Form 990

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545:0047 2017 Open to Public Inspection

<u>A</u>	For the 2017 c	alendar year, or tax year beginning , and ending			
В	Check if applicable:	C Name of organization		D Employe	r identification number
	Address change	Association, Inc.			
	Name change	Doing business as		87-0	516535
\exists	ū	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephon	e number
	Initial return Final return/	PO Box 1804 City or town, state or province, country, and ZIP or foreign postal code		435-	635-1024
	terminated				
	Amended return	St George UT 84771-1804		G Gross rec	eipts\$ 1,649,914
=	Application nameina	F Name and address of principal officer:	H(a) Is this a gro	our rature for a	ubordinates? Yes X No
	Application pending	Christopher Blake	rita) is tills a git	oup reconnici s	
		190 West 350 North	H(b) Are all sub	ordinates incl	uded? Yes No
	. <u>.</u>	Ivins UT 84738	If "No,	attach a list.	(see instructions)
1	Tax-exempt status:	X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527	1		
J	Website: V	irginriverland.org	H(c) Group exe	motion numbe	ır 🕨
K	Form of organization:	X Corporation Trust Association Other ▶ L Y	ear of formation: 1		M State of legal domicite: UT
F	arti Su	Immary			on other of roger controls.
		scribe the organization's mission or most significant activities:			
æ		Virgin River Land Preservation Association, Inc. wo			
걸	and	landowners to preserve southwestern Utah's heritage	TVP MICH	COmmu	iiicies
- E		lands, and quality of life.	or scen	ic vis	Las,
& Governance					
ဇ		s box > if the organization discontinued its operations or disposed of more than 25	% of its net ass	sets.	
≪		of voting members of the governing body (Part VI, line 1a)		3	_7
Activities	4 Number	of independent voting members of the governing body (Part VI, line 1b)		. 4	<u>7</u>
Ξ	5 Total nun	nber of individuals employed in calendar year 2017 (Part V, line 2a)		5	1
Ş	6 Total nun	nber of volunteers (estimate if necessary)		1 . 1	6
-	7a Total unre	elated business revenue from Part VIII, column (C), line 12		7a	0
	b Net unrel	ated business taxable income from Form 990-T, line 34		. 7b	0
			Prior Yea		Current Year
8	8 Contribut	ions and grants (Part VIII, line 1h)		9,723	1,645,261
2	9 Program	service revenue (Part VIII, line 2g)			0
Revenue		nt income (Part VIII, column (A), lines 3, 4, and 7d)		457	1,178
Œ	11 Other rev	enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			1,1,0
	12 Total reve	enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7.	0 100	
			1.	0,180	1,646,439
	13 Glants at	nd similar amounts paid (Part IX, column (A), lines 1–3)			0
	14 Benefits p	paid to or for members (Part IX, column (A), line 4)			0
Expenses	15 Salanes,	other compensation, employee benefits (Part IX, column (A), lines 5–10)	{	8,252	6,422
ĕ		nal fundraising fees (Part IX, column (A), line 11e)			0
Š		nal fundraising fees (Part IX, column (A), line 11e) draising expenses (Part IX, column (D), line 25) ▶ 1,254			o vine con via della convincia di considera
ш		penses (Part IX, column (A), lines 11a-11d, 11f-24e)		9,977	24,678
	18 Total expe	enses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18	3,229	31,100
	19 Revenue	less expenses. Subtract line 18 from line 12	- 8	3,049	1,615,339
Net Assets or Fund Balances			Beginning of Cur	rent Year	End of Year
set a	20 Total ass	ets (Part X, line 16)	3,95	5,038	5,570,365
2 B	21 Total liabi	lities (Part X, line 26)		214	202
žŻ	22 Net asset	s or fund balances. Subtract line 21 from line 20	3,954	1,824	5,570,163
P	ant II Sig	nature Block			
Uı	nder penalties of p	erjury, I declare that I have examined this return, including accompanying schedules and stateme	nts and to the he	est of my kno	owledge and belief it is
tru	ue, correct, and co	implete. Declaration of preparer (other than officer) is based on all information of which preparer h	as any knowledg	9.	Swiedys and belief, it is
		Che Called St		<u> </u>	2/2018
Sig	ın 📗 ੌ	gnature of officer		Date	7200
He		Christopher Blake President	Jame -		
		rpe or print name and title	ienc .		
			T -		
Paid	a ``	preparer's name Preparer's signature	Date	Check	if PTIN
	lacebue.	n P Radmall Stephen P Radman	11/09,	/18 self-emp	
	parer Firm's nan		Fi	rm's EIN ▶	87-0637407
Jse	Only	20 N Main St Ste 402			
	Firm's add		l Pi	hone no.	435-673-6195
vlay	the IRS discuss	s this return with the preparer shown above? (see instructions)			X Yes No
_					

