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)

OMB No. 1545-0047 2018

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A	For the	e 2018 calendar year, or tax year beginning 01/01 , 2018, and e	nding	12	/31	, 20 18
В	Check i	f applicable: C Name of organization Riverfront Recapture Inc			D Employ	yer identification number
	Address	s change Doing business as				06-1045653
	Name c	hange Number and street (or P.O. box if mall is not delivered to street address) Roo	m/suite		E Telepho	one number
	Initial re	turn 50 Columbus Boulevard 1st Floor				860-713-3131
	Final retu	urn/terminated City or town, state or province, country, and ZIP or foreign postal code				
	Amende	ed return Hartford, CT, 06106		1	G Gross r	eceipts \$ 3,442,113
	Applicat	tion pending F Name and address of principal officer: Michael Zaleski		H(a) Is this a or		subordinates? ☐ Yes ☑ No
	• •	50 Columbus Boulevard, Hartford, CT 06106				es included? Yes No
_	Tax-exe	mpt status:				ee instructions)
J	Website	· · · · · · · · · · · · · · · · · · ·		H(c) Group	exemntlor	number >
K	Form of	organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ► L Year of to				of legal domicite: CT
	art l	Summary		1001		J. J
	1	Briefly describe the organization's mission or most significant activities: Ri	verfron	t Recantu	re is resi	onsible for managing
é		the riverfront park system that spans Hartford and East Hartford. This includes				
ä		(Continued on Schedule O, Statement 1)	3040101	Idilodons		veropinent of the
E	2	Check this box ▶☐ if the organization discontinued its operations or dispos	ed of n	nore than	25% of	ite net accete
Š	3	Number of voting members of the governing body (Part VI, line 1a)			3	42
å	4	Number of independent voting members of the governing body (Part VI, line			4	41
<u>8</u>	5	Total number of individuals employed in calendar year 2018 (Part V, line 2a)	,		5	91
Ì	1	Total number of volunteers (estimate if necessary)			6	
Activities & Governance		Total unrelated business revenue from Part VIII, column (C), line 12	• • •		7a	1,864
-		Net unrelated business taxable income from Form 990-T, line 38	• •		7b	-10,456
		The amounted business takens moonle from 1 of 1, mile of 1, in a	i	Prior Yea		Current Year
	8	Contributions and grants (Part VIII, line 1h)	-			
one	1	Program service revenue (Part VIII, line 2g)	<u> </u>		351,333	2,515,248
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)			655,011	692,245
Я		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			263,603	83,434
		Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)			86,997	82,843
-				3,	356,944	3,373,770
		Benefits paid to or for members (Part IX, column (A), lines 1–3)			0	0
,,		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)			0	4 700 445
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		1,1	613,550	1,703,445
ĕ		T 4 2 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0.4640		0	0
<u>N</u>		Other expenses (Part IX, column (D), line 25) ► 332,910				
		Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	-		474,653	1,663,972
		Revenue less expenses. Subtract line 18 from line 12			088,203	3,367,417
- 8		rievende less expenses, oubtract line to from line 12	Banir	ning of Curi	268,741	6,353 End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Doğu			
S S	21	Total liabilities (Part X, line 26)			182,128	3,240,767
돌	22	Net assets or fund balances. Subtract line 21 from line 20	-		157,533	208,181
	rt li	Signature Block		3,3	324,595	3,032,586
		ties of perjury, I declare that I have examined this return, Including accompanying schedules and st	atomont	o and to the	hoot of m	ny knowledge, and heliaf It is
true	, correct,	and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has	any knowled	ige,	ly knowledge and beken, it is
		I Marie D.		<u> </u>	5/10/	· a
Sigi	n I	Signature of officer		Date	1101	7
Her		Michael Zaleski, President & CEO				
		Type or print name and title				
n.,		Print/Type preparer's name Preparer's signature	Date			n PTIN
Pai					Check L self-empl	_ if
	parer			F2		0,00
JS	e Only	/ Firm's name ►			EIN ►	
May	the IP	S discuss this return with the preparer shown above? (see instructions)		Phone	110,	Yes No
				• • •		· · [] 169 [] 110

Form	990 (2018)
	t 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:
	Riverfront Recapture's mission is to connect people with the Connecticut Piver. This is accomplished through its most feet and the connecticut Piver.
	public access to the Connecticut River and recognizing its potential to improve the quality of life for the region by increasing
	recreational and economic opportunities.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior rount and or savezy
^	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
	DV- DA
4	res, 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
	The second of th
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$ 488 424 including grants of \$
→a	
	A TOTAL AND LUCIUS OF RECEDENCE OHERS TAMINIFICATION OF IN The north rest in the nor
	performances and resultats to Sporting events, Rivertront Recapture produces many events such as Fireworks, the Drogen Base
	and Asian restroit and numerous small concerts and arts events. Riverfront also collaborates with other organizations to an artistic property and artistic property artistic property artistic property and artistic property artistic property and artistic property artistic
	diverse scriedule of events such as the faste of the Caribbean, which is a festival of food, music and dance. A new ground last
	the transfer resultar was a day-long celebration of local musicians. All of these events are free to attend and in 2019
	these activities attracted over 50,000 visitors to the Riverfront.
	A
4b	(Code:) (Expenses \$: 910 340 including grants of the second
	(Code:) (Expenses \$ · 910,340 including grants of \$ 0) (Revenue \$ 590,957) RECREATION AND OUTDOOR ADVENTURES: These activities are selected as a contract of the contract
	RECREATION AND OUTDOOR ADVENTURES: These activities range from structured programs such as the Community Rowing program to more passive activities like walks. The parks, on both banks of the Connecticut River in Harford and East Hartford, and
	the river, provide venues for a variety of land and water regression. The Occupant is D. J. Commercial River in Harford and East Hartford, and
	the river, provide venues for a variety of land and water recreation. The Community Rowing program serves adults and students from "learn to row" to Masters experience levels. The season culminates in the annual Head of the Riverfront Regatta which
	attracted 2,900 participants plus 6,000 spectators in 2018, placing it in the top ten one-day regattas in the U.S. Riverside Park is
	home base for the Riverfront Adventure program which includes a record one-day regattas in the U.S. Riverside Park is
	home base for the Riverfront Adventure program which includes a ropes course and dragon boating. A majority of the participants
	are youth groups, but companies also come out for team-building experiences. Riverfront encourages general use of the parks for
	picknicking, running, walking, bird watching, and bicycling, etc. and is available for charity walks and 5K runs. The athletic fields'
	uses include softball, cricket, volleyball and Pop Warner football. Public boating is possible from three boat launches. Riverfront
	partners with a number of schools and groups for all of our programs. Programs generally involve participant fees, but many youth
	programs are either free to participants or subsidized from grants. All of these activities, combined with daily park usage attracted 698,000 people in 2018.
4c	(Code: \/Expansion \$ + 500 and in the first
	PARK MANAGEMENT AND DEVELOPMENT: Projects are underwards of \$ 0) (Revenue \$ 9,523)
	PARK MANAGEMENT AND DEVELOPMENT: Projects are underway to expand the park system north of the Boathouse to
-	connect to the Windsor riverwalk. Funding was secured in 2017 for the extension of the riverwalk north of the Boathouse. The City
•	of Hartford will manage the project and has identified the firm to provide design and permitting. Construction of this extension is
-	expected to be completed in 2020. This new stretch of riverwalk will end at the boundary of private land at the Hartford/Windsor
-	line. Riverfront is in the process of purchasing this property after completing environmental testing and assembling funding in 2018.
	The new property will allow for the uninterrupted connection of riverwalk from Charter Oak Landing in Hartford to the table to
-	reversion and beyond. The large 80 acre parcel will also provide opportunities for many other activities that will make this leastless
-	a key add action of the rivertronic beginning in 2017, Rivertronic Reconfure took over the responsibility for park maintained a
_	are increasing the current 149 personal transfer of transfer of the current 149 personal transfer of
_	2010, 1,004 volunteers worked on various projects to clean up and beautify the parks as well as assist with some of the events
_	(Continued on Schedule O, Statement 2)
ld (Other program services (Describe in Sahadul- O.)
	Other program services (Describe in Schedule O.) Expenses \$ 0 including grants of \$ 0 \(\text{Peyonus \$}\)
	otal program position and the state of the s
	otal program service expenses 2,929,370

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1.	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	V	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	-	✓
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		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	✓	Singapore Contra Species of the
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	1	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	✓	
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		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13 14a		1
14a	Did the organization maintain an office, employees, or agents outside of the United States?	144		Ψ
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		✓
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	4.77	✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	✓	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		✓
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		√

Part	V Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		✓
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
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		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		✓
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		√
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		✓
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		✓
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<u> </u>	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30 31	<u></u>	1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		✓
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		✓
34	Was the organization related to any tax-exempt or taxable entity? <i>If</i> "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34 35a		1
35a	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a	SSA		
b	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		
36	related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	37		✓
38 Doub	19? Note. All Form 990 filers are required to complete Schedule O.	38	✓	
Part	Check if Schedule O contains a response or note to any line in this Part V			
	Officer if Confedence Confedence a cooperate of free to any ment and tark to the confedence of the con		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 72			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	√ ₁990	(2010)
		LOUG		(CV 10)

Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax 2a 91 Statements, filed for the calendar year ending with or within the year covered by this return 2a 91 Statements, filed for the calendar year ending with or within the year covered by this return 2a 91 Note. If the sum of lines 1 a and 2 a is greater than 250, you may be required to e-file (see instructions) 3a 7 Shote. If the sum of lines 1 a and 2 a is greater than 250, you may be required to e-file (see instructions) 3a 7 Shote. If the sum of lines 1 a and 2 a is greater than 250, you may be required to e-file (see instructions) 3a 7 Shote. If the sum of lines 1 a and 2 a is greater than 250, you may be required to e-file (see instructions) 3a 7 Shote. If the sum of lines 1 a and 2 is greater than 250, you may be required to e-file (see instructions) 3a 7 Shote. If the sum of lines 1 a and 2 is greater than 250, you may be required to e-file (see instructions) 3a 7 Shote. If the sum of lines 1 and 2 is greater than 250, you may be required to e-file (see instructions) 3a 7 Shote. If the sum of lines 1 and 2 is greater than 250, you may be required to e-file (see instructions) 3a 7 Shote. If the sum of lines 1 and 2 is greater than 250, you may be required to e-file (see instructions) 3a 7 Shote. If the sum of the sum o	Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			···
Statements, filed for the calendar year ending with or within the year covered by this return 2a 91 b fl at least one is reported on line 2a, did the organization file all required federal employment tux roturns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3a 7 b fl *Yes*, has it filed a Form 990-T for this year? If *No* to line 3b, provide an explanation in Schedule O. b fl *Yes*, has it filed a Form 990-T for this year? If *No* to line 3b, provide an explanation in Schedule O. b fl *Yes*, the sit filed a Form 990-T for this year? If *No* to line 3b, provide an explanation in Schedule O. b fl *Yes*, the sit filed a Form 990-T for this year? If *No* to line 3b, provide an explanation in Schedule O. b fl *Yes*, the sit filed a Form 990-T for this year? If *No* to line 3b, provide an explanation in Schedule O. b fl *Yes*, the sit filed a Form 990-T for this year? If *No* to line 3b, provide an explanation in Schedule O. c fl *Yes*, the sit filed a Form 990-T for this year? If *No* to line 3b, provide an explanation in Schedule O. c fl *Yes*, the sit filed a Form 990-T for this year? If *No* to line 3b, provide an explanation in Schedule O. c fl *Yes*, the sit filed a form 990-T for this year? If *No* to line 3b, provide an explanation for the to such contributions or gifts were not tax deaducifile? C fl *Yes* to line 3e or 5b, did the organization include with explanation and services provided on the payer? C fl *Yes* to line 3e or 5b, did the organization necessor \$75 made partly as a contribution and partly for goods and services provided to the payer? C fl *Yes*, indicate the organization necessor \$75 made partly as a contribution and partly for goods and services provided to the payer? If fl *Yes*, indicate the number of Forms 2282 filed during the year fl *Zel fl			r. v. v.	Yes	No
b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater then 250, your may be required to e-file See instructions) 1 if "Yes," has it filed a Form 980-T for this year? If "No" is line 3b, provide an explanation in Schedule O. 1 if "Yes," has it filed a Form 980-T for this year? If "No" is line 3b, provide an explanation in Schedule O. 1 if "Yes," has it filed a Form 980-T for this year? If "No" is line 3b, provide an explanation in Schedule O. 1 if "Yes," this it filed a Form 980-T for this year? If "No" is line 3b, provide an explanation in Schedule O. 1 if "Yes," this it filed a Form 980-T for this year? 2 if If yes, if the search of the foreign country is line or some of the foreign country. 2 if Yes, if the organization search of FinciSN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 3 if Yes, if the ine 5a of 5b, did the organization that it was or is a party to a prohibited tax sholter transaction at your few during the tax year? 2 if Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 3 if Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 4 organizations that may recolve deductible contributions under section 170(e). 5 if Yes," did the organization network a payment in excess of 376 made party as a contribution and party for goods and services provided to the payor? 5 if Yes," did the organization network of the year leaves the section 1802 of the goods or services provided? 6 if Yes," did the organization network of the year leaves the section 1802 of the year leaves the year lea	2a			1012 1012	
Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions) 3		Statements, filed for the calendar year ending with or within the year covered by this return 2 91	O.L.		
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? b if "Yes," has it filled a Form 980-T for this year? if "Ne" or lim \$20, provide an explanation in Schedule O. the At any time during the celendar 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 eccount, or other financial account)? b if "Yes," enter the name of the foreign country: ▶ 5a Was the organization a party to a prohibited tax shelet rensaction at any time during the tax year? b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelet transaction? 6b 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 deductibile as haritable contributions? c if "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). b if "Yes," did the organization notify the donor of the value of the goods or services provided ? 7 Organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? b if "Yes," did the organization notify the donor of the value of the goods or services provided? 7 Organization receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided in the payor? 7 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7 If "Yes," did the organization notify the donor of the value of the goods or services provided? 7 If "Yes," did the organization receive any funds, directly or indirectly, on a personal benefit contract? 9 If the organization received a contribution of qualified intellectual propert, did the organization file Form 8	b		20		
b If "Yes," has it field a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O. At any time during the calendary year, dist hor organization have an interest in, or a signature or other authority of the authority of the provide an explanation in a signature or other authority of the authority of the provide and provide an explanation of the authority of the provide and provide an explanation and provide an explanation at any time during the tax year? 5a Was the organization a party to a prohibited tax shelfer transaction at any time during the tax year? 5b Was the organization ap party to a prohibited tax shelfer transaction at any time during the tax year? 5c Was the organization ap active to a prohibited tax shelfer transaction at any time during the tax year? 5c Was the organization approximation file Form 8886-17? 6c Did the organization solid the organization file Form 8886-17? 7c Organization solid any contributions that work not tax deductible as charitable contributions? 8c If "Yes" to line 5a or 5b, did the organization include with every soliditation an express statement that such contributions or gilts were not tax deductible? 9c Did the organization self the organization notify the donor of the value of the goods or services provided? 9c Did the organization self, exchange, or otherwisks dispose of tangible personal property for which it was required to life Form 8282? 9c Did the organization self, exchange, or otherwisks dispose of tangible personal property for which it was required to life Form 8282? 9c Did the organization neceive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9c Did the organization which are such as a contribution of qualified intellectual property, did the organization file Form 899 as required? 9c Did the organization received a contribution of qualified intellectual property, did the organization file Form 899 as required? 9c Did the organization which are such self-partitions and partitions a			30	(Biomosic	4,45,25
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Form 9	90 (2018)				Page u
Part					
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes i				
	Check if Schedule O contains a response or note to any line in this Part VI		<u> </u>	•	. 🗸
Sect	ion A. Governing Body and Management			Yes	No
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1a		1a 42			
	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		1b 41			
2	Did any officer, director, trustee, or key employee have a family relationship or a business rel	lationship with			
_	any other officer, director, trustee, or key employee?		2		✓
3	Did the organization delegate control over management duties customarily performed by or ur	nder the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other		3		√
4	Did the organization make any significant changes to its governing documents since the prior Form 990		4		√
5	Did the organization become aware during the year of a significant diversion of the organization	rs assets?.	5 6		√
6	Did the organization have members or stockholders?				V
7a	Did the organization have members, stockholders, or other persons who had the power to element one or more members of the governing body?		7a		1
b	Are any governance decisions of the organization reserved to (or subject to approval		76		,
_	stockholders, or persons other than the governing body?		7b		
8	Did the organization contemporaneously document the meetings held or written actions under the year by the following:	artaken during			
а	The governing body?		8a	1	111000000
b	Each committee with authority to act on behalf of the governing body?		8b	1	
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot	be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.		9		/
Secti	on B. Policies (This Section B requests information about policies not required by the	Internal Reven	<u>ue C</u>		
			40-	Yes	No /
10a	Did the organization have local chapters, branches, or affiliates?		10a		V
b	If "Yes," did the organization have written policies and procedures governing the activities of saffiliates, and branches to ensure their operations are consistent with the organization's exempt	t purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	filing the form?	11a	<u> </u>	entage.
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		40-		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a 12b	√	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give in		120	· ·	
С	Did the organization regularly and consistently monitor and enforce compliance with the podescribe in Schedule O how this was done	iicy i i res,	12c	1	
13	Did the organization have a written whistleblower policy?		13	V	
14	Did the organization have a written document retention and destruction policy?		14	1	
15	Did the process for determining compensation of the following persons include a review and	d approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	and decision?			
а	The organization's CEO, Executive Director, or top management official		15a	✓	
þ	Other officers or key employees of the organization		15b		/
	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 with a taxable entity during the year?		16a		✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to participation in joint venture arrangements under applicable federal tax law, and take steps to	o evaluate its safeguard the			
	organization's exempt status with respect to such arrangements?		16b		
Secti	on C. Disclosure	***			
17	List the states with which a copy of this Form 990 is required to be filed ► CT				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable),	990, and 990-T	(Sec	tion 5	01(c)
	(3)s only) available for public inspection. Indicate how you made these available. Check all that a Own website Another's website Upon request Other (explain in Sche	dule 0)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing document financial statements available to the public during the tax year.				, and
20	State the name, address, and telephone number of the person who possesses the organization	's books and red	ords	>	
	Riverfront Recapture Inc, (860)713-3131				

Form 990 (2018)

