Form 990

Return of Organization Exempt From Income Tax

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

► Do not enter social security numbers on this form as it may be made public. ► Information about Form 990 and its instructions is at www.irs.gov/form990. OMB No. 1545-0047 2014

Open to Public

Department of the Treasury Internal Revenue Service

Inspection For the 2014 calendar year, or tax year beginning 2014, and ending D Employer identification number Name of organization Woonasquatucket River Watershed Council Check if applicable 05-0519694 Address change Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite Telephone number Name change Initial return Sims Avenue (401) 861-9046 City or town, state or province, country, and ZIP or foreign postal code Final return/terminated 02909 **G** Gross receipts \$ 689,556. Amended return Providence H(a) Is this a group return for subordinates? X No F Name and address of principal officer: Yes Application pending H(b) Are all subordinates included? If 'No,' attach a list. (see instructions) RI 02909 Donald Burns 27 Sims Avenue Providence X 501(c)(3) (insert no.) 4947(a)(1) or 527 Tax-exempt status 501(c) (Website: ► www.woonasquatucket.org H(c) Group exemption number ▶ K Form of organization: X Corporation Other -L Year of formation: 2001 M State of legal domicile: RI Association Summary Part I Briefly describe the organization's mission or most significant activities: Restoration and preservation of Woonasqutucket River Activities & Governance if the organization discontinued its operations or disposed of more than 25% of its net assets. Number of voting members of the governing body (Part VI, line 1a) ... 3 Number of independent voting members of the governing body (Part VI, line 1b) 4 9 Total number of individuals employed in calendar year 2014 (Part V, line 2a) 5 32 6 33 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. **b** Net unrelated business taxable income from Form 990-T, line 34 0. **Prior Year Current Year** Contributions and grants (Part VIII, line 1h)...... 433,352 629,016. Revenue 6,380 14,182. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 75 163. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 45,431. 35,028 12 Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12) 474,835 688,792. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 13 14 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 353,783. 15 288,918 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 224,250. 17 109,818. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) . . . 398,736. 578,033. 76,099. 110,759. 19 **Beginning of Current Year End of Year** 232,539. 368,269. 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 130,649. 105,677 22 Net assets or fund balances. Subtract line 21 from line 20 126,862 237,620. Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Sign Here Executive Director Alicia Lehrer Type or print name and title. Print/Type preparer's name Date Check 10/22/15 self-employed P01228070 Michael Aaronson Paid Preparer AARONSON LAVOIE TFFLD DTA Use Only 05-0495839 Firm's address 1604 BROAD ST 223-0205 CRANSTON RI 02905-4130 Phone no. (401)Yes No

| BAA | TEEA0102 05/28/14 | Fo | rm 990 (2014) |
|-------------------|---|------------------------------|---------------------------------------|
| 4 e Total progr | ram service expenses • 473,944. | | |
| (Expenses | | \$ |) |
| | gram services. (Describe in Schedule O.) | _ | _ |
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| <u>and</u> ec | onomic asset of the State of Rhode Island | | |
| | quatucket River watershed as an environmental, recreation | nal, cultural | |
| | age, support, & promote the restoration and preservation | | |
| 4a (Code: | |) (Revenue \$ | 0.) |
| 4- (0 | \(\(\(\) \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ | \ | |
| and revent | as, i air, isi sasii program service reporteu. | | |
| Section 50 | 01(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations ue, if any, for each program service reported. | to others, the total expense | es, |
| 4 Describe th | he organization's program service accomplishments for each of its three largest program service | es, as measured by expen | ses. |
| | scribe these changes on Schedule O. | | LI |
| 3 Did the org | ganization cease conducting, or make significant changes in how it conducts, any program serv | ices? Yes | s X No |
| 4" | scribe these new services on Schedule O. | — | |
| | or 990-EZ? | Yes | S X No |
| | ganization undertake any significant program services during the year which were not listed on | the prior | |
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| ; | | | |
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| Restor | ation and preservation of Woonasqutucket River | | |
| · · | cribe the organization's mission: | | |
| | eck if Schedule O contains a response or note to any line in this Part III | | L |
| | atement of Program Service Accomplishments | | |
| | , and the first of the corporate of the | 05-0519694 | Page 2 |
| Form 990 (2014 | N Waanagaataalah Biran Maha 1 1 G | | |