		Land Preservation	87-0516535	Page 2
Part III		Service Accomplishments		
		ntains a response or note to any li	ne in this Part III	
	describe the organization's missi			
The	Virgin River Land	l Preservation Associ	ation, Inc. works	with communities
		eserve southwestern U	tah's heritage of	scenic vistas,
open	lands,and qualit	y of life.		***************************************
2 Did th	e organization undertake any sign	ificant program services during the year w	hich were not listed on the	
prior F	Form 990 or 990-EZ?			Yes X No
If "Yes	s," describe these new services or	Schedule O.		
3 Did th	e organization cease conducting,	or make significant changes in how it cond	lucts, any program	
servic	es?			Yes X No
If "Yes	s,* describe these changes on Sch	nedule O.		_
4 Descr	ibe the organization's program se	vice accomplishments for each of its three	e largest program services, as meas	sured by
ехреп	ises. Section 501(c)(3) and 501(c)	(4) organizations are required to report the	amount of grants and allocations to	o others,
the to	tal expenses, and revenue, if any,	for each program service reported.		
	·	, -		
4a (Code	:) (Expenses \$	18,820 including grants of \$) (Reve	enue \$
Land	Preservation Pro	ogram-Work with priva	te landowners to	preserve public
		of properties through		
		er non-profit conser		
		the conservation val		
~ <u></u>	**************************************		.~~~	**
• • • • • • • • • • • • • • • • • • • •				
• • • • • • • • • • • • • • • • • • • •		•••••		
• • • • • • • • • • • • • • • • • • • •				
· · · · · ·				
4h (Code	\ (Expanses \$	8,417 including grants of \$) /Pov	2010 ¢
40 (COU	ardehin Program-I	Ensure that conservat	ion easements ent	rusted to the
prew	nightion are upho	eld as to their term	and monitored on	an annual hagig
		os with landowners an		
		cements associated wi		
TECO	id-veebing reduit	Lements associated wi	cii casemeires are	compreted.
• • • • • •		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
• • • • • •				
			, , , , , , , , , , , , , , , , , , , ,	
4c (Code	e:) (Expenses \$	including grants of \$) (Revi	enue \$)
	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			.,,.,,
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
			.,	
4d Other	r program services (Describe in So	chedule O.)		
	enses \$	including grants of \$) (Revenue \$)
	program service expenses	27,237		
DAA				Form 990 (2017)

			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	X	ļ
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues,	1		
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
	Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If		1	
_	"Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,		 	
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	X	 - -
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
9	complete Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a	8	-	Х
9	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			ľ
	debt perceptation considers? If "Vec." complete Schodule D. Bort IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted	_ 3	 	
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,		21	
	VII, VIII, IX, or X as applicable.			968 256 1
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"	0000000	20000000	≇ Glethaan
	complete Schedule D, Part VI	11a	x	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c	L	Х
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 167 If "Yes," complete Schedule D, Part IX	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		X
þ	Was the organization included in consolidated, independent audited financial statements for the tax year? If	1		7.
13	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a		X
_	fundraising, business, investment, and program service activities outside the United States, or aggregate			
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	140		
	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			
	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			
	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from garning activities on Part VIII, line 9a?			
	If "Yes," complete Schedule G, Part III	19	<u> </u>	Х

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
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		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated	l		
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	2.40	-	
	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	270		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	zoa		
_	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	ach		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	25b		Λ
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	00		v
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	26		X
	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			W
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,	27		X
20	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			7
			011000003	7.7
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28a		X
	Schedule L, Part IV			3.5
		28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			7.7
20	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	-,,	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		- 1	
01	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		<u>X</u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		ĺ	
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	li		
	or IV, and Part V, line 1	34		_X_
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		<u> X</u>
ь	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	[
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,		•	
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		\neg	
	19? Note. All Form 990 filers are required to complete Schedule O.	38	Х	

CONTRACTOR AND A	990 (2017) Virgin River Land Preservation 87-0516	<u>535</u>				Page
Pa	if V Statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response or note to any line in this Part V	<u>, , , , , , , , , , , , , , , , , , , </u>				. 🗍
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	1			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and					
	reportable gaming (gambling) winnings to prize winners?			10	1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	i i				
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	1			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retuined	ms?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				i mode
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3а	1	Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule	0		3b	1	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authori	ty			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin	ancial				
	account)?			4a		X
ь	If "Yes," enter the name of the foreign country: ▶					10 (3
	See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	Accoun	ts			10000000
	(FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	tion?		5b		X
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e				
	organization solicit any contributions that were not tax deductible as charitable contributions?			. 6a		X
þ	If "Yes," did the organization include with every solicitation an express statement that such contribution	ns or				
	gifts were not tax deductible?		····	. 6b	<u> </u>	
7	Organizations that may receive deductible contributions under section 170(c).			50.50		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for o	goods				
	and services provided to the payor?			. 7a	<u> </u>	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	ıs				
	required to file Form 8282?			7c	2/	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	_7d		555555		
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or	ontract	?		<u> </u>	X
T	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control			7f	_	X
9	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 889	9 as required?	7g	_	—
П	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization			. 7h	ETO (5000)	100000000
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintaine	-		100000000000000000000000000000000000000		Discorage and the second
9	sponsoring organization have excess business holdings at any time during the year?			8	CONTRACT.	100000
a	Sponsoring organizations maintaining donor advised funds.			80068	000000	168888
b	Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	• • • • • • • •		. 9a	├─-	
10	Section 501(c)(7) organizations. Enter:			<u>9b</u>		0.000.00
a	Initiation food and against contributions included on Book VIII. See 4.0	10-1				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a 10b			100000	
11	Section 501(c)(12) organizations. Enter:	100 [0000000		
	Greec income from members or shareholders	امدا			ğunul.	
b	Gross income from other sources (Do not net amounts due or paid to other sources	11a	<u> </u>		MC.15-5	
-	against amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form			12a		F REEFE
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1041?		. 128		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			000000		
а	Is the organization licensed to issue qualified health plans in more than one state?			13a	roxxx000	<u> </u>
	Note. See the instructions for additional information the organization must report on Schedule O.				0000044	
b	Enter the amount of reserves the organization is required to maintain by the states in which			092.1854		
	the organization is licensed to issue qualified health plans	13b				
_	Enter the amount of reconnector hand	45				