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

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

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

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 relate	d org	aniz	zatic	on c	ompe	ensa	ated any currer	nt officer, directo	r, or trustee.
				(4	C)					
(A)	(B)	١,,			ition			(D)	(E)	(F)
Name and Title	Average					than o		Reportable	Reportable	Estimated
•	hours per					or/trust		compensation from	compensation from related	amount of other
	week (list any hours for	유문	Ing	읓	₹ e	en H	질	the	organizations	compensation
	related	Individual trustee or director	Institutional trustee	Officer	Key employee	Ploy	Former	organization	(W-2/1099-MISC)	from the organization
	organizations below dotted	호류	ona		plo	98		(W-2/1099-MISC)		and related
	line)	R	ŧ		ee	npe				organizations
		8	stee			Highest compensated employee				
the latest two constitutions are the constitutions and the constitutions are the constitution are the constituti			L"		_	8	ļ			
Robert Annon	1.50									
Board Member, Executive Committee	0.00	1						0	0	0
Harold Blinderman	1,50			Г	 -					
Board Member, Executive Committee	0.00	1						0	0	0
Christopher Byrd	0.50									
Board Member	0.00	1						0	o	0
Patrick Caulfield	1.50									1111
Board Member, Executive Committee	0.00	✓						0	0	0
Ranjana Chawla	0.50									
Board Member	0.00	✓					<u>L.</u> .	0	0	0
Peter Christian	1.50									
Board Member, Executive Committee	0.00	✓						0	0	0
Susan Clemow	0.50									
Board Member	0.00	✓					<u> </u>	0	0	0
Thomas Cody	1,50	_								
Board Member, Executive Committee	0.00	✓						0	0	0
Frank Collins	0.50								_	
Board Member	0.00	✓	_				<u> </u>	0	. 0	0
Julio Concepcion	0.50	,						•		
Board Member	0.00	✓					-	0	0	0
Eric Cushman	0.50	,							o	0
Board Member	0.00	✓			-			0	U	U
John Henry Decker	0.50	/							o	0
Board Member	0.00				-			. 0	U	<u>.</u>
Kurtis Denison	0.50	1						0	o	0
Board Member	0.00	*	\vdash	\vdash					0	<u>V</u>
Susan Freedman	0.50	1						0	o	0
Board Member	υ.υυ	`	لـــا	ш			لـــــا	υ.	U	- 000

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

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				-	C)					
(A)	(B)	(do n	Position (do not check more than one					(D)	(E)	(F)
Name and Title	Average	box,	unles	s pe	rson	is both	an	Reportable	Reportable	Estimated
	hours per week (list any		_		irect	or/trusi		compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	inst	Officer	₩.	en High	Former	the	organizations	compensation
	related organizations	ling vi	鼋	ह	Key employee	oy est	∄	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	below dotted	호텔	na na		믕	8 8		(W-2/1099-WIGO)		and related
	line)	rust	12		ee ee	npe				organizations
		8	Institutional trustee			Highest compensated employee				
				_		8				<u> </u>
Joan Gentile	0.50									
Board Member	0.00	✓						0	0	0
Donald Gershman	0.50									*******
Board Member	0.00	1						0	0	0
Barry Lastra	0.50									
Board Member	0.00	✓						0	0	0
Kathleen Lilley	0.50									
Board Member	0.00	✓						0	0	0
Christopher Montross	1.50									
Board Member, Executive Committee	0.00	✓						0	0	0
Marjorie Morrissey	0.50									
Board Member	0.00	✓						0	0	0
Thomas Mullaney	0.50									
Board Member	0.00	✓						0	0	0
Kenneth Pouch	0.50									
Board Member	0.00	✓					_	0	0	0
Kenneth Provencher	0.50					i				
Board Member	0.00	✓						0	0	0
Michael Puckly	1.50			İ						
Board Member, Executive Committee	0.00	✓						0	0	0
John Riege	0.50	ĺ				.				
Board Member	0,00	✓		_				0	0	0
Christina Ripple	1.50									
Board Member, Executive Committee	0.00	✓						0	0	0
Christopher Rowlins	0.50			1						
Board Member	0.00	<u> </u>						0	0	0
Camille Simpson	0.50				1					
Board Member	0.00	✓						0	0	0

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

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					C)					
(A)	(B)	(do n	nt ch	Position t check more than one			one	(D)	(E)	(F)
Name and Title	Average	box,	unles	s person is both an		n an	Reportable	Reportable	Estimated	
	hours per week (list any		er and		lirect	or/trus		compensation from	compensation from related	amount of other
	hours for	Individual trustee or director	īg	Officer	<u>3</u>	활동	Former	the	organizations	compensation
	related	# X	貫	E.	err	of Res	T eg	organization	(W-2/1099-MISC)	from the organization
	organizations below dotted	호호	3		Key employee	88		(W-2/1099-MISC)		and related
	line)	TS.	5		vee	npe				organizations
		8	Institutional trustee			Highest compensated employee				
			"		_	ē.				Attale=7-5-Tape=
Joyce Smith	0.50									
Board Member	0.00	1						0	0	0
Josye Utick	0.50	•	\vdash							
Board Member	0.00	1						o	0	0
Sandra Fry	1.50	-					_			<u> </u>
ex-officio Board Member, Executive Committee	0.00	1						o	o	0
Scott Jellison	1.50						\vdash			
ex-officio Board Member, Executive Committee	0.00	1						o	0	0
Marcia Leclerc	1,50						\vdash	-		
ex-officio Board Member, Executive Committee	0.00	1						0	n	0
Pasquale Salemi	1.50	<u> </u>								
ex-officio Board Member, Executive Committee	0,00	1		i				0	0	0
Donald Trinks	0.50	•				-		Ů	<u> </u>	
ex-officio Board Member	0.00	1					٠.	0	0	0
Marc Weinberg	0.50									
ex-officio Board Member	0.00	1						0	0	0
Lyle Wray	1.50									- u 44 940 W
ex-officio Board Member, Executive Committee	0.00	1						o	0	0
Roy Collins	2.00		Ħ						_	
Vice Chair	0,00	/		✓				o	0	0
Margaret Gregg	4,00									
Secretary	0.00	1		1				2,650	0	0
David Jenkins	3.00		\Box							
Chairman	0.00	✓		✓				o	. 0	0
David Klein	2,00									
Treasurer	0.00	✓	İ	1				0	0	0
Michael Zaleski	37.50			\neg	\neg					
President & CEO	0.00	1		1	İ			133,149	0	2,490

Part VII Section A. Officers, Directors, Trus	tees, Key E	mplo	yees	s, aı	nd F	lighe	st C	compensated E	mployees (contin	ued)
				•	C)						
(A)	· (B)		امتد		ition	a than .	 .	(D)	(E)		(F)
Name and title	Average					than (is both		Reportable	Reportab		Estimated
	hours per					or/trus		compensation from	compensation related	n from	amount of other
	week (list any hours for	일종	St.	읔	6	35	귷	the	organizatio	ons	compensation
	related	Individual trustee or director	랿	Officer	Key employee	Ples	Former	organization	(W-2/1099-N	AISC)	from the
•	organizations below dotted	호호	iona		ğ	88		(W-2/1099-MISC)			organization and related
	line)	25	3		yee	n pe					organizations
		8	nstitutional trustee			Highest compensated employee					
			w			8	<u> </u>				
Peter Morse	37,50										
Finance Director	0.00	<u> </u>		✓				93,483		0	21,853
Marc Nicol	37.50					,					
Director of Park Planning & Development	0.00					✓		117,458		0	22,767
	.				_						- · · · · · · · · · · · · · · · · · · ·
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1b Sub-total						•		346,740		0	47,110
 Total from continuation sheets to Part 	•										
d Total (add lines 1b and 1c)			•	•	• •	•	<u> </u>	346,740		0	47,110
2 Total number of individuals (including bu		l to th	ose	list	ed a	above	e) W		ore than \$10	00,00	O of
reportable compensation from the organ	ization >							2			Vac. No.
		_									Yes No
3 Did the organization list any former of							emp	oloyee, or nigh	est compe	nsate	3 4
employee on line 1a? If "Yes," complete											
4 For any individual listed on line 1a, is the	sum of rep	oortal	ole d	com	per	isatio	n a	nd other comp	ensation fro	om th	e
organization and related organizations individual		an ֆi	5U,	UUU	11	70	S,	complete scri	equie 3 10.	Suci	' 4 V
		· ·	neat	ion	fror	n anu	 un	related organiz	ation or ind	 Iividus	20000000000000000000000000000000000000
5 Did any person listed on line 1a receive of for services rendered to the organization	? If "Yes " c	nnpei	ete :	Sch	noi redi.	ile J f	ors	such person			" 5 /
Section B. Independent Contractors	. 11 100, 0	0777,011									
Complete this table for your five highest	compensate	ed inc	iene	and	ent	contr	acto	ors that receive	d more tha	n \$10	0.000 of
compensation from the organization. Rep	oort compe	nsatio	n fo	or th	ie c	alend	ar y	ear ending wit	h or within t	the or	ganization's tax
year.	•										
(A)								(B)			(C)
Name and business add						Description of se	ervices		Compensation		
Country Landscapes and Tree LLC, 100 Ashford R	toad, Ashfor	d, CT	062	78			La	ndscaping and	Tree service		118,887
								*****			·
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											·
Table and a distance deal control	vo finalization	. د ما يس	+	ot '	imir		. +1~	upen lietad aha	אמן איניס	7010751457	
2 Total number of independent contractor received more than \$100,000 of compens	มธ (แเตเนนเก ation from t	ig bu he or	n III Dani	ui i İzatl	ion I	eu (O ►	, 111	1	746) WIIO		
received more than \$100,000 or compens	MOOT HOTH		94111					•		crymylltheit AC	Form 990 (2018)