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| | | | 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 | Х | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I | 3 | | Х |
| 4 | Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II | 4 | | Х |
| 5 | Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III | 5 | | Х |
| 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 | | Х |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III | 8 | | Х |
| 9 | Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV | 9 | | Х |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If 'Yes,' complete Schedule D, Part V</i> | 10 | | Х |
| 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. | 1445 (E.S.) | | |
| | a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI | 11 a | Х | |
| ŀ | 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? <i>If</i> 'Yes,' <i>complete Schedule D, Part VII</i> | 11 b | | X |
| 4 v | c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII | 11 c | | Х |
| 1 | d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX | 11 d | Х | |
| | e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X | 11 e | | 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 | 11 f | Х | |
| 12 | 2a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII | 12a | | Х |
| | 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 | 12 b | | Х |
| | Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E | 13 | | X |
| 14 | a Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | Х |
| | 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 | | Х |
| 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 | | Х |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV | 16 | | Х |
| 17 | Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions) | 17 | | Х |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II | 18 | Х | |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III. | 19 | | Х |
| 20 | a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H | 20 | | X |
| | b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20 b | | |

Form 990 (2014) Woonasquatucket River Watershed Council
Part IV Checklist of Required Schedules (continued)

| | | | Yes | No |
|---------|---|------------|-----|----|
| 21 | Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II | 21 | | Х |
| 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 | | X |
| 23 | Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i> | 23 | | Х |
| 24 | a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a | 240 | | X |
| 4 2 | b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | 24a 24b | | Λ |
| | c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease | | | |
| 4 | 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 | | |
| 25 E | a 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 | | X |
| OR. | 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, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes', complete Schedule L, Part II | 26 | | X |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III | 27 | | X |
| 28 | instructions for applicable filing thresholds, conditions, and exceptions): | | | |
| | a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV | 28a | | X |
| 7 | b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i> | 28b | | X |
| i i | c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV | 28c | | Х |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M | 29 | | 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 | | Х |
| 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 | | Χ |
| 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 | | Х |
| 35 | a Did the organization have a controlled entity within the meaning of section 512(b)(13)? | 35a | | X |
| | 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 | | Х |
| 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? <i>If 'Yes,' complete Schedule R, Part VI</i> | 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 | Х | |

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Form 990 (2014)

| | - | | Yes | No |
|---------|--|------------------------------------|--|------------------|
| 1: | a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1 a | | res | NO |
| | b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable | Hillings | and the second | 1000 |
| • | c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? | 1 c | in the second | |
| 2 | a 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 2 a | AST IN | edhagana Meli na | |
| ı | b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2 b | Х | |
| | Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) | FE4-25114-61 | 75 15 15 15 15 15 | |
| 3 : | a Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3 a | | Х |
| ı | b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O | 3 b | | |
| 4: | a 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)? | 4 a | | Х |
| × 1 | b If 'Yes,' enter the name of the foreign country: ► | Saladi | Billine | |
| er B | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts. (FBAR) | | | Stant |
| 5 : | a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5 a | | Х |
| 5 | b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5 b | | Х |
| • | c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T? | 5 c | | |
| 6 8 | a 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? | 6 a | | Х |
| ı | b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? | 6 b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | a o | Theorems | |
| i | a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and | | | Alternation |
| | services provided to the payor? | 7 a | | Х |
| | b If 'Yes,' did the organization notify the donor of the value of the goods or services provided? | 7 b | | |
| (| c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? | 7с | | X |
| (| d If 'Yes,' indicate the number of Forms 8282 filed during the year | | | 101440.5 |
| | e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7е | 88001.988 | Х |
| 1 | f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? | 7 f | | X |
| (| g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7 g | | |
| i I | If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a | | | |
| 8 | Form 1098-C? | 7 h | | |
| | organization have excess business holdings at any time during the year? | 8 | | |
| 9 | Sponsoring organizations maintaining donor advised funds. | , | | 33103611 |
| | a Did the sponsoring organization make any taxable distributions under section 4966? | 9 a | 41.00000.000 | C3.55.544 . 65 |
| | b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | 9 b | | |
| 10 | Section 501(c)(7) organizations. Enter: | | | |
| ā | a Initiation fees and capital contributions included on Part VIII, line 12 | | | |
| ı | b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 b | | 144134-19 | |
| 11 | Section 501(c)(12) organizations. Enter: | | | |
| ā | a Gross income from members or shareholders | | Minus) | |
| ł | b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | | | uniu. Princip |
| 12 a | a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12 a | | |
| . } | b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b | 1001-0-0 | i de de la composición dela composición de la composición de la composición de la composición dela composición dela composición dela composición de la composición de la composición dela composición de la composición dela composición del | 110000 |
| 13 | Section 501(c)(29) qualified nonprofit health insurance issuers. | i ning | | illine e |
| í | a Is the organization licensed to issue qualified health plans in more than one state? | 13 a | | |
| | Note. See the instructions for additional information the organization must report on Schedule O. | desida | 100000 | |
| ŀ | 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 | erene pe Stationes Stationes | | |
| | c Enter the amount of reserves on hand | | | 100,000 |
| 14 a | a Did the organization receive any payments for indoor tanning services during the tax year? | 14 a | | Х |
| 1 | b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O | 14 b | | |