14a

14a 14b

87-0516535 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes Νo Enter the number of voting members of the governing body at the end of the tax year 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. Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 6 Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? Each committee with authority to act on behalf of the governing body? bi 8b 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 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) 10a Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Х c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done 12c Did the organization have a written whistleblower policy? 13 X 13 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official 15a **b**: Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ▶ UT 17 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. $|\overline{X}|$ Own website $|\overline{X}|$ Another's website $|\overline{X}|$ Upon request $|\overline{X}|$ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records: Lori Rose 435 E Tabernacle #302

St. George

435-635-1024

UT 84770

Form 990 (2017) Virgin River Land Preservation

87-0516535

Page 7

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for	bo	Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation			
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Christopher Blak										
President	0.00	X		х				٥	_	
(2) Kelly Bringhurst	0.00	^		^	 	+ +			0	0
(-, 100-1-)	0.00									
Trustee	0.00	Х						O	0	0
(3) Dennis Kay						П				
· · · · · · · · · · · · · · · · · · ·	0.00									
Trustee	0.00	X				\sqcup		0	0	0
(4) William McMurrin										
	0.00	۱.,				H			_	_
Trustee (5) Owen Olpin	0.00	X	<u> </u>		_	\vdash		0	<u> </u>	<u> </u>
(a) Owen Oipin	0.00									
Trustee	0.00	x						0	0	0
(6) Kent Peterson	<u> </u>	1						<u> </u>		
, ,	0.00									
Secretary/Treasurer	0.00	Х						0	0	0
(7) John Ibach										
	0.00									
President-Elect	0.00	X						0		0
(8)										
• • • • • • • • • • • • • • • • • • • •	• • • • • • • • • • • • • • • • • • • •									
(9)						 				
(=)										
(10)								-		
(11)							\dashv			
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Name and title New Company Name and title New Company Name and title New Company Name and title New Company Name and title New Company Name and title New Company Name and title New Company Name and title New Company Name and title New Company Name and title New Company Name and title New Company New Compan	Part VII Section A. Officers (A)		1	-, IL			-,	, d	· · · · · · · · · · · · · · · · · · ·	d Employees (continued)	155
Sub-total Total from continuation sheets to Part VII, Section A Total rounder of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from any unrelated organization or individual for services rendered to the organization or greater than \$150,000 of the services rendered to the organization greater than \$150,000 of the services rendered to the organization greater than \$150,000 of the services rendered to the organization or related organization or related organization greater than \$150,000 of the services rendered to the organization greater than \$150,000 of the organization or individual organization greater than \$150,000 of the services rendered to the organization greater than \$150,000 of the services rendered to the organization greater than \$150,000 of the services rendered to the organization greater than \$150,000 of the services rendered to the organization greater than \$150,000 of the services rendered to the organization of the services rendered more than \$150,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization tax year. **Note or of independent contractors (including but not limited to those listed above) who		hours per week	Position (do not check more than box, unless person is bot					an	compensation from the	compensation from related organizations	Estimated amount of
Total from continuation sheets to Part VII, Section A Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person Some B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year. (A) Name and business address Description of services Total number of independent contractors (including but not limited to those listed above) who		related organizations below dotted	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		(W-2/1099-MISC)	from the organization and related organizations
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Name and business address Description of services Compe	Complete this table for your fiv	e highest comp	ensa	ted i	ndep	end	ent c	ontra	actors that received more	than \$100,000 of	
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	Total number of independent c received more than \$100,000 c	ontractors (inclu of compensation	iding fron	but 1 the	not li orga	imite aniza	ed to	thos •	e listed above) who	0	