Total Add lines 1a-1f Total Add lines 2a-2f Tot	Par	: VIII	Statement of Reve							
Secretary Sec	5-200 process (max		Check if Schedule C	contains	a res	ponse or note t		Part VIII		, , , <u>L</u>
The Federated campaigns							(A) Total revenue	exempt function	business	Revenue excluded from tax under sections
g e Government grants (contributions) 10 1,434,815 1	(D) (A)	10		AUGRANIA (SSE SA	94854			revenue		312-314
g e Government grants (contributions) 10 1,434,815 1	ant		, ,							
g e Government grants (contributions) 10 1,434,815 1	جَ ق	l	•					1,4545,651.00		4.80 (0.00)
g e Government grants (contributions) 10 1,434,815 1	ifts,	١.	-				1000000	5,655,000,000		
Business Code Sec. 267 O O	ء بر اقاق	ļ								
Business Code Sec. 267 O O	Sis		• •	•		1,101,010				ACCOUNT OF STREET
Business Code Sec. 267 O O	her				1f	936.802	ALC: UNIVERSE	3.64		
Business Code Sec. 267 O O	걸릴	a	Noncash contributions includ	led in lines 1a-						
Business Code Sec. 267 O O	and						2,515,248			
3 Investment income (including dividends, interest, and other similar amounts) 81,324 0 0 0 81,324 4 Income from Investment of tax-exempt bond proceeds 0 0 0 0 5 Royalties 0 0 0 0 0 6a Gross ronts 0 Real 0 Personal 6a Gross ronts 0 Real 0 Personal 6a Gross ronts 0 0 0 0 7a Gross amount from sales of assets other than Inventory 0 0 0 7a Gross amount from sales of assets other than Inventory 0 0 0 8a Gross income from fundraising events (not including \$ 143,631 of contributions reported on line 1c). 8a Gross income from gaming activities. 5 3,388 0 9,588 9a Gross income from gaming activities. 5 8 0 9,588 9a Gross income from gaming activities 5 0 0 10a Gross sales of inventory, less returns and allowances 5,491 0 0 10a Gross of goods sold 5 7,962 0 0 0 0 11a License Fees 713990 20,000 20,000 0 0 0 11a License Fees 713990 20,000 20,000 0 0 0 11a License Fees 713990 2,587 2,637 5,50 0 11a License Fees 713990 2,587 2,687 2,687 5,50 0 10a Total Rodd lines 11a-11d 94,892 1,7456 71,736						Business Code		3 5 4 5		
3 Investment income (including dividends, interest, and other similar amounts) 81,324 0 0 0 81,324 4 Income from Investment of tax-exempt bond proceeds 0 0 0 0 5 Royalties 0 0 0 0 0 6a Gross ronts 0 Real 0 Personal 6a Gross ronts 0 Real 0 Personal 6a Gross ronts 0 0 0 0 7a Gross amount from sales of assets other than Inventory 0 0 0 7a Gross amount from sales of assets other than Inventory 0 0 0 8a Gross income from fundraising events (not including \$ 143,631 of contributions reported on line 1c). 8a Gross income from gaming activities. 5 3,388 0 9,588 9a Gross income from gaming activities. 5 8 0 9,588 9a Gross income from gaming activities 5 0 0 10a Gross sales of inventory, less returns and allowances 5,491 0 0 10a Gross of goods sold 5 7,962 0 0 0 0 11a License Fees 713990 20,000 20,000 0 0 0 11a License Fees 713990 20,000 20,000 0 0 0 11a License Fees 713990 2,587 2,637 5,50 0 11a License Fees 713990 2,587 2,687 2,687 5,50 0 10a Total Rodd lines 11a-11d 94,892 1,7456 71,736	Ven	2a	Water Related Lesson	s and Fees		713900	362,267	362,267	0	0
3 Investment income (including dividends, interest, and other similar amounts) 81,324 0 0 0 81,324 4 Income from Investment of tax-exempt bond proceeds 0 0 0 0 5 Royalties 0 0 0 0 0 6a Gross ronts 0 Real 0 Personal 6a Gross ronts 0 Real 0 Personal 6a Gross ronts 0 0 0 0 7a Gross amount from sales of assets other than Inventory 0 0 0 7a Gross amount from sales of assets other than Inventory 0 0 0 8a Gross income from fundraising events (not including \$ 143,631 of contributions reported on line 1c). 8a Gross income from gaming activities. 5 3,388 0 9,588 9a Gross income from gaming activities. 5 8 0 9,588 9a Gross income from gaming activities 5 0 0 10a Gross sales of inventory, less returns and allowances 5,491 0 0 10a Gross of goods sold 5 7,962 0 0 0 0 11a License Fees 713990 20,000 20,000 0 0 0 11a License Fees 713990 20,000 20,000 0 0 0 11a License Fees 713990 2,587 2,637 5,50 0 11a License Fees 713990 2,587 2,687 2,687 5,50 0 10a Total Rodd lines 11a-11d 94,892 1,7456 71,736	æ	b	Ropes Course Fees			713990	120,224	120,224	0	0
3 Investment income (including dividends, interest, and other similar amounts) 81,324 0 0 0 81,324 4 Income from Investment of tax-exempt bond proceeds 0 0 0 0 5 Royalties 0 0 0 0 0 6a Gross ronts 0 Real 0 Personal 6a Gross ronts 0 Real 0 Personal 6a Gross ronts 0 0 0 0 7a Gross amount from sales of assets other than Inventory 0 0 0 7a Gross amount from sales of assets other than Inventory 0 0 0 8a Gross income from fundraising events (not including \$ 143,631 of contributions reported on line 1c). 8a Gross income from gaming activities. 5 3,388 0 9,588 9a Gross income from gaming activities. 5 8 0 9,588 9a Gross income from gaming activities 5 0 0 10a Gross sales of inventory, less returns and allowances 5,491 0 0 10a Gross of goods sold 5 7,962 0 0 0 0 11a License Fees 713990 20,000 20,000 0 0 0 11a License Fees 713990 20,000 20,000 0 0 0 11a License Fees 713990 2,587 2,637 5,50 0 11a License Fees 713990 2,587 2,687 2,687 5,50 0 10a Total Rodd lines 11a-11d 94,892 1,7456 71,736	Vice.	С	Event Vendor Fees			713900	62,772	62,772	 	
3 Investment income (including dividends, interest, and other similar amounts) 81,324 0 0 0 81,324 4 Income from Investment of tax-exempt bond proceeds 0 0 0 0 5 Royalties 0 0 0 0 0 6a Gross ronts 0 Real 0 Personal 6a Gross ronts 0 Real 0 Personal 6a Gross ronts 0 0 0 0 7a Gross amount from sales of assets other than Inventory 0 0 0 7a Gross amount from sales of assets other than Inventory 0 0 0 8a Gross income from fundraising events (not including \$ 143,631 of contributions reported on line 1c). 8a Gross income from gaming activities. 5 3,388 0 9,588 9a Gross income from gaming activities. 5 8 0 9,588 9a Gross income from gaming activities 5 0 0 10a Gross sales of inventory, less returns and allowances 5,491 0 0 10a Gross of goods sold 5 7,962 0 0 0 0 11a License Fees 713990 20,000 20,000 0 0 0 11a License Fees 713990 20,000 20,000 0 0 0 11a License Fees 713990 2,587 2,637 5,50 0 11a License Fees 713990 2,587 2,687 2,687 5,50 0 10a Total Rodd lines 11a-11d 94,892 1,7456 71,736	Ser	d	Regatta Entry Fees			713990	146,982	146,982	0	0
3 Investment income (including dividends, interest, and other similar amounts) 81,324 0 0 0 81,324 4 Income from Investment of tax-exempt bond proceeds 0 0 0 0 5 Royalties 0 0 0 0 0 6a Gross ronts 0 Real 0 Personal 6a Gross ronts 0 Real 0 Personal 6a Gross ronts 0 0 0 0 7a Gross amount from sales of assets other than Inventory 0 0 0 7a Gross amount from sales of assets other than Inventory 0 0 0 8a Gross income from fundraising events (not including \$ 143,631 of contributions reported on line 1c). 8a Gross income from gaming activities. 5 3,388 0 9,588 9a Gross income from gaming activities. 5 8 0 9,588 9a Gross income from gaming activities 5 0 0 10a Gross sales of inventory, less returns and allowances 5,491 0 0 10a Gross of goods sold 5 7,962 0 0 0 0 11a License Fees 713990 20,000 20,000 0 0 0 11a License Fees 713990 20,000 20,000 0 0 0 11a License Fees 713990 2,587 2,637 5,50 0 11a License Fees 713990 2,587 2,687 2,687 5,50 0 10a Total Rodd lines 11a-11d 94,892 1,7456 71,736	ᇤ	е	nennn						<u></u>	
3 Investment income (including dividends, interest, and other similar amounts) 81,324 0 0 0 81,324 4 Income from Investment of tax-exempt bond proceeds 0 0 0 0 5 Royalties 0 0 0 0 0 6a Gross ronts 0 Real 0 Personal 6a Gross ronts 0 Real 0 Personal 6a Gross ronts 0 0 0 0 7a Gross amount from sales of assets other than Inventory 0 0 0 7a Gross amount from sales of assets other than Inventory 0 0 0 8a Gross income from fundraising events (not including \$ 143,631 of contributions reported on line 1c). 8a Gross income from gaming activities. 5 3,388 0 9,588 9a Gross income from gaming activities. 5 8 0 9,588 9a Gross income from gaming activities 5 0 0 10a Gross sales of inventory, less returns and allowances 5,491 0 0 10a Gross of goods sold 5 7,962 0 0 0 0 11a License Fees 713990 20,000 20,000 0 0 0 11a License Fees 713990 20,000 20,000 0 0 0 11a License Fees 713990 2,587 2,637 5,50 0 11a License Fees 713990 2,587 2,687 2,687 5,50 0 10a Total Rodd lines 11a-11d 94,892 1,7456 71,736	go	f						0	0	0
A Income from investment of tax-exempt bond proceeds	<u>~</u>						692,245	A Share and a second		
4 Income from Investment of tax-exempt bond proceeds		3				•	04.004	_	_	04 224
Form Form										
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Fig. 2 Fig. 2		5	Royaines				U	U	U	U
December December		60	Gross ronts	ty rious		(ii) i o o o o o o				
C Rental income or (loss) O O O O									10.0	300000
Net rental income or (loss) Net					n				The state of the	
Page Page			• • •	loss)						
Bases other than inventory 0 9,113					es	(ii) Other				
b Less: cost or other basis and sales expenses 0 7,003 0 2,110 0 0 0		70			0	9.113			6.0982003	
and sales expenses .		h	•			****				
Ba Gross income from fundraising events (not including \$ 143,631 of contributions reported on line 1c). See Part IV, line 18		-			0	7,003			Manager 1	
8a Gross income from fundraising events (not including \$ 143,631 of contributions reported on line 1c). See Part IV, line 18		С	Gain or (loss)			2,110				
events (not including \$ 143,631 of contributions reported on line 1c). See Part IV, line 18		d	Net gain or (loss) .			<u> </u>	2,110	2,110	0	0
events (not including \$ 143,631 of contributions reported on line 1c). See Part IV, line 18									10 mm	1.0
of contributions reported on line 1c). See Part IV, line 18 a		8a		_						
c Net income or (loss) from fundraising events . ▶ -9,588 0 -9,588 9a Gross income from gaming activities . See Part IV, line 19 a a b Less: direct expenses b c c Net income or (loss) from gaming activities ▶ 10a Gross sales of inventory, less returns and allowances a 5,491 c b Less: cost of goods sold b 7,952 c c Net income or (loss) from sales of inventory . ▶ -2,461 -2,461 0 0 Miscellaneous Revenue Business Code 11a License Fees 713990 20,000 20,000 0 0 b Food and Beverage 722320 58,912 69,318 -10,406 0 c Insurance Claim Proceeds 713990 13,393 13,393 0 0 d All other revenue 2,587 2,637 -50 0 e Total. Add lines 11a-11d ▶ 94,892 12 Total revenue. See instructions ▶ 3,373,770 797,242 -10,456 71,736	Š									Calculation of the Control
c Net income or (loss) from fundraising events . ▶ -9,588 0 -9,588 9a Gross income from gaming activities . See Part IV, line 19 a a b Less: direct expenses b c c Net income or (loss) from gaming activities ▶ 10a Gross sales of inventory, less returns and allowances a 5,491 c b Less: cost of goods sold b 7,952 c c Net income or (loss) from sales of inventory . ▶ -2,461 -2,461 0 0 Miscellaneous Revenue Business Code 11a License Fees 713990 20,000 20,000 0 0 b Food and Beverage 722320 58,912 69,318 -10,406 0 c Insurance Claim Proceeds 713990 13,393 13,393 0 0 d All other revenue 2,587 2,637 -50 0 e Total. Add lines 11a-11d ▶ 94,892 12 Total revenue. See instructions ▶ 3,373,770 797,242 -10,456 71,736	ا يغ			ed on line 10	1					
c Net income or (loss) from fundraising events . ▶ -9,588 0 -9,588 9a Gross income from gaming activities . See Part IV, line 19 a a b Less: direct expenses b c c Net income or (loss) from gaming activities ▶ 10a Gross sales of inventory, less returns and allowances a 5,491 c b Less: cost of goods sold b 7,952 c c Net income or (loss) from sales of inventory . ▶ -2,461 -2,461 0 0 Miscellaneous Revenue Business Code 11a License Fees 713990 20,000 20,000 0 0 b Food and Beverage 722320 58,912 69,318 -10,406 0 c Insurance Claim Proceeds 713990 13,393 13,393 0 0 d All other revenue 2,587 2,637 -50 0 e Total. Add lines 11a-11d ▶ 94,892 12 Total revenue. See instructions ▶ 3,373,770 797,242 -10,456 71,736	je j									
9a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities . ▶ 10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b 7,952 c Net income or (loss) from sales of inventory . ▶ -2,461 -2,461 0 0 Miscellaneous Revenue Business Code 11a License Fees 713990 20,000 20,000 0 0 0 b Food and Beverage 722320 58,912 69,318 -10,406 0 c Insurance Claim Proceeds 713990 13,393 13,393 0 0 c All other revenue ▶ 94,892 12 Total revenue. See instructions ▶ 3,373,770 797,242 -10,456 71,736	ਠੋ∣						0.000		0	0.590
See Part IV, line 19						evenus . F	-9,588	AND REPORT OF THE RESERVE OF THE RES	U	*8,008
b Less: direct expenses b c Net income or (loss) from gaming activities ▶ 10a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold b 7,952 c Net income or (loss) from sales of inventory . ▶ -2,461 -2,461 0 0 Miscellaneous Revenue Business Code 11a License Fees 713990 20,000 20,000 0 0 0 b Food and Beverage 722320 58,912 69,318 -10,406 0 c Insurance Claim Proceeds 713990 13,393 13,393 0 0 d All other revenue ▶ 94,892 12 Total revenue. See instructions ▶ 94,892 12 Total revenue. See instructions ▶ 3,373,770 797,242 -10,456 71,736		Ja								
c Net income or (loss) from gaming activities ▶ 10a Gross sales of inventory, less returns and allowances a 5,491 b Less: cost of goods sold b 7,952 c Net income or (loss) from sales of inventory . ▶ -2,461 -2,461 0 0 Miscellaneous Revenue Business Code 0 0 0 0 11a License Fees 713990 20,000 20,000 0 0 0 b Food and Beverage 722320 58,912 69,318 -10,406 0 c Insurance Claim Proceeds 713990 13,393 13,393 0 0 d All other revenue 2,587 2,637 -50 0 e Total. Add lines 11a-11d		h	-				0.000		i e calif	
10a Gross sales of inventory, less returns and allowances a 5,491 b Less: cost of goods sold b 7,952 c Net income or (loss) from sales of inventory . ▶ -2,461 -2,461 0 0 0 Miscellaneous Revenue Business Code 11a License Fees 713990 20,000 20,000 0 0 0 b Food and Beverage 722320 58,912 69,318 -10,406 0 c Insurance Claim Proceeds 713990 13,393 13,393 0 0 0 d All other revenue ▶ 94,892 12 Total revenue. See instructions ▶ 3,373,770 797,242 -10,456 71,736			•			vities ►		TOTAL DESIGNATION OF THE PROPERTY OF THE PROPE	Residence and the second secon	
returns and allowances a b Less: cost of goods sold b 7,952 c Net income or (loss) from sales of inventory ▶ -2,461 -2,461 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								11691775	Maria Cara Cara Sa	
b Less: cost of goods sold b 7,952 c Net income or (loss) from sales of inventory ▶ -2,461 -2,461 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0						5,491				
c Net income or (loss) from sales of inventory ▶ -2,461 -2,461 0 0 Miscellaneous Revenue Business Code 2 0 0 0 0 11a License Fees 713990 20,000 20,000 0 0 0 b Food and Beverage 722320 58,912 69,318 -10,406 0 c Insurance Claim Proceeds 713990 13,393 13,393 0 0 d All other revenue 2,587 2,637 -50 0 e Total. Add lines 11a-11d ▶ 94,892 -10,456 71,736 12 Total revenue. See instructions ▶ 3,373,770 797,242 -10,456 71,736		b	Less: cost of goods s	old	. Ь		4 4 4 4 4			
Miscellaneous Revenue Business Code 6 6 6 6 6 7 7 7 9 0			 Net income or (loss) from sales of inv 			····	-2,461	-2,461	0	0
b Food and Beverage 722320 58,912 69,318 -10,406 0 c Insurance Claim Proceeds 713990 13,393 13,393 0 0 d All other revenue ▶ 94,892 12 Total revenue. See instructions ▶ 3,373,770 797,242 -10,456 71,736	Ì					Business Code				
c Insurance Claim Proceeds 713990 13,393 13,393 0 0 d All other revenue 2,587 2,637 -50 0 e Total. Add lines 11a-11d ▶ 94,892 5 2 12 Total revenue. See instructions ▶ 3,373,770 797,242 -10,456 71,736	Ì	11a	License Fees			713990	20,000	20,000		
d All other revenue		b								
e Total. Add lines 11a–11d ▶ 94,892		C		eds		713990	*******			
12 Total revenue. See instructions ▶ 3,373,770 797,242 -10,456 71,736		d						2,637	<u>-50</u>	0
		_				🟲				74 700
		12	I otal revenue. See in	structions	•	<u></u> . ▶	3,373,770	797,242	-10,456	71,736 Form 990 (2018)