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Section A. Governing Body and Management Yes No 1 a Enter the number of voting members of the governing body at the end of the tax year 1 a 9 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent 9 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 Χ Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Χ Did the organization make any significant changes to its governing documents Χ Did the organization become aware during the year of a significant diversion of the organization's assets? . . . 5 Χ Χ 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a Χ b Are any governance decisions of the organization reserved to (or subject to approval by) members, 7 b Χ Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Χ 8 a X 8 b Is there any officer, director, trustee, or key employee listed in Part VII. Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O Χ Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code Yes No 10 a Χ b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their 10 b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11 a Χ **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. Χ 12 a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise Χ 12 b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Χ 12 c X 13 X 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15 a Χ Χ 15 b If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16 a Χ 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 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ Rhode Island Section 6104 requires an organization to make its Forms 1023 (or 1024 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. Upon request Other (explain in Schedule O) Another's website Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records: 02909 Alicia Lehrer 27 Sims Avenue Providence (401) 861-9046

| Form 990 (2014) | Woonasquatucket | River Watershe | d Council | 05-0519694 | Page 7 |
|------------------------|--|----------------------|------------------|---------------------------------|--------|
| Part VII Com Inde | pensation of Officers pendent Contractors | , Directors, Trustee | s, Key Employees | , Highest Compensated Employees | , and |

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

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

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

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

| Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. | | | | | | | | | | | |
|--|---|--|-----------------------|--|--------------|------------------------------|--|--|--|----------------------------------|--------------------------------------|
| Fes | | | | (C) | | | | | | | |
| (A) Name and Title | (B) Average hours per | Position (do not check more than one box, unless person is both an officer and a director/trustee) | | is both an officer and a director/trustee) | | | is both an officer and a director/trustee) | | (D) Reportable compensation from | (E) Reportable compensation from | (F) Estimated amount of other |
| | week (list any hours for related organiza- tions below dotted line) | Individual trustee or director | Institutional trustee | Officer | Key employee | Highest compensated employee | the organization (W-2/1099-MISC) | related organizations (W-2/1099-MISC) | compensation from the organization and related organizations | | |
| | 2.00 | X | | Х | | | 0. | 0. | 0. | | |
| (2) Roy Najecki | _1.00 | Х | | Х | | | 0. | 0. | 0. | | |
| (3) Louis Lariviere Secretary | 1.00 | X | | Х | | | 0. | 0. | 0. | | |
| (4) Jonathan Ucran Treasurer | 2.00 | Х | | Х | | | 0. | 0. | 0. | | |
| (5) Ayana Bass Member | 1.00 | Х | | | | | 0. | 0. | 0. | | |
| (6) John Tabor Jacobson Member | 1.00 | Х | | | | | 0. | 0. | 0. | | |
| (7) Timothy O'Connor Member | 1.00 | Х | | | | | 0. | 0. | 0. | | |
| (8) Laureen Ratti Member | 1.00 | Х | | | | | 0. | 0. | 0. | | |
| (9) John Hake Member | 1.00 | Х | | | | | 0. | 0. | 0. | | |
| (10) Alicia Lehrer Executive Director | 40.00 | | | Х | | | 51,063. | 0. | 19,344. | | |
| (11) | | | | | | | | | , | | |
| (12) | | | | | | | | | | | |
| (13) | | | | | | | | | | | |
| (14) | | | | | | | | | | | |
| RAA | TEEAO | 107 | 02/27 | /1./ | <u></u> | <u> </u> | | I | Form 990 (2014) | | |