			nent of Reve t if Schedule (ns a response	or note to any line	in this Part VIII		Γ''
60.00						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated car		1a					Control Comments of the Control Contro
200	þ	Membership o		1b		TOTAL CONTRACTOR CONTR		75 00 00 00 00 0 0 00 0	
ξž	С	Fundraising e		1c			65 190000000000000000000000000000000000		#45600 mm 0000. Thousands
₫₫	d	Related organ		1d					
z.E	е	Government grants	(contributions)	1e		Daniel (1980) (1	00000 x 70000.		
ᅙᇎ	f	All other contribution	ns, gifts, grants,					10000000000000000000000000000000000000	
聲		and similar amounts	s not included above	1f	1,645,261				
달	g	Noncash contribution	ons included in lines 1a-	1f: \$	1,263,200		60 00 01 Jane 00 20 000		120 00 00 00 00 00 00 00 00 00 00 00 00 0
	h	Total. Add line	es 1a–1f			1,645,261	386000000000000000000000000000000000000		400020000000000000000000000000000000000
Program Service Revenue					Busn. Code		## CONTROL OF THE CON		A CONTRACTOR OF THE CONTRACTOR
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Pro	a		es 2a–2f				0577200884f6 phoseocora220	88 70 860 868 867 44 86 77 77 66	
	3		come (including o						
	-	and other simi		,		1,058	1,058		
	4		nvestment of tax	-exempt be	and proceeds		1,030	 .	
	5				bila proceeds P		· · · · · · · · · · · · · · · · · · ·	·	
	٠	noyanics	(i) Real		(ii) Personal				
	6a	Gross rents	(i) Ficei		(II) Fersonal				
	-		 -		.	manuscript of the second of th			
	b	Less: rental exps.			<u> </u>	- 67 98 60 60 GU GY 550 GWANN	Barrer Errannani ili Gili		
	C	Rental inc. or (loss)						\$600,005,05. 190088008888886666	
	d 7a	Gross amount from	me or (loss) (i) Securities	······			(
		sales of assets		FOE	(ii) Other				
		other than inventory	3,	595			His Clark Commence (1990)		and on problems of the part
	D	Less: cost or other	٦	425		2012-2013-2013-2013-2013-2013-2013-2013-	mananan 74440000000000000000000000000000000000		
	_	basis & sales exps.		475 120		00.000000000000000000000000000000000000	F2:38:00:200:00:00:00:00	00000000000000000000000000000000000000	
		Gain or (loss)				100-7 7777		(P3000000000000000000000000000000000000	
			ss)		·····	120	120	8/5; - 0.00 (James 0.000 org. 3888 8888	Seer - 20000000000000000
e l	8a		om fundraising ever	nts			######################################		
ē		(not including \$						/1000000000077/00/0000000000	
E			reported on line 1c).			BECT-binary funds	Transaction (Company)	Books and the second	
5		See Part IV, line		. a					
Other Revenue		Less: direct ex		, b			1880 (31.2 28) (2 - 7.1 <u>2</u> 8) (89) (82)	(69 7722 286888	
-			(loss) from fund		ents ▶	CCC1706000000000000000000000000000000000	1000 CL	zodenka o zowanie od	OONEY THE THE PARTY OF THE PART
	9a		om gaming activities	S.					00000000000000000000000000000000000000
		See Part IV, line		. a				350000009429388886000000	ergjar vocastat nigeter en
		Less: direct ex		. b			773 66 64 Zenten zur 1918		
	C	Net income or	(loss) from gami	ing ac <u>tivitie</u>	es >		7.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3.3		
ļ	10a	Gross sales of	f inventory, less						320800876888320000
		returns and all	owances	. a		**************************************		E 66 (20-2- 490000020000000000000000000000000000000	10. Ta 100031.09400000000000000000000000000000000000
	b	Less: cost of g	goods sold	ь			v 20000003¥55005000 ;11668		
Ĺ	С	Net income or	(loss) from sales	of invento	ory				The state of the s
[Misc	cellaneous Revenue		Busn. Code			8217898888888 32 008 - 459	\$100000 - 4000000 72 00000
	11a					78877			
j	b								"
	C	• • • • • • • • • • • • • • • • • • • •						<u> </u>	
	d	All other reven	iue						
	e	Total. Add line			•			0: (1:5 14-127 06) 65: 85: 1-4-1066 68:	
	12		. See instruction			1,646,439	1,178	0	0
				 , , , , , , , , , , , , , , , , , , 			-, -, 0		

Part IX Statement of Functional Expenses

	Check if Schedule O contains a respon			mproto colamin (m),	X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations			6 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	and domestic governments. See Part IV, line 21			The state of the s	
2	Grants and other assistance to domestic			av 4000000000000000000000000000000000000	
	individuals. See Part IV, line 22			Commence of the commence of th	Page con Company (1996)
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				33300
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	5,917	4,141	888	888
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				1
10	Payroll taxes	505	353	76	76
11	Fees for services (non-employees):			- / 0	. , , ,
a	Management				
b					
	Legal	3,200	2,560	640	
d	Accounting	3,200	2,500	040	70.
e	Lobbying Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g					
9	(A) amount, list line 11g expenses on Schedule O.)	13,889	13,889		
12		1,000	1,000		
13	Office expenses	444	398	6	4.0
14	Office expenses	444	390	- 0	40
15	Information technology				
16	Royalties	1,800	1,260	360	100
17	Occupancy	1,000	1,200	300	180
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings		····		
20					
21	Interest Payments to affiliates				
	Payments to affiliates Depreciation, depletion, and amortization	27		25	
22 23		2,708	2 100	27	
-	Insurance Other expenses. Itemize expenses not covered	4,708	2,166	542	
24	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column		989 (5) 1000 (militari m. 2000) (1000)		20 00 00 44 F. C. O. O. O.
	(A) amount, list line 24e expenses on Schedule O.)	ACCOMMON DESIGNATION OF THE PROPERTY OF THE PR		Concentration Electronic content is a	Lagronong di Bernada Amerika
_	Application Fee	1 260	1 060		
a		1,260	1,260		
b	Dues and subscriptions	350	210		70
C					
d					
e	All other expenses	31 300	25 22		
25	Total functional expenses. Add lines 1 through 24e	31,100	27,237	2,609	1,254
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation. Check here ► if following SOP 98-2 (ASC 958-720)				
DAA				<u> </u>	Form 990 (2017)