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (B) Program service expenses (C) Management and general expenses (D) Fundraising Do not include amounts reported on lines 6b, 7b, (A) Total expenses 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations and domestic governments, See Part IV, line 21 . . . 0 Grants and other assistance to domestic 2 individuals. See Part IV. line 22 Grants and other assistance to foreign 3 organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 . . . Benefits paid to or for members . . . 0 0 4 Compensation of current officers, directors, 5 trustees, and key employees 129,253 62,045 43,708 235,006 Compensation not included above, to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . 0 189,013 993,229 19.668 Other salaries and wages 1,201,910 Pension plan accruals and contributions (include 8 section 401(k) and 403(b) employer contributions) 28,857 22,921 1,882 4,054 85,890 7,947 15,406 Other employee benefits 109,243 9 20,793 7,301 128,429 100,335 10 11 Fees for services (non-employees): 0 O Management а 0 0 b Legal 6,853 6,853 2,912 26,757 23,125 720 Accounting C 0 0 0 0 Professional fundraising services. See Part IV, line 17 0 е 199 806 Investment management fees 10,862 9,857 f Other, (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . . 0 0 400 400 378 23,602 24,254 Advertising and promotion 48,234 12 8,217 621 16,759 13 Office expenses 25,597 545 8,146 48,909 40,218 Information technology . . . 14 0 0 0 15 Royalties 9,676 2,393 72,204 60,135 16 Occupancy 0 17 0 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 0 0 196 1,556 Conferences, conventions, and meetings . 14,987 13,235 19 0 20 0 0 0 21 Payments to affiliates 0 0 0 Depreciation, depletion, and amortization . 106,016 104,782 245 989 22 997 4,032 23 199,388 194,359 Other expenses, Itemize expenses not covered 24 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.) 0 0 204,929 204,929 Design and Construction 0 0 375,988 375,988 h Direct Program and Event Expenses 0 0 522,848 522,848 C Park Maintenance and Operations d 0 All other expenses 0 e Total functional expenses. Add lines 1 through 24e 2,929,370 105,137 332,910 3,367,417 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year 1 275,835 227,368 2 69,939 2 82,438 3 97,791 3 227,735 4 19,035 13,421 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 0 0 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions), Complete Part II of Schedule L 6 0 0 0 7 0 8 1,086 1,855 9 Prepaid expenses and deferred charges . 10,009 10,992 9 Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D 10a 1,637,319 10b 1,092,599 Less: accumulated depreciation 443,272 10c 544,720 2,476,030 11 2,221,369 Investments—publicly traded securities 11 12 Investments—other securities. See Part IV, line 11 . . . 0 12 0 13 Investments—program-related. See Part IV, line 11 . . . 0 13 14 0 14 0 15 15 0 0 Total assets. Add lines 1 through 15 (must equal line 34) <u>3,482,</u>128 16 3,240,767 16 17 199,795 17 121,597 18 18 0 0 19 5,075 19 26,950 20 20 0 0 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 0 0 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 0 0 23 3,311 Secured mortgages and notes payable to unrelated third parties . . . 8,986 23 24 Unsecured notes and loans payable to unrelated third parties . . . 0 24 0 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 0 25 0 26 Total liabilities. Add lines 17 through 25 157,533 26 208.181 Organizations that follow SFAS 117 (ASC 958), check here ▶ Balances complete lines 27 through 29, and lines 33 and 34. 27 <u>1,473,</u>971 27 Unrestricted net assets 1,599,291 28 1,508,193 1,336,265 Fund 217,111 222,350 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34. ō 30 Net Assets Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 32 Retained earnings, endowment, accumulated income, or other funds. 32 33 33 3,324,595 3,032,586 3,482,128 Total liabilities and net assets/fund balances . . . 34 3,240,767 Form 990 (2018)