BAA

| Form 990 (2014) Woonasquatucket Riv Part VII Section A. Officers, Director | ver Watersh | ed Kov | Co En | unc | cil | 000 | | d Highaat Can | 05-051969 | 4 Page 8 |
|---|---|--------------------|----------------------|--------------------------------|-------------------|---------------------------------|-------------|--|---|--|
| art in Jocotton A. Omocio, Directo | ipensated Emp | loyees (continuea) | | | | | | | | |
| (A) Name and title | Average hours per week | box | . unle | Pos heck ss pe nd a c | rson i directo | than or s both or/truste | an ee) | (D) Reportable compensation from the organization | (E) Reportable compensation from | (F) Estimated amount of other |
| | (list any hours for related organiza - tions below dotted line) | or director | nstitutional trustee | Officer | Key employee | Highest compensated employee | Former | (W-2/1099-MISC) | related organizations (W-2/1099-MISC) | compensation from the organization and related organizations |
| (15) | | | | | | ĕ | | | | |
| <u>(16)</u> | | | | | | | | | | |
| (17) | | | | | | | | | | |
| (18) | | | | | | | | | | The second secon |
| (19) | | | | | | | | | | |
| <u>(20)</u> | | | | | | | | | | |
| (21) | | | | | | | | | | |
| (22) | | | | | | | | | | |
| (23) | | | | | | | | | | |
| (24) | | | | | | | | | | |
| (25) | | | | | | | | | | |
| c Total from continuation sheets to Part VI | I, Section A | | | | | ! | > | 51,063. | 0. | 19,344. |
| d Total (add lines 1b and 1c) | | | | | | | | 51,063. | 0. | |
| 2 Total number of individuals (including but no from the organization ► | or limited to those | iisted | | ove) | wno | rece | ived | more than \$100,0 | of reportable cor | Yes No |
| 3 Did the organization list any former officer, on line 1a? <i>If 'Yes,' complete Schedule J for</i> | | | | | | | | | | . 3 X |
| 4 For any individual listed on line 1a, is the su the organization and related organizations g such individual | reater than \$150, | 000? | If 'Y | 'es' (| com | olete | cor Sch | mpensation from nedule J for | | . 4 X |
| 5 Did any person listed on line 1a receive or a for services rendered to the organization? If | | | | | | | | | | . 5 X |
| Section B. Independent Contractors 1 Complete this table for your five highest concompensation from the organization. Report | | | | | | | | | | ear. |
| (A) Name and busines | | | | | | | | (B) Description o | | (C) Compensation |
| 87 | , | | | | | | | | | |
| 977 E ₄ * | | | | | | | | | | |
| 2 Total number of independent contractors (in \$100,000 of compensation from the organiz | • | nited | to th | nose | liste | ed abo | ove |) who received mo | re than | o digital Polit (1987) Pala (1966) Pala politica (1987) Pala (1987) |
| RAA | | TEEA | 0100 | 02/0 | 0/45 | | | | I de la companya de | Form 990 (2014) |