				(A)		(B)
1 .				Beginning of year		End of year
1	Cash—non-interest bearing			62,576		42,654
2	Savings and temporary cash investments			239,959		486,787
3	Pledges and grants receivable, net				_ 3	
4	Accounts receivable, net			XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	4	ældin gener westere en een een een ee
5	Loans and other receivables from current and forme	•	tors,			engere en er en grade de d
	trustees, key employees, and highest compensated		Christian Christian Christian			
	Complete Part II of Schedule L			333335 13 18 3000 000 000 000 18 18 2 2 2 3 3 5 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5	5	
6	Loans and other receivables from other disqualified	•	333	168 Cinco 00000 T. 181 (6) CPV		0.00.20.0000
	4958(f)(1)), persons described in section 4958(c)(3)(
	sponsoring organizations of section 501(c)(9) volunt				00000000000000000000000000000000000000	
7	organizations (see instructions). Complete Part II of			6		
7	Notes and loans receivable, net				7	
•					8	
9					9	
IUa	Land, buildings, and equipment: cost or		206 450			
_	other basis. Complete Part VI of Schedule D	10a	206,458 824	205 661		205 624
		[100]		205,661		205,634
11 12	Investments—publicly traded securities			3,552	11	
13	Investments—other securities. See Part IV, line 11				12	
14	Investments—program-related. See Part IV, line 11 Intangible assets				13	
15	Other accets, See Bort IV line 11			2 442 200	14	4 025 200
16	Total assets. Add lines 1 through 15 (must equal lin			3,443,290 3,955,038	15	4,835,290
17	Accounts payable and accrued expenses	le 34)		214	16	5,570,365
18	~				17 18	202
19	Deferred					
20					19 20	
21	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part	IV of Schedule			21	-:
	Loans and other payables to current and former office		·		21	
22	trustees, key employees, highest compensated emp					
	disqualified persons. Complete Part II of Schedule L	• "	99tt	######################################	22	
23	Secured mortgages and notes payable to unrelated			······································	23	
24	Unsecured notes and loans payable to unrelated thir	d parties			24	·····
25	Other liabilities (including federal income tax, payable	es to related thi	rd			
	parties, and other liabilities not included on lines 17-2		· · · · · · · · · · · · · · · · · · ·			
	of Schedule D				25	
26	Total liabilities. Add lines 17 through 25			214	26	202
	Organizations that follow SFAS 117 (ASC 958), ch		X and		en de les	
	complete lines 27 through 29, and lines 33 and 34			Jese Zwiere (7. Joseph		
27	Unrestricted net assets			3,742,858	27	5,239,570
27 28 29	Temporarily restricted net assets			211,966	28	330,593
29				29	<u> </u>	
	Organizations that do not follow SFAS 117 (ASC	re ▶ and	89969-40000007-38-0000		COLORO CONTRACTOR CONT	
	complete lines 30 through 34.			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		
30 31 32	Capital stock or trust principal, or current funds				30	
31	Paid-in or capital surplus, or land, building, or equipn	nent fund	L		31	
32	Retained earnings, endowment, accumulated income	e, or other fund:	s		32	
33				3,954,824	33	5,570,163
34	Total liabilities and net assets/fund balances	,		3,955,038	34	5,570,365

Form **990** (2017)

orm	990 (2017) Virgin River Land Preservation 87-0516535			Pag	ge 12
Pa	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	1,6		439
2	Total expenses (must equal Part IX, column (A), line 25)	2		31,	
3	Revenue less expenses. Subtract line 2 from line 1	3	1,6		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,9		
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	5,5	7n.	163
Pa	rt XII Financial Statements and Reporting			<i>,</i> , , ,	
mm	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990: X Cash Accrual Other		\$1.7500		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			311111111111111111111111111111111111111	
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Х	Debrigas
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis		7,000 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		
b	Were the organization's financial statements audited by an independent accountant?		2b	1000000	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				21
	separate basis, consolidated basis, or both:		00010		
	Separate basis Consolidated basis Both consolidated and separate basis				
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		897969888	386bac a	20000000
Ī	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		х
	If the organization changed either its oversight process or selection process during the tax year, explain in				Λ
	Schedule O.				
32	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				00001.70
ou	the Single Audit Act and OMB Circular A-133?				₩
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		3a		<u>X</u>
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ.

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

Virgin River Land Preservation

Employer identification number

OMB No. 1545-0047

Open to Public Inspection

			Association,	Inc.			87-051	6535				
Pi	irt I	Reas	on for Public Charity	Status (All organizations	must c	omplete	this part.) See instructio	ns.				
The	orga	nization is not	t a private foundation becaus	se it is: (For lines 1 through 12,	check on	y one box	i.)					
1		A church, co	nvention of churches, or ass	sociation of churches described	l in sectio	n 170(b)(1	I)(A)(i).					
2		A school des	scribed in section 170(b)(1)	(A)(ii). (Attach Schedule E (For	m 990 or	9 90-EZ).)						
3		A hospital or	a cooperative hospital servi	ce organization described in se	ection 170)(b)(1)(A)(iii).					
4		A medical re	search organization operate	d in conjunction with a hospital	described	l in sectio	n 170(b)(1)(A)(iii). Enter the h	ospital's name,				
		city, and stat	te:									
5		An organizat	tion operated for the benefit	of a college or university owner	d or opera	ted by a g	overnmental unit described in					
		section 170	(b)(1)(A)(iv). (Complete Part	t II.)								
6	Ш	A federal, sta	ate, or local government or g	overnmental unit described in	section 1	70(b)(1)(A	.)(v).					
7	X		tion that normally receives a section 170(b)(1)(A)(vi). (C	substantial part of its support f complete Part II.)	rom a gov	emmental	unit or from the general public	;				
8		A community	y trust described in section :	170(b)(1)(A)(vi). (Complete Pa	rt II.)							
9				scribed in section 170(b)(1)(A) of agriculture (see instructions)				ge				
10		An organization that normally receives: (1) more than 33 1/3% 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 33 1/3% 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			-	exclusively to test for public sa	•		•					
12		An organizat	ion organized and operated	exclusively for the benefit of, to	perform t	he functio	ns of, or to carry out the purpo					
		Check the bo	ox in lines 12a through 12d t	zations described in section 50 hat describes the type of suppo	orting orga	nization a	nd complete lines 12e, 12f, an	3). d 12g.				
	а			erated, supervised, or controlle wer to regularly appoint or elect				ng				
				omplete Part IV, Sections A		, or the on	colors of trastices of the					
	b			pervised or controlled in conne		its suppor	rted organization(s), by having					
				ting organization vested in the				ed				
		organiza	tion(s). You must complete	Part IV, Sections A and C.								
	C	its suppo	functionally integrated. A sorted organization(s) (see ins	supporting organization operate structions). You must complete	ed in conne e Part IV,	ection with Sections	i, and functionally integrated w A, D, and E.	ith,				
	d	Type III	non-functionally integrated	 A supporting organization op 	erated in d	connection	with its supported organization	n(s)				
		that is no	ot functionally integrated. The	e organization generally must s	atisfy a di	stribution	requirement and an attentiven	ess				
				nust complete Part IV, Section								
	е	functions	ils box if the organization rec illy integrated, or Type III no	eived a written determination fr n-functionally integrated suppor	rom the IH ding organ	IS that it is sization	a Type I, Type II, Type III					
	f		mber of supported organizati					[
	9			ne supported organization(s).								
(i)	Name	e of supported	(ii) EIN	(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of				
	org	anization		(described on lines 1–10	listed in yo	ur governing	support (see	other support (see				
				above (see instructions))		ment?	instructions)	instructions)				
/#>					Yes	No	·					
(A)												
(B)												
(C)												