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Page		
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LOUII 9	90 (2016)			- 10	yo
Par	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		3,37	3,770
2	Total expenses (must equal Part IX, column (A), line 25)	2	· · · · · · · · · · · · · · · · · · ·	3,36	7,417
3	Revenue less expenses. Subtract line 2 from line 1	3			6,353
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3,32	4,595
5	Net unrealized gains (losses) on investments	5		-29	8,362
6	Donated services and use of facilities	6			0
7	Investment expenses	7			0
8	Prior period adjustments	8		,	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		3,03	2,586
Part					
	Check if Schedule O contains a response or note to any line in this Part XII	• •	<u></u>	Yes	No
1	Accounting method used to prepare the Form 990: Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," ex Schedule O.	plain i	n		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		✓
	If "Yes," check a box below to indicate whether the financial statements for the year were compreviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited.	oiled o	or	_	
	separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or				
	of the audit, review, or compilation of its financial statements and selection of an independent account the organization changed either its oversight process or selection process during the tax year, exschedule O.	ntant?	2c	/	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?	forth i	n . 3 a		<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not underequired audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
			For	m 990	(2018)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust. ► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service Employer identification number Name of the organization 06-1045653 Riverfront Recapture Inc. Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, C its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Provide the following information about the supported organization(s). (iv) is the organization (v) Amount of monetary (vi) Amount of (i) Name of supported organization (ii) EIN (iii) Type of organization isted in your governing other support (see (described on lines 1-10 support (see document? instructions) above (see instructions)) instructions) Ves No (A) (B) (C) (D) (E)

Total

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

	on A. Public Support					r	
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2,138,272	1,669,681	1,794,177	2,351,333	2,515,249	10,468,712
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	o	0	. 0	0	0	O.
3	The value of services or facilities furnished by a governmental unit to the organization without charge	o	0	0	0	0	0
4	Total. Add lines 1 through 3	2,138,272	1,669,681	1,794,177	2,351,333	2,515,249	10,468,712
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						4.000.000
_	shown on line 11, column (f)	(0.00 km, 60 km ft)	AND DESCRIPTION OF THE PROPERTY OF THE PROPERT				1,076,352
6 Casti	Public support. Subtract line 5 from line 4	8/3/3/4					9,392,360
	on B. Total Support dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4	2,138,272	1,669,681	1,794,177	2,351,333	2,515,249	10,468,712
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	77,087	70,650	76,765	76,279	81,324	382,105
9	Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	0	0	0	0	0	0_
11	Total support. Add lines 7 through 10						10,850,817
12	Gross receipts from related activities, etc.				<i>.</i> .	12	3,634,707
13	First five years. If the Form 990 is for the						
	organization, check this box and stop he						<u> > L</u>
Secti	on C. Computation of Public Suppor						
14	Public support percentage for 2018 (line 6					14	86.56 %
15	Public support percentage from 2017 Sch	nedule A, Part I	I, line 14			15	85.35 %
16a	331/3% support test-2018. If the organi	zation did not	check the box	on line 13, an	id line 14 is 33	or more,	
	box and stop here. The organization qua	iries as a publi	ciy supported	organization			P
b	331/3% support test—2017. If the organithis box and stop here. The organization	qualifies as a p	oublicly suppor	rted organizati	on		▶ ☑
17a	7a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization						
b	10%-facts-and-circumstances test—20 15 is 10% or more, and if the organiza Explain in Part VI how the organization in supported organization	tion meets the neets the "fact	e "facts-and-c s-and-circums	ircumstances" stances" test.	test, check the creation that the creation to the creation that th	his box and son qualifies as	a publicly ▶ □
18	Private foundation. If the organization di						
	instructions						<u>···▶□</u>

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Secti	on A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees						,
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities					-	
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add fines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from					100	
Casti	line 6.)						
	on B. Total Support dar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6	(a) 2014	(6) 2010	(0) 2010	(d) ZOTI	(0) 20 10	(1)
10a	Gross income from interest, dividends,						
IVA	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						
11	Net income from unrelated business		***				
	activities not included in line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,					THE PERSON NAMED IN COLUMN NAM	
	and 12.)	<u> </u>	<u> </u>		. co.		- FO1(a)(O)
14	First five years. If the Form 990 is for the						
	organization, check this box and stop he						
	on C. Computation of Public Suppo	rt Percentag	e	10 1 (0)		45	
15	Public support percentage for 2018 (line					15	<u>%</u> %
16	Public support percentage from 2017 Sci					10	70
	on D. Computation of Investment In Investment income percentage for 2018	line 10e colun	n (f) divided h	v line 13 colu	mn (fl)	17	%
17	Investment income percentage for 2016 (Investment income percentage from 201)					18	%
18 19a	33 ¹ / ₃ % support tests—2018. If the organ	ization did not	check the box	on line 14. a	nd line 15 is m		
198	17 is not more than 33½%, check this box	and stop here.	The organization	on qualifies as	a publicly supp	orted organizati	on . ▶ 🗌
b	33½% support tests—2017. If the organization	zation did not c	heck a box on	line 14 or line 1	19a, and line 16	is more than 3	
IJ	line 18 is not more than 331/3%, check this	box and stop h	ere. The organ	ization qualifies	as a publicly s	upported organ	ization 🕨 🔲
20	Private foundation If the organization d						

Part IV

Supporting Organizations

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

		Yes No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? 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
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b
¢	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 .	
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	disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b
	Schedule A (Form	990 or 990-EZ} 2018

Part	IV Supporting Organizations (continued)		¥	NJ.
	the state of the s		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
la.	A family member of a person described in (a) above?	11b		
b	A 35% controlled entity of a person described in (a) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	ion B. Type I Supporting Organizations	1110		
OCCI	ion B. Type i Supporting Organizations		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or		157	912
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported	25.7		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Secti	ion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		100	
	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).	4		
0 1		1		
Secti	ion D. All Type III Supporting Organizations		Yes	No
4	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	142.6	169	110
1	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			334
	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	NEEDS HALVE	APPLICATION OF
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	100000		
	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	25.0		
	supported organizations played in this regard.	3		
Secti	ion E. Type III Functionally Integrated Supporting Organizations			. 1
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	nstruc	ctions	s).
a	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.	'ooo Ind	tructi	ionel
C	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (300 1113	Yes	
2	Activities Test. Answer (a) and (b) below.	2,437	103	110
а	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			
	the supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a	LANGTE VALUE OF	esementary 22
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	1800		
~	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		===	
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
-	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical	gan	izations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ	j tru nizal	ist on Nov. 20, 1970 (explaitions must complete Section	ns A through E.
Section A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		***
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B—Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		J181
c Fair market value of other non-exempt-use assets	10		1000
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		,
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C-Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3	21. 20000	
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		-, 114 17722 -
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionall instructions).	y in	tegrated Type III supporting	g organization (see

Part	Type III Non-Functionally Integrated 509(a)(3	ay Supporting Organ	izations (continued)	I	
Sect	ion D—Distributions			Current Year	
1	Amounts paid to supported organizations to accomplish				
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity				
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations		
4	Amounts paid to acquire exempt-use assets		******		
5	Qualified set-aside amounts (prior IRS approval required)				
6	Other distributions (describe in Part VI). See instructions.	Mv.		2.50177	
7	Total annual distributions. Add lines 1 through 6.				
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	h the organization is re	sponsive		
9	Distributable amount for 2018 from Section C, line 6		***************************************		
10	Line 8 amount divided by line 9 amount	·	MACHINA .		
10	Life 8 amount divided by line 9 amount		(ii)	(iii)	
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	Underdistributions Pre-2018	Distributable Amount for 2018	
1	Distributable amount for 2018 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2018 (reasonable cause required—explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2018				
a	From 2013				
b	From 2014	100	alidos en en acedadas de la composição d		
C	From 2015				
d	From 2016				
e	From 2017		550 F. L. C. C. C. C. C. C. C. C. C. C. C. C. C.	no selection of the sel	
f	Total of lines 3a through e			STATE OF THE STATE	
g	Applied to underdistributions of prior years				
h	Applied to 2018 distributable amount				
i	Carryover from 2013 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.				
4	Distributions for 2018 from				
	Section D, line 7:				
a	Applied to underdistributions of prior years				
b	Applied to 2018 distributable amount				
C	Remainder, Subtract lines 4a and 4b from 4.	14 - 200 E. (17 - 27) S. S. S. S. S. S. S. S. S. S. S. S. S.			
5	Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.				
7	Excess distributions carryover to 2019. Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2014				
b	Excess from 2015				
С	Excess from 2016				
d	Excess from 2017				
е	Excess from 2018			MAKE ENGLISHED AND AND A	