| | | Check if Schedule O contains a response or note to any lir | ne in this Part VIII. | | | |
|--|------|--|--|--|--|--|
| | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512-514 |
| ıts ıts | 1 a | Federated campaigns 1a | a de vida garan kacaman | the Control of the Co | | |
| Contributions, Gifts, Grants and Other Similar Amounts | b | Membership dues 1 b | | | | |
| | С | Fundraising events 1 c | | 7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | Property of the Control of the Contr | Compliance (All 1922), it constructs to the art of the construction of the constructio |
| ar / | d | Related organizations 1 d | | | | |
| s, C mil | е | Government grants (contributions) 1e 467,646. | Committee | | | |
| outions her Sir | f | All other contributions, gifts, grants, and similar amounts not included above 1f 161,370. | 1900 - Salar III. 1900 - Salar III. 1900 - Salar III. | | | |
| nt o | g | Noncash contributions included in lines 1a-1f: \$ | | | | |
| Col | h | Total. Add lines 1a-1f | 629,016. | | | |
| ue | | Business Code | | | | |
| .ve⊓ | 2 a | Canoe Rides 900099 | 8,214. | 8,214. | 0. | 0. |
| Program Service Revenue | b | | 5,968. | 5,968. | 0. | 0. |
| vice | С | | | | | |
| Ser | d | | | | | |
| an | е | | | | | |
| b | f | All other program service revenue | | | | |
| ď | g | Total. Add lines 2a-2f | 14,182. | | | |
| | 3 | Investment income (including dividends, interest and other similar amounts) | 163. | 0. | 0. | 163. |
| | 4 | Income from investment of tax-exempt bond proceeds $\mbox{.} \mbox{.}$ | | | | · |
| | 5 | Royalties | | | | |
| | | (i) Real (ii) Personal | | See all the properties of the prope | mig. The second of the second | arten antico de esta de la companya |
| | 6 a | Gross rents | | | | |
| | | Less: rental expenses | | | | |
| | C | Rental income or (loss) | System of the second | | | |
| | d | Net rental income or (loss) | | | | |
| | 7 a | Gross amount from sales of (i) Securities (ii) Other | | | | |
| | | assets other than inventory | | | | The state of the s |
| | b | Less: cost or other basis and sales expenses | | | | The second secon |
| | С | Gain or (loss) | a a la company de la compa | State of all surfaces to the party | Parket in the second of the se | State 15 1:40 #17 20 |
| | d | Net gain or (loss) | | | | |
| nue | 8 a | Gross income from fundraising events (not including \$ | | | April 200 (190 (1906)) (190 (1906)) (1906) (| |
| Other Revenu | | of contributions reported on line 1c). | | | $\begin{array}{cccccccccccccccccccccccccccccccccccc$ | |
| æ | | See Part IV, line 18 | | | | |
| Ē | b | Less: direct expenses b 764. | | | | |
| ₹ | С | Net income or (loss) from fundraising events ▶ | 45,431. | | 0. | 45,431. |
| | 9 a | Gross income from gaming activities. See Part IV, line 19 a | | | Charles and the second of the | |
| | | Less: direct expenses b | | | | |
| | С | Net income or (loss) from gaming activities ▶ | keen mineri või veet Triminine musik 1964 Andile. 11. Van 11. le | House it valent in the about Sur the feetale of colored | n Nedalode i Affikeitendiral ekkel niet fiodbeiteta | |
| | | Gross sales of inventory, less returns | | n de la companya de l | | |
| | IVa | and allowances a | September 1964 (1965) | | All Company of the Co | |
| | b | Less: cost of goods sold b | | The second secon | | and the second s |
| | _ c | Net income or (loss) from sales of inventory ▶ | | | Attacum resunt DSHP (epp. ACH 62 fi | and the second of the second o |
| | | Miscellaneous Revenue Business Code | | | | The state of the second section of the section of the second section of the |
| | 11 a | | | | | |
| | b | | | | | |
| | С | | | | | |
| | | All other revenue | | | | |
| | | Total. Add lines 11a-11d | | and the second s | | |
| | 12 | Total revenue. See instructions | 688,792. | 14,182. | 0. | 45,594. |