(D)

(E)

Schedule A (Form 990 or 990-EZ) 2017 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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.)

Sec	tion A. Public Support			<u>, , , , , , , , , , , , , , , , , </u>	de de la complete		
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	85,131	140,875	24,551	9,723	1,645,261	1,905,541
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities furnished by a governmental unit to the organization without charge						
4 5	Total. Add lines 1 through 3 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	85,131	140,875	24,551	9,723	1,645,261	1,905,541
	shown on line 11, column (f)			000000000000000000000000000000000000000	119	981080025080080-7508	1,420,317
<u>6</u>	Public support. Subtract line 5 from line 4. tion B. Total Support			50000000000000000000000000000000000000		000000000000000000000000000000000000000	485,224
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(a) 2017	(f) T-4-1
7	Amounts from line 4	T		: 1		(e) 2017	(f) Total
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	85,131 665	140,875 481	24,551	9,723	1,645,261	1,905,541 3,498
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10			GB 66000 MA00000	-60 (C. L <u>. 1</u> 00 (C. 157)	80.50.50.50.50.61.12	1,909,039
12	Gross receipts from related activities, etc.						1,058
13	First five years. If the Form 990 is for the	-	, second, third, fou	rth, or fifth tax yea	r as a section 501	(c)(3)	
	organization, check this box and stop her			· · · · · · · · · · · · · · · · · · ·	. , <u></u>		<u></u>
	tion C. Computation of Public Su		<u> </u>			·····	
14	Public support percentage for 2017 (line 6		-	ı (f))			25.42 %
15	Public support percentage from 2016 Scho					15	99.62%
16a	33 1/3% support test—2017. If the organ				3 1/3% or more, cl	neck this	. –
1	box and stop here. The organization quali		_	* * * * * * * * * * * * * * * * * * * *			▶ ∟
b	33 1/3% support test—2016. If the organ						▶ 527
17a	this box and stop here. The organization of 10%-facts-and-circumstances test—201	quaimes as a public	cry supported organ	lization		4 4 *-	► <u>X</u>
174	10% or more, and if the organization meet						
	Part VI how the organization meets the "fa						
b	organization 10%-facts-and-circumstances test—201						▶ 🗆
	15 is 10% or more, and if the organization	meets the "facts-ar	nd-circumstances"	test, check this be	ox and stop here .		
	Explain in Part VI how the organization me					blicly	
							🕨 🗌
18	Private foundation. If the organization did						
	instructions				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		▶ 🗍

Schedule A (Form 990 or 990-EZ) 2017

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.)

Sec	tion A. Public Support	quality direct t	THE COSTS HOLDER	50.541, p.5 <u>456</u> 6	ompiete t art i	•/	
	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership				()		<i>Q</i>
	fees received. (Do not include any "unusual grants.")			<u> </u>			 -
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 lines 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						
С	Add lines 7a and 7b		normannochedo:	Daniel Communication of the co		2	
8	Public support. (Subtract line 7c from	nin man co do do secuti		F7980300000000000000000000000000000000000			
200	line 6.) tion B. Total Support					00000000000000000000000000000000000000	
_	idar year (or fiscal year beginning in)	(a) 2012	(b) 0014	(a) 0015	(d) 0010	4-1-0047	
9	Amounts from line 6	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
						-	
l0a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975				_		
С	Add lines 10a and 10b						
1	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
2	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
3	Total support. (Add lines 9, 10c, 11,						
	and 12.)		<u> </u>			<u> </u>	L
4	First five years. If the Form 990 is for the organization, check this box and stop here			•			
Sec	tion C. Computation of Public Su		tage		· · · · · · · · · · · · · · · · · · ·		·····
5	Public support percentage for 2017 (line 8,			un (f))		15	%
6	Public support percentage from 2016 Sche	edule A. Part III. lir	a by line 10, coluin ne 15	"' (<i>')</i> '		16	
	tion D. Computation of Investme	nt Income Pe	rcentage			1 10	/0
7	Investment income percentage for 2017 (li			column (f))	 	17	%
8	Investment income percentage from 2016	Schedule A. Part					%
9a	33 1/3% support tests—2017. If the organ			e 14, and line 15 is	more than 33 1/3		
	17 is not more than 33 1/3%, check this bo						▶□
b	33 1/3% support tests—2016. If the organ						
	line 18 is not more than 33 1/3%, check th						▶ □
						organization	

Schedule A (Form 990 or 990-EZ) 2017 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

- 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.
- 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).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- 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.
- 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.
- Was any supported organization not organized in the United States ("foreign supported organization")? # "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- 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.
- 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)
- 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).
- 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?
- Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 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 (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).
- 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).
- Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- 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.
- 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.
- Was the organization subject to the excess business holdings rules of section 4943 because of section 10a 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
 - 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.)