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.)
	1979P

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047

2018

Open to Public Inspection

	the organization		06-1045653
-	front Recapture Inc rt I Organizations Maintaining Donor Advised	Funds or Other Similar Fund	
Par	Organizations Maintaining Donor Advised Complete if the organization answered "Yes"		3 of Accounts.
	Complete if the organization answered Tes	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(7)	
2	Aggregate value of contributions to (during year)	:	
	Aggregate value of grants from (during year) .		
3			
4 5	Aggregate value at end of year	ore in writing that the assets he	old in donor advised
5	funds are the organization's property, subject to the organization	nization's exclusive legal control	? □ Yes □ No
^	Did the organization inform all grantees, donors, and do		
6	only for charitable purposes and not for the benefit of t	ne denor or denor advisor, or fo	r any other nurnose
	conferring impermissible private benefit?		
Dor			
Par	Conservation Easements. Complete if the organization answered "Yes"	on Form 990 Part IV line 7	
	Purpose(s) of conservation easements held by the organ		
1	Preservation of land for public use (e.g., recreation of		a historically important land area
		Dreservation of	a certified historic structure
	Protection of natural habitat	Fieservation of	a certified filstoric structure
•	Preservation of open space Complete lines 2a through 2d if the organization held a complete lines 2a through 2d if the organization held 2d i	ualified conservation contribution	in the form of a conservation
2	easement on the last day of the tax year.	dailled collselvation contribution	Held at the End of the Tax Year
	•		0.690,4902:
a			
b	Total acreage restricted by conservation easements		
C	Number of conservation easements on a certified historic Number of conservation easements included in (c) ac		
d		quired after 1725/00, and not c	
	Number of conservation easements modified, transferred		
3	tax year ►	i, released, extiliguished, or term	mated by the organization during the
	Number of states where property subject to conservation	essement is located	
4 5	Does the organization have a written policy regardin	the periodic monitoring insp	pection handling of
J	violations, and enforcement of the conservation easemer		
6	Staff and volunteer hours devoted to monitoring, inspecting, i		
O	Stan and volunteer nodes devoted to monitoring, inspecting, i	anding of violations, and officions	Control validit cadditionad daming the year
7	Amount of expenses incurred in monitoring, inspecting, han	dling of violations, and enforcing o	onservation easements during the year
,	\$\$	ding of violations, and officioning o	officer various described and your
8	Does each conservation easement reported on line 2(d) a	hove satisfy the requirements of a	section 170(h)(4)(B)(i)
0	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conser		
9	balance sheet, and include, if applicable, the text of the f	ootnote to the organization's fina	incial statements that describes the
	organization's accounting for conservation easements.		
Part		rt. Historical Treasures. or C	Other Similar Assets.
	Complete if the organization answered "Yes"		
1a	If the organization elected, as permitted under SFAS 11		revenue statement and balance shee
	works of art, historical treasures, or other similar asset	s held for public exhibition, edu	ication, or research in furtherance o
	public service, provide, in Part XIII, the text of the footnot	e to its financial statements that	describes these items.
b	If the organization elected, as permitted under SFAS 1		
~	works of art, historical treasures, or other similar asset	s held for public exhibition, edu	ication, or research in furtherance o
	public service, provide the following amounts relating to		
	(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, histo	ical treasures, or other similar	assets for financial gain, provide the
	following amounts required to be reported under SFAS 1	16 (ASC 958) relating to these ite	ems:
а	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		

Par	III Organizations Maintaining	Collections of	Art, Histo	orical T	reasures	, or Ot	her Similar As	sets (continued)
3	Using the organization's acquisition, collection items (check all that apply):	accession, and ot	her record	ls, chec	k any of th	ne follov	ving that are a s	significant use of its
_			dГ	Loan	or exchan	ao prodi	rame	
a	Public exhibition							
b	Scholarly researchPreservation for future generations	•	e L	7 Onici				
C	Dravide a description of the organization	tion's collections :	and evolai	n how t	hev further	the ora	anization's exer	nnt nurnose in Part
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.							
5	During the year, did the organization	solicit or receive	donations	of art	historical t	reasure	s or other simil	ar
J	assets to be sold to raise funds rather	than to be mainta	ained as pa	art of the	e organizat	ion's co	llection?	☐ Yes ☐ No
Par								
	Complete if the organization	answered "Yes	" on Form	n 990. F	Part IV. lin	e 9. or	reported an an	nount on Form
	990, Part X, line 21.				,	,	•	
	Is the organization an agent, trustee	. custodian or oth	er interme	ediary fo	or contribu	tions or	other assets n	ot
	included on Form 990, Part X?							☐ Yes ☐ No
b	If "Yes," explain the arrangement in P	art XIII and comple	ete the follo	owing ta	able:			
-	,	•		Ŭ			A	mount
c	Beginning balance					1c		
d						1d		
e	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amou	nt on Form 990, Pa	art X, line 2	21, for e	scrow or c	ustodial	account liability	/? ☐ Yes ☐ No
b	If "Yes," explain the arrangement in P.							
Par								
	Complete if the organization	answered "Yes'	" on Form	1 990, F	Part IV, lin			
		(a) Current year	(b) Prior	year	(c) Two yea	ırs back	(d) Three years bact	(e) Four years back
1a	Beginning of year balance	752,395		861,421	1	814,197	868,82	4 860,189
b	Contributions	5,239		4,323		3,774	4,69	0 4,274
С	Net investment earnings, gains, and							
	losses	-82,468		128,593		85,067	-19,16	8 42,135
d	Grants or scholarships	0		0		0		0 0
е	Other expenditures for facilities and							
	programs	42,572		241,942		41,617	40,14	9 37,774
f	Administrative expenses	0		0		0		0 0
g	End of year balance	632,594		752,395		361,421	814,19	7 868,824
2	Provide the estimated percentage of t		d balance	(line 1g	, column (a	a)) held a	as:	
а	Board designated or quasi-endowmer	nt ▶50	<u>6</u> %					
b		35 %						
С	Temporarily restricted endowment	9 %						
	The percentages on lines 2a, 2b, and							_
3a	Are there endowment funds not in the	e possession of th	ie organiza	ation tha	at are neid	and adi	ministered for th	
	organization by:							Yes No
	(i) unrelated organizations			• •				3a(i)
b	If "Yes" on line 3a(ii), are the related of							3b
4	Describe in Part XIII the intended uses		n s endow	VIII BILL IC	iiius.			
Part	VI Land, Buildings, and Equip Complete if the organization		on Form	. aan E	Part IV lin	م 11a S	See Form 990	Part X line 10
		(a) Cost or ot	· •		r other basis		Accumulated	(d) Book value
	Description of property	(a) Cost of our		•	ther)		preciation	(d) Book tallo
4.0	Land		0	<u> </u>	0			0
1a	Land	•	0		12,145	58 SPA (\$5) E	7,690	4,455
b	Buildings	· -	0		135,771		122,191	13,580
d	Equipment	•	0		1,439,588		912,903	526,685
u e	Other		0		49,815		49,815	0
	Add lines 1a through 1e. (Column (d) n	nust equal Form 99		column)c.)		544,720

Part VII	Investments—Other Securities.	IV line 11h See F	Form 000 Part V line 12
	Complete if the organization answered "Yes" on Form 990, Part (a) Description of security or category	(b) Book value	(c) Method of valuation:
	(including name of security)		Cost or end-of-year market value
(1) Financial			LIVI-
	neld equity interests		
(3) Other			<u></u>
(A) (B)	***************************************		
(C)			
(D)	***************************************		
(E)	18888888888888888888888888888888888888		
(F)			
(G)			
(H)			
Total. (Column (o) must equal Form 990, Part X, col. (B) line 12.) ▶		
Part VIII	Investments—Program Related.	_	
	Complete if the organization answered "Yes" on Form 990, Part		1
	(a) Description of Investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)	· · · · · · · · · · · · · · · · · · ·		
(2)			
(3)	West Months and the Control of the C		
(4)			
(5)	The state of the s		
(6)			
(7)	CONTRACTOR OF THE CONTRACTOR O		
(8)			- /90
(9) Total, (Column II	n) must equal Form 990, Part X, col. (B) line 13.) ▶		
Part IX	Other Assets.	<u></u>	
	Complete if the organization answered "Yes" on Form 990, Part (a) Description	IV, line 11d. See F	Form 990, Part X, line 15.
<u>(1)</u>			
(2)	A A A A A A A A A A A A A A A A A A A	***	
(3)			
(4)			
(5)			
(6)			
(7)	· · · · · · · · · · · · · · · · · · ·		
(8)	t de la companya del companya de la companya del companya de la co	<u> </u>	
(9)	nn (b) must equal Form 990, Part X, col. (B) line 15.)		
Part X	mn (b) must equal Form 990, Part X, col. (B) line 15.)		
ran A	Complete if the organization answered "Yes" on Form 990, Part	V, line 11e or 11f.	See Form 990, Part X,
1.	line 25. (a) Description of liability		(b) Book value
(1) Federal in			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)	Water Control of the		
(9)			
) must equal Form 990, Part X, col. (B) line 25.) ►	Instinute financial at	tamanta that was auto the
2. Liability for	uncertain tax positions. In Part XIII, provide the text of the footnote to the organ liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the te	iization's iinanciai sta ivt of the footpote bod	tements that reports the
organization s	ritability for uncertain tax positions under Fin 46 (ASC 740). Offect here if the te	VEOLUTE IOOUTORE LIST	BOOK PROVIDED IN FARE AND L

