L		
C	30-year					30 yrs.	MM	S/L		
	40-year					40 yrs.	MM	S/L		
Pa	rt IV Summa	ary (See instr	uctions.)						1	
21	Listed property. Er	nter amount from	n line 28						21	ļ
22	Total. Add amount	ts from line 12, I	ines 14 through	17, lines 19 and	20 in colur	mn (g), and	l line 21. Ente	r		
	here and on the ap	propriate lines o	of your return. Pa	rtnerships and S	corporation	ns - see ins	tructions		22	5,831
23	For assets shown a	above and place	ed in service duri	ng the current yea	ar, enter th	e				
	portion of the basis	s attributable to s	section 263A cos	sts			23			

Form 8879-EO	IRS <i>e-file</i> Signature Authorization for an Exempt Organization		OMB No. 1545-0047
	For calendar year 2020, or fiscal year beginning, and ending		
Department of the Treasury	Do not send to the IRS. Keep for your records.	ear 2020, or fiscal year beginning, and ending Do not send to the IRS. Keep for your records.	2020
Internal Revenue Service			
Name of exempt organization or pe			
FRIENDS OF WEISER Name and title of officer or persons Second Secon		82-049518	3
BARBARA MCGANN, T			
	eturn and Return Information (Whole Dollars Only)		
check the box on line 1a , 2 blank, then leave line 1b , 2 return, then enter -0- on th	2a, 3a, 4a, 5a, 6a, or 7a, below, and the amount on that line for the return being f 2b, 3b, 4b, 5b, 6b, or 7b, whichever is applicable, blank (do not enter -0-). But, if e applicable line below. Do not complete more than one line in Part I.	iled with this form w you entered -0- on	vas the
1a Form 990 check here			
2a Form 990-EZ check h			
3a Form 1120-POL check			
4a Form 990-PF check h			
5a Form 8868 check here			
6a Form 990-T check her			
7a Form 4720 check here			/b
		-	
(name of organization)			
		-	
•			
.,			•
		•	
•			
	-		
, ,			e
		•	
identification number (PIN)	as my signature for the electronic return and, if applicable, the consent to electron	ic funds withdrawal.	
PIN: check one box only			
X I authorize MCG	ERO firm name Enter five numbers	s, but	ure
state agency(ies) r			
As an officer or pe	rson subject to tax with respect to the organization. I will enter my PIN as my signa	ature on the tax year	2020
electronically filed	retum. If I have indicated within this return that a copy of the return is being filed w	rith a state agency(i	
Signature of officer or person subje	ct to tax 🕨 Dat	e ► 05-14-20)21
Part III Certificat	ion and Authentication		
ERO's EFIN/PIN. Enter yo	ur six-digit electronic filing identification		
number (EFIN) followed by	your five-digit self-selected PIN.		
		Do not	enter all zeros
I certify that the above num	eric entry is my PIN, which is my signature on the 2020 electronically filed ratum in	ndicated above. Low	onfirm
•	turn in accordance with the requirements of Pub. 4163 , Modernized e-File (MeF		
IRS <i>e-file</i> Providers for Bu		, mornauon ior Au	
ERO's signature Barb	ara J McGann CPA Dat	e ▶ <u>02-11-20</u>)22
	ERO Must Retain This Form - See Instructions		
	Do Not Submit This Form to the IRS Unless Requested	To Do So	
For Paperwork Reduction	Act Notice, see instructions.		Form 8879-EO (2020)

990	Overflow Statement		2020 Page 1
Name(s) as shown on return			FEIN
FRIENDS OF WE	ISER RIVER TRAIL INC		82-0495183
	OTHER PROGRAM SERVICES EXPEN		
			_ Amount
POSTAGE	AT TRAILHEADS		<u>\$ 458</u> 2,381
		Total:	2,381 \$ 2,839
	OTHER MANAGEMENT EXPENSES		
Description			Amount
ANNUAL MEETING	G EXPENSES		\$ 894
		Total:	\$894

	m is included in UBIA					Depre	ciation Deta							2020	
	ection 199A calculations						Program Servio							PAGE 1	
	"UBIA" in lower right corr (s) as shown on return	ner.					For your records	only				Social ser	urity number/El	N	
	FRIENDS OF WEISER RIV		10												
1	RIENDS OF WEISER RIV	/ER TRAIL IN		Basis	Business	Section	Dama	Depreciable				Prior	-0495183 Current	Accumulated	AMT
No.	Description	Date	Cost	Adjustment	percentage	179	Bonus depreciation	Basis	Life	Method	Rate	Depreciation	Depreciation	Depreciation	Current
1	LAND	07011998	12,000,000	2,000,000	100.00			0	0		0				
2	ENCLOSED TRAILER	09282012	3,750		100.00			3,750	5		0	3,750		3,750	
3	VERMEER CHIPPER	12222012	13,462		100.00			13,462	7		0	13,462		13,462	
4	WEED SPRAY EQUIP	07011998	2,308		100.00			2,308	7		0	2,308		2,308	
5	VIBRATORY ROLLER	09182002	9,000		100.00			9,000	7		0	9,000		9,000	
б	GIDEON GRADER	12152003	10,640		100.00			10,640	7		0	10,640		10,640	
7	1993 DODGE PU	10012007	4,685		100.00			4,685	5		0	4,685		4,685	
8	1986 FORD PU	08182010	6,000		100.00			6,000	5		0	5,172		5,172	
9	2008 FORD	04172019	18,223		100.00			18,223	5	200 DB HY	32	3,645	5,831	9,476	5,831
	Totals		12,068,068					68,068				52,662	5,831	58,493	5,831

			Ar's Depreciation V (Keep for your records)			202	0		
ame(s)	as ahown on retu	rn				Tax ID Number			
RIEN	IDS OF WE	ISER RIVER TRAIL INC				82-0	82-0495183		
orm	Multi-Form	Description	Date	Basis	Method	Life	Deduction		
RG	1	LAND	07-01-1998		NDA	0			
RG	1	ENCLOSED TRAILER	09-28-2012	3,750	м	5			
RG	1	VERMEER CHIPPER	12-22-2012	13,462	м	7			
RG	1	WEED SPRAY EQUIP	07-01-1998	2,308	M	7			
RG	1	VIBRATORY ROLLER	09-18-2002	9,000	M	7			
RG	1	GIDEON GRADER	12-15-2003	10,640	M	7			
RG	1	1993 DODGE PU	10-01-2007	4,685	M	5			
RG RG	1	1986 FORD PU 2008 FORD	08-18-2010 04-17-2019	6,000	M M	5 5	2 400		
RG	1	2008 FORD	04-17-2019	18,223	M	5	3,499		
		TOTAL					3,499		