Part IX | Statement of Functional Expenses

| | not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|--------------|--|--------------------|--|--|----------------------------|
| 1 | Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 | | · | | |
| 2 | Grants and other assistance to domestic individuals. See Part IV, line 22 | | | | CONTROL STATEMENT |
| 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 | | | The desired of the second seco | HEROTER CONTROL OF CONTROL |
| 5 | Compensation of current officers, directors, trustees, and key employees | 70,407. | 35,320. | 15,474. | 19,613. |
| 6 | Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| <i>;</i> − 7 | Other salaries and wages | 228,800. | 194,771. | 26,045. | 7,984. |
| 8 | Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | ż | | | |
| 9 | Other employee benefits | 23,606. | 18,929. | 2,847. | 1,830. |
| 10 | Payroll taxes | 30,970. | 23,847. | 4,336. | 2,787. |
| 11 | Fees for services (non-employees): | | | | |
| | Management | | | | |
| | Legal | | | | |
| | Accounting | 4,240. | 0. | 4,240. | 0. |
| | Lobbying | | 11094/2019 - 1475 - 1475 | | |
| | Professional fundraising services. See Part IV, line 17 | | The Property Service Control of Control of | AND HOLD DESIGNATION OF COMPANY STORY | |
| 1.5 | Investment management fees Other. (If line 11g amt exceeds 10% of line 25, column | | | | |
| 9 | (A) amount, list line 11g expenses on Schedule O) | 106,705. | 106,705. | 0. | 0. |
| 12 | Advertising and promotion | 1,029. | 1,029. | 0. | 0. |
| 13 | Office expenses | 14,700. | 9,873. | 4,064. | 763. |
| 14 | Information technology | | | | |
| 15 | Royalties | | | 7. 11 | |
| 16 | Occupancy | 13,750. | 10,837. | 1,997. | 916. |
| 17 | Travel | 4,563. | 4,563. | 0. | 0. |
| 18 | Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 | Conferences, conventions, and meetings | 420. | 420. | 0. | 0. |
| 20 | Interest | 4,446. | 4,446. | 0. | 0. |
| 21 | Payments to affiliates | , | | *************************************** | |
| 22 | Depreciation, depletion, and amortization | 16,278. | 15,790. | 488. | 0. |
| 23 24 | Insurance | 7,368. | 6,190. | 1,178. | 0. |
| | covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| · a | Educational and program supplies | 40,802. | 40,802. | 0. | 0. |
| | Bad debts | 8,390. | 0. | 8,390. | 0. |
| | Miscellaneous | 422. | 422. | 0. | 0. |
| jn. C | General fundraising | 1,137. | 0. | 0. | 1,137. |
| | All other expenses | | | | |
| 25 | Total functional expenses. Add lines 1 through 24e | 578,033. | 473,944. | 69,059. | 35,030. |
| 26 | Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720) | | | | |