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		0516535		Page 5
Pa	T IV Supporting Organizations (continued)			
		posenny -	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)	868888		
	below, the governing body of a supported organization?	<u>11a</u>		
Ь	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	11b	<u> </u>	<u> </u>
<u> </u>		11c		
Seci	ion B. Type I Supporting Organizations			T
	Did the diseases to the second subject of th	R2:200	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		Tang da	
	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			
2	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
-	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
	supervised, or controlled the supporting organization.			
Sect	ion C. Type II Supporting Organizations	2	<u> </u>	
	ion of Type is outporting organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		169	NO
•	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	703000		
	the supported organization(s).	1	######################################	88800CTF99
Sect	ion D. All Type III Supporting Organizations		·	<u> </u>
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the	20000		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	š - 3500 300		
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1	71515	***************************************
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			4 700000
	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	o complete III		V101001077
	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			662400000
	supported organizations played in this regard.	3		
Sect	ion E. Type III Functionally-Integrated Supporting Organizations			****
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	tructions).		
а	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.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (s	ee instructions).		
_	Ashirida Task Assured by a district	f		1
	Activities Test. Answer (a) and (b) below.	::::::::::::::::::::::::::::::::::::::	Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify	50.000	ANGOOGO PS	
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined		.0000000000	
ь	that these activities constituted substantially all of its activities.	2a		86666666
	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	A-	. 103/100/100	
3	Parent of Supported Organizations. Answer (a) and (b) below.	2b	050	886,474,086
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
_	trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a	000000000	C 20000000
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja	23106666	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3ь	700000171	r 14-4000000

/3/3/3/3/3/3/3/3/AV	lle A (Form 990 or 990-EZ) 2017 Virgin River Land Preservat			535 r	Page 6
Pai	Type III Non-Functionally Integrated 509(a)(3) Supporting Organic				
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on No	v. 20,	1970 (explain in Part VI).Se	ee	
	Instructions. All other Type III non-functionally integrated supporting organizations mus	st com	plete Sections A through E		
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)	ar
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		"		
co	lection of gross income or for management, conservation, or				
ma	intenance 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		***	
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)	ar
1	Aggregate fair market value of all non-exempt-use assets (see		VO (2011)		
ins	tructions for short tax year or assets held for part of year):			<u> </u>	
	a Average monthly value of securities	1a			
	b Average monthly cash balances	1b			
	c Fair market value of other non-exempt-use assets	1c			
	d Total (add lines 1a, 1b, and 1c)	1d			
	e Discount claimed for blockage or other				
	factors (explain in detail in Part VI):	36456	Arvania (III)		
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,			·	
se	e 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			
Sect	ion C - Distributable Amount			Current Year	
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2	Enter 85% of line 1.	2			
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3			
4	Enter greater of line 2 or line 3.	4	A Control of the Cont		
5	Income tax imposed in prior year	5			
6	Distributable Amount. Subtract line 5 from line 4, unless subject to				
em	ergency temporary reduction (see instructions).	6			
7	Check here if the current year is the organization's first as a non-functionally integrated		I supporting organization (s	ee	
	instructions).		., 5		

C. CARREST	ule A (Form 990 or 990-EZ) 2017 Virgin River Lar		87-0516	535 Page 7
ALL WATER	Type III Non-Functionally Integrated 509(a)(3) Supporting Organiza	tions (continuea)	
Seci	tion D - Distributions		<u> </u>	Current Year
	Amounts paid to supported organizations to accomplish exempt pu		· · · · · · · · · · · · · · · · · · ·	
2	Amounts paid to perform activity that directly furthers exempt purporganizations, in excess of income from activity	oses or supported		
3	Administrative expenses paid to accomplish exempt purposes of si	unnorted organizations		
4	Amounts paid to acquire exempt-use assets	upported organizations		·-···
5	Qualified set-aside amounts (prior IRS approval required)		·	
6	Other distributions (describe in Part VI). See instructions.		· · · · · · · · · · · · · · · · · · ·	
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organizations	nization is responsive		
•	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6		(- , -, -, -	
10	Line 8 amount divided by line 9 amount			
	, , <u>, , , , , , , , , , , , , , , , , </u>	(i)	(ii)	(iii)
	Section E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
	(,		Pre-2017	Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017			
	(reasonable cause required-explain in Part VI). See	in the second se		Andrew Control of the
	instructions.			
3	Excess distributions carryover, if any, to 2017:			
a				
	From 2013			
	From 2014			
	From 2015			
	From 2016			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			\$\$10.85066065065 *****************************
	Applied to 2017 distributable amount			199996 1
	Carryover from 2012 not applied (see instructions)		######################################	098007.73. **********************************
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D. line 7:	7		
	Applied to underdistributions of prior years		60899552222567753997555555 <u>6688</u>	
	Applied to 2017 distributable amount			000000
	Remainder. Subtract lines 4a and 4b from 4.		LECUSE OF USE CONTRACTOR OF THE	soccooce A Del Monte Constitution
<u>_</u>	Remaining underdistributions for years prior to 2017, if			
•	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
	Remaining underdistributions for 2017. Subtract lines 3h		######################################	00000 2 0000000000000000000000000000000
_	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.		73696, 36.30,00027,000688822	
7	Excess distributions carryover to 2018. Add lines 3j			- 14085080888888709 8448888 7
	and 4c.		Transaction (I) Clare Control (I) (I)	
8	Breakdown of line 7:			
	Excess from 2013			emessellessessemmenssessessessessessessessessessessessess
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			0905. ATAMOOOOO 0000. A 12000.