Par				Retu	rn.
	Complete if the organization answered "Yes" on Form 990,				0.400.004
1	Total revenue, gains, and other support per audited financial statements	• •		1	3,109,861
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	۔ ما			
a	Net unrealized gains (losses) on investments	2a	-298,362		
b	Donated services and use of facilities	2b	45,315		
C	Recoveries of prior year grants	2c	0		
d	Other (Describe in Part XIII.)	2d	0	2200000000	
e	Add lines 2a through 2d	• •		2e	-253,047
3	Subtract line 2e from line 1	i '		3	3,362,908
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		40.000		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	10,862		
b	Other (Describe in Part XIII.)	4b	0		40.000
c	Add lines 4a and 4b			4c	10,862
5					3,373,770
Part				ne.	urr.
	Complete if the organization answered "Yes" on Form 990,			1	2 404 870
1	Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:				3,401,870
2	·	100	45.045	5 100	
a	Donated services and use of facilities	2a 2b	45,315		
b	Prior year adjustments	2c	0		
C	Other losses	2d	0		
d				2e	AE 215
e	Add lines 2a through 2d		• • • • • •	3	45,315
3	Subtract line 2e from line 1	<i>.</i> .	<i></i> .	J	3,356,555
4		4a	40.000		
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	4b	10,862		,
b	·			4c	10,862
С 5	Add lines 4a and 4b			5	3,367,417
Part		C 10.7	<u> </u>	J	3,301,411
2; Parl Sched availa	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a an XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part ule D, Part V, Line 4 - According to the spending policy, up to 5% of the average of the support programs. One donor has the set the specific requirement that for all able in 2018). Another \$36,033 from unrestricted endowment funds was available in 2018).	to pro je end unds l	vide any additional in ing balance of the prev be used for pops conce	format ious 1 rts in l	tion. 2 quarters is

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

> Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Name o	of the organization					Employer identific	cation number	
Riverfront Recapture Inc						06-1045653		
Par	Form 990-EZ filers are r	not required to	complete	this part.			line 17.	
1	Indicate whether the organization	on raised funds	through any					
а	☐ Mail solicitations							
b	Internet and email solicitation	ons	f [_		ion of government			
С	Phone solicitations		g] Special 1	fundraising events	;		
đ	In-person solicitations							
2a	Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?							
b	compensated at least \$5,000 by	t individuals of the organization of the organ	entities (tunc on.	araisers) pu	irsuant to agreem	ents under which th	le fulluraiser is to be	
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundralser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization	
			Yes	No				
1								
2				,				
3								
4								
5								
6			-					
7								
8	1600		-					
9								
10	1.1.00					- WA-12		
Total		, i		<u> </u>	****	····		
3	List all states in which the orga registration or licensing.	nization is regis	stered or lic	ensed to s				

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.

			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))			
ds			Big Mo' Gala	Boathouse Bash	3				
			(event type)	(event type)	(total number)				
Revenue	1	Gross receipts	133,654	37,050	16,727	187,431			
Œ	2	Less: Contributions	116,339	18,020	9,272	143,631			
	3	Gross income (line 1 minus line 2)	17,315	19,030	7,455	43,800			
Direct Expenses	4	Cash prizes	0	0	0	0			
	5	Noncash prizes	847	0	2,400	3,247			
	6	Rent/facility costs	9,190	0	0	9,190			
	7	Food and beverages	2,525	11,080	3,031	16,636			
	8	Entertainment	700	1,013	89	1,802			
	9	Other direct expenses .	15,052	5,981	1,480	22,513			
	10	Direct expense summary. Ad				53,388			
ь.	11	Net income summary. Subtra Gaming. Complete if th	act line 10 from line 3, c	olumn (d)		-9,588			
F	rt III	\$15,000 on Form 990-E2		erea res on ronn s	990, Fart IV, inte 19,	or reported more than			
		\$10,000 011 0111 000 EE	-	(b) Pull tabs/instant		(d) Total gaming (add			
Revenue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))			
eve				***************************************					
<u> </u>	1	Gross revenue							
ses	2	Cash prizes			0.44 ±1 ⁻⁰ (174)				
Direct Expenses	3	Noncash prizes		A444	· · · · · · · · · · · · · · · · · · ·				
irect 1	4	Rent/facility costs	-Mar		A1774				
ш	5	Other direct expenses .							
	<u> </u>	Other direct expenses 1	☐ Yes %	☐ Yes %	☐ Yes %				
	6	Volunteer labor	□ No	□ No	☐ No				
	7	Direct expense summary. Add lines 2 through 5 in column (d)							
	8	Net gaming income summary. Subtract line 7 from line 1, column (d) ▶							
	_	The formation of the design of the second of the last of the second of t		mina aatiuitias:					
		Inter the state(s) in which the organization conducts gaming activities: s the organization licensed to conduct gaming activities in each of these states?							
10		Vere any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? . Yes No "Yes," explain:							

chedu	ule G (Form 990 or 990-EZ) 2018		Page 3
11	Does the organization conduct gaming activities with nonmembers?	☐ Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	☐ Yes	□No
13	Indicate the percentage of gaming activity conducted in:		
а	The organization's facility		<u>%</u>
b	An outside facility		<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ►		
	Address >		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	☐ Yes	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$		
С	If "Yes," enter name and address of the third party:		
	Name ►		<i>-</i>
	Address ▶		
16	Gaming manager information:		
	Name ►		
	Gaming manager compensation ▶ \$		
	Description of services provided ▶		
	□ Director/officer □ Employee □ Independent contractor		
17 a b	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	☐ Yes	□ No
Part		ii) and (al inforr	v); and nation.


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# SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

## **Noncash Contributions**

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Employer identification number

06-1045653 Riverfront Recapture Inc **Types of Property** Part I (c) (b) (a) Noncash contribution Number of contributions or Method of determining Check if amounts reported on noncash contribution amounts applicable items contributed Form 990, Part VIII, line 1g Art-Works of art . . . . 1 2 Art-Historical treasures . . . 3 Art-Fractional interests . . 4 Books and publications . . 5 Clothing and household goods . . . . . . . . . . Cars and other vehicles . . . 6 7 Boats and planes . . . . . 8 Intellectual property . . . 28,077 FMV 9 Securities-Publicly traded . . 10 Securities-Closely held stock . Securities-Partnership, LLC, 11 or trust interests . . . . 12 Securities-Miscellaneous . . 13 Qualified conservation contribution - Historic structures . . . . Qualified conservation 14 contribution-Other . . . Real estate-Residential . . . 15 16 Real estate - Commercial . 17 Real estate-Other . . . . Collectibles . . . . . . 18 Food inventory . . . . . . 19 20 Drugs and medical supplies . . . Taxidermy . . . . . . 21 Historical artifacts . . . 22 23 Scientific specimens . . . . 24 Archeological artifacts . . . 25 Other ► (_____) 26 Other ► (_____) 27 Other ► (_____) 28 Other ► ( Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement . . . . . . Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required 30a b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard 31 31 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a b If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, 33

describe in Part II.

Part II	<b>Supplemental Information.</b> Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
-	
	**************************************
	,
	NAA

## SCHEDULE O (Form 990 or 990-EZ)

# 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.

20**18** 

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ➤ Attach to Form 990 or 990-EZ.

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

06-1045653 Riverfront Recapture Inc Form 990, Part VI, Section B, Line 11b - The Finance & Human Resources Committee has been delegated the authority to review the 990 on behalf of the Board. Once it is prepared by the Finance Director, it is reviewed by the auditors and any changes or corrections are communicated to the Finance Director, The Finance Director will then present the form at a meeting of the Finance & Human Resources Committee who takes responsibility for approving it for filling. The Form 990 is then disseminated to the full Board and posted on the website, www.riverfront.org, for public inspection. The Finance Director will e-file the form on a timely basis. Form 990, Part VI, Section B, Line 12c - All voting Board members obtain a copy of the conflict of interest policy each April and must complete an annual Affirmation of Compliance and Disclosure Statement to evidence compliance with the policy and to fully disclose the material facts about any actual or potential conflicts of interest as described in the policy. The statements shall be reviewed by Riverfront's Chair of the Governance Committee and the President & CEO, who will report any potential conflicts to the Executive Committee. Copies of all the statements are filed with the official corporate records. Form 990, Part VI, Section B, Line 15 - The Executive Committee of the Board meets to discuss the President & CEO's performance annually, based on goals that were set for the previous year, and determines the compensation. The process includes research into compensation for similar nonprofit CEO's in the area to remain competitive in the labor market. The Committee meets with the President & CEO to review performance and set goals for the coming year. The President & CEO is presented with a written evaluation detailing the process that was key to the Committee's deliberations and ultimate decision for setting compensation. Form 990, Part VI, Section C, Line 19 - The public can readily inspect the Form 990 and audited financial statements online at www.riverfront.org. Other governing documents are available upon request.

Schedule O, Statement 1

Form: Form 990 (2018)

Page: 1

**Riverfront Recapture Inc** 

EIN: 06-1045653

Part I, Line 1

# **Activity Or Mission Description**

# Description

parks, programming entertainment and activities for all ages, and coordination of the park maintenance and Ranger services. In 2018, more than 750,000 visitors enjoyed the Riverfront's many offerings.

Schedule O, Statement 2

launch activities, and enforce park rules.

Form: Form 990 (2018)

Page: 2

Description

Riverfront Recapture Inc

EIN: 06-1045653

Part III, Line 4c

### Third Program Service Accomplishments Description

Riverfront manages the parks for the City of Hartford and Town of East Hartford. The municipalities are connected by walkways on the Founders and Charter Oak Bridges. The Riverfront has been a catalyst for economic investment with the development of hotels, a convention center, a science center, and entertainment complex, and housing on adjacent land. Rangers provide hospitality and information, in addition to creating a secure environment for park visitors. Rangers are responsible for opening and closing the parks on a daily basis throughout the year. Between May and October, the busy season for the parks, the Rangers have an increased presence. They provide information and directions to park visitors, assist with parking and boat