Part X Balance Sheet

| Piedge and grants receivable, net | | | Check if Schedule O contains a response or note to any line in this Part X | | | |
|--|--|------|--|---------------------------------------|--|--|
| 2 Savings and temporary cash investments 166,044. 3 233,56 | | | | (A) Beginning of year | | (B) End of year |
| 2 Savings and temporary cash investments 2 3 Piedges and grants receivable, net 166,044 3 233,56 4 Accounts receivable, net 166,044 3 233,56 4 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule 5 Saving and other receivables from other disqualified persons (as defined under section 4958[f](1)), persons described in section 4958[f](3) [6]), and contributing employers and sponsoring organizations of saction 501(c)] voluntary employees beneficiary organizations (see instructions). Complete Part II of Schedule 7 Notes and loans receivable, net 7 Temporary employees beneficiary organizations (see instructions). Complete Part II of Schedule 7 Notes and loans receivable, net 7 Temporary employees beneficiary organizations of saction 501(c)] voluntary employees beneficiary organization state of the saction 4958[f](3) [6] (6] (6] (6] (6] (6] (6] (6] (6] (6] (| | 1 | Cash – non-interest-bearing | . 34,139. | 1 | 76,727. |
| 4 Accounts receivable, net | | 2 | Savings and temporary cash investments | | 2 | |
| 4 Accounts receivable, net . | | 3 | Pledges and grants receivable, net | . 166,044. | 3 | 233,560. |
| trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | # The state of the | 4 | Accounts receivable, net | | 4 | |
| section 4958(n)(11), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L | | 5 | | | 5 | Programme Commencer |
| 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 8,095. 9 9,48 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10b 33,465. 21,448. 10c 48,49 11 Investments – publicly traded securities 11 12 12 13 14 11 17 13 14 11 17 14 15 15 15 16 16 16 16 16 | | 6 | section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' | | 6 | |
| 10 a Land, buildings, and equipment: cost or other basis. | 9 | 7 | Notes and loans receivable, net | | 7 | |
| 10 a Land, buildings, and equipment: cost or other basis. | set | 8 | Inventories for sale or use | | 8 | |
| 10 a Land, buildings, and equipment: cost or other basis. | As | 9 | Prepaid expenses and deferred charges | 8.095 | 9 | 9,484. |
| b Less: accumulated depreciation 10 b 33,465, 21,448 10 c 48,49 11 | | 10 a | Land, buildings, and equipment: cost or other basis. | | Andrew March | The state of the s |
| 11 Investments – publicly traded securities 11 12 | | b | | | 10 c | 48 498 |
| 12 Investments – other securities. See Part IV, line 11 13 Investments – program-related. See Part IV, line 11 13 14 Intangible assets 2,813, 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 232,539, 16 368,266 368,266 31,780, 17 54,466 368,266 31,780, 17 54,466 368,266 31,780, 17 54,466 31,466 31,466 31,466 31,466 31,466 31,466 31,46 | | | | | | 40,450. |
| 13 Investments – program-related. See Part IV, line 11 13 14 Intangible assets 2,813. 14 15 Other assets. See Part IV, line 11 15 15 Other assets. See Part IV, line 11 15 16 Total assets. See Part IV, line 11 15 232,539. 16 368,266 368,266 37 Accounts payable and accrued expenses 31,780. 17 54,466 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 73,897. 23 76,18 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 included on lines 17-24). Complete Part X of Schedule D 25 25 Total liabilities. Add lines 17 through 25 105,677. 26 130,64 27 105,936. 28 168,74 29 Permanently restricted net assets 29 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. | | | · · · | | | |
| 14 | | | | | | |
| 15 Other assets. See Part IV, line 11 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 232,539, 16 368,26 31,780, 17 54,46 18 19 Deferred revenue 18 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities. Add lines 17 through 25 105,677. 26 130,64 25 Total liabilities. Add lines 17 through 25. 105,677. 26 130,64 27 Complete Part X of Schedule D 27 Complete Part X of Schedule D 28 Total liabilities not included on lines 17-24). Complete Part X of Schedule D 25 Total liabilities not included on lines 17-24. Complete Part X of Schedule D 25 Total liabilities not included on lines 17-24. Complete Part X of Schedule D 26 130,64 27 105,936. 28 168,74 28 105,936. 28 168,74 29 29 20 20 20 20 20 20 | | | | | | |
| 16 Total assets. Add lines 1 through 15 (must equal line 34) 232,539. 16 368,26 17 Accounts payable and accrued expenses. 31,780. 17 54,466 18 Grants payable. 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities. 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. 22 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 26 Total liabilities. Add lines 17 through 25. 105, 677. 26 130, 64 27 Organizations that follow SFAS 117 (ASC 958), check here Amount of the particular of the particu | l | | - | 27020. | | |
| 17 Accounts payable and accrued expenses. 31,780. 17 54,466 18 Grants payable. 18 19 19 Deferred revenue 19 20 Tax-exempt bond liabilities. 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. 22 23 Secured mortgages and notes 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 25 105,677 26 130,64 27 Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. 28 Temporarily restricted net assets 20,926 27 68,87 29 Permanently restricted net assets 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here 29 20 Organizations that do not follow SFAS 117 (ASC 958), check here 29 21 Deferred revenue 19 20 Deferred revenue 19 21 Deferred revenue 19 22 Descriptions of customic payables to related third parties 73,897 23 23 Temporarily restricted net assets 20,926 27 24 Deferred revenue 22 25 Deferred revenue 22 26 Total liabilities Add lines 17 through 25 105,677 26 130,64 25 Deferred revenue 19 26 Total liabilities Add lines 17 through 25 27 Deferred revenue 19 28 Deferred revenue 19 29 Deferred revenue 19 20 Deferred revenue 19 21 Deferred revenue 19 21 Deferred revenue 19 22 Deferred revenue 19 23 Deferred revenue 19 24 Deferred revenue 19 25 Deferred revenue 19 26 Deferred revenue 19 27 Deferred revenue | | | | | | 260 260 |
| 18 Grants payable | _ | | | | | 54,462. |
| 19 Deferred revenue | | | | 0 = 7 1 0 0 1 | | 54,402. |
| Escrow or custodial account liability. Complete Part IV of Schedule D | | 19 | Deferred revenue | | | |
| Secured mortgages and notes payable to unrelated third parties | | 20 | Tax-exempt bond liabilities | | 20 | |
| Secured mortgages and notes payable to unrelated third parties | S | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| Secured mortgages and notes payable to unrelated third parties | abiliti | 22 | Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. | | 22 | |
| Unsecured notes and loans payable to unrelated third parties 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 Total liabilities. Add lines 17 through 25 | _ | 23 | | | | 76 197 |
| 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 | | | | 10703. | | 70,107. |
| Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets | | | Other liabilities (including federal income tax, payables to related third parties, | | | |
| Organizations that follow SFAS 117 (ASC 958), check here X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets | | 26 | Total liabilities. Add lines 17 through 25 | . 105,677. | 26 | 130,649. |
| The property of the property | ses | | Organizations that follow SFAS 117 (ASC 958), check here ► X and complete | | | |
| 28 Temporarily restricted net assets | Ĕ | 27 | Unrestricted net assets | 20,926. | 27 | 68,875. |
| 29 Permanently restricted net assets | Sale | 28 | Temporarily restricted net assets | | 28 | 168,745. |
| Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. Capital stock or trust principal, or current funds | B | 29 | Permanently restricted net assets | | 29 | |
| 30 Capital stock or trust principal, or current funds | r Fun | | | | | |
| Paid-in or capital surplus, or land, building, or equipment fund | Ø | 30 | Capital stock or trust principal, or current funds | · · · · · · · · · · · · · · · · · · · | 30 | |
| 32 Retained earnings, endowment, accumulated income, or other funds | 8 | 31 | Paid-in or capital surplus, or land, building, or equipment fund | • | 31 | |
| | As | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| 33 Total net assets or fund balances | et | | | | 33 | 237,620. |
| 34 Total liabilities and net assets/fund balances | Z | | | | + | 368,269. |

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Form **990** (2014)

| or | rm 990 (2014) Woonasquatucket River Watershed Council 05- | 0519694 | | Pa | ge 1 2 |
|---------------------|--|---------|-------------------------|--------------|---------------|
| Pa | art XI Reconciliation of Net Assets | | | | |
| No. | Check if Schedule O contains a response or note to any line in this Part XI | | | | . [|
| े 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 6 | 88,7 | 92. |
| ₹ 2 | 2 Total expenses (must equal Part IX, column (A), line 25) | 2 | | 78,0 | |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | | 10,7 | |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | | 26,8 | |
| 5 | Net unrealized gains (losses) on investments | 5 | | | |
| 6 | 5 Donated services and use of facilities | 6 | | | |
| 7 | | 7 | | | |
| 8 | Prior period adjustments | 8 | | | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | | | |
| 10 | | | | | |
| | column (B)) | 10 | 2 | 37,6 | 21. |
| Pa | art XII Financial Statements and Reporting | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XII | | | | . [|
| | | | | Yes | No |
| 1 | Accounting method used to prepare the Form 990: Cash X Accrual Other | | | | |
| | If the organization changed its method of accounting from a prior year or checked 'Other,' explain | | (1)(1)(4) | (Althorita) | History |
| 2 | in Schedule O. | | | | erener |
| . 2 | a Were the organization's financial statements compiled or reviewed by an independent accountant? | | 2 a | Х | |
| ارچه دندن دود | If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a | | ete lettere | ritti kirili | 11.11.52 |
| AP. | s <u>ep</u> arate basis, consolidate <u>d b</u> asis, or both: | | 1717/01/12 | | 110000 |
| il. | X Separate basis | | | | |
| | b Were the organization's financial statements audited by an independent accountant? | | 2 b | | X |
| | If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate | | 100000 | 48931 | 11111111 |
| | basis, consolidated basis, or both: | | 0191298935 14666-811 | | |
| | Separate basis Donsolidated basis Both consolidated and separate basis | | 1120711421 | tiveper. | |
| | c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audreview, or compilation of its financial statements and selection of an independent accountant? | it, | 2 c | Χ | |
| | If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | | Marin Trans | | |
| 3 | Ba 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? | | 3 a | | Х |
| | ь If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required au | udit | | | |
| | or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | 3 b | | |
| ВА | | | Form | 990 (2 | 2014 |

TEEA0112 05/28/14