Schedule A (Form	n 990 or 990-EZ) 2017	Virgin	River :	Land E	reservat	cion	87-0516535	Page 8_
Part VI	Supplemental Inf III, line 12; Part IV, B, lines 1 and 2; P	ormation. Pro , Section A, lin art IV, Section line 1; Part V,	ovide the exes 1, 2, 3b, C, line 1; f Section B,	oplanation , 3c, 4b, 4 Part IV, S line 1e; I	ns required by Ic, 5a, 6, 9a, ection D, line Part V, Section	y Part II, line 10 9b, 9c, 11a, 11 s 2 and 3; Part on D, lines 5, 6,	; Part II, line 17a or 1 o, and 11c; Part IV, 5 IV, Section E, lines 1 and 8; and Part V, S	7b; Part Section c. 2a, 2b,
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Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury

Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

Name of the organization **Employer identification number** Virgin River Land Preservation Association, 87-0516535 Inc. Organization type (check one): Filers of: Section: Form 990 or 990-EZ X 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules**

13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II	I.		
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.			
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions <i>exclusively</i> for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received <i>nonexclusively</i> religious, charitable, etc., contributions		•	
totaling \$5,000 or more during the year		\$	

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

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements Complete if the organization answered "Yes" on Form 990,

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information. OMB No. 1545-0047

Open to Public Inspection

Employer identification number Virgin River Land Preservation Association, Inc. 87-0516535 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) |X| Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure X Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b 3,134.00 Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located > 1 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ 30 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year **▶**\$ 1,186 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items, b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1 \$ (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		205,620		205,620
b Buildings				
c Leasehold improvements				
d Equipment		838	824	14
e Other				
otal. Add lines 1a through 1e. (Column (d) m	ust equal Form 990, Part X. colu	mn (B), line 10c.)	.	205 634

Part VII	Investments—Other Securities.			r ago t
	Complete if the organization answered "Yes" on	Form 990, Part IV, I	ine 11b. See Form 990, Part X, line 12.	
	(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 of	derivatives			
(2) Closely-he	eld equity interests			
(3) Other				
(A)				
(D)				
(E)				
(F)				
(G)				
(H)			uniquenocesissiconocesis successiva de la constanta de la cons	UUUU =
	n (b) must equal Form 990, Part X, col. (B) line 12.)	<u></u>		
Part VIII	Investments—Program Related.	F 000 B- + IV 1	. 44 0 5 000 5 14 11 40	
	Complete if the organization answered "Yes" on			
	(a) Description of investment	(b) Book value	(c) Method of valuation:	
(4)			Cost or end-of-year market value	
<u>(1)</u>			<u> </u>	
(2)				
(3)		·		
(4)				
(5)				
<u>(6)</u> (7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 13.) ▶			
Part IX	Other Assets.	CHIL		11111111111111111111111111111111111111
	Complete if the organization answered "Yes" on	Form 990 Part IV II	ine 11d See Form 990 Part X line 15	
	(a) Description	r orm oddy r dittry, r	(b) Book value	,
(1)	Conservation Easements		4,575	
(2)	Escrow Deposits		132	
(3)	Water Rights		127	
(4)				, 0 , 0
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 15.)		 ▶ 4,835,	, 290
Part X	Other Liabilities.		· · · · · · · · · · · · · · · · · · ·	
	Complete if the organization answered "Yes" on	Form 990, Part IV, li	ne 11e or 11f. See Form 990, Part X,	
	line 25.			
1.	(a) Description of liability	(b) Book value		
(1) Federal i	income taxes			
_(2)				
(3)				
_(4)				
(5)				
(6)				
_(7)	- Marie - Mari			
<u>(8)</u>				1930va - S
_(9)				000.6500
Total. (Column	n (b) must equal Form 990, Part X, col. (B) line 25.) ▶			

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

Schedule D (Form 990) 2017 Virgin River Land Preser Part XI Reconciliation of Revenue per Audited Financial S		- 0516535 sue per Return.	Page
Complete if the organization answered "Yes" on Form			
1 Total revenue, gains, and other support per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a Net unrealized gains (losses) on investments	2a	C. C. A common C. Andrews C.	
b Donated services and use of facilities	2b	0.05.00	
c Recoveries of prior year grants	2c	8,000	
d Other (Describe in Part XIII.)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			<u> </u>
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)			
c Add lines 4a and 4b		4c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	2.)	5	
Part XII Reconciliation of Expenses per Audited Financial			
Complete if the organization answered "Yes" on Form			
Total expenses and losses per audited financial statements		1	
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a Donated services and use of facilities	2a		
b Prior year adjustments	2b	200000 2000000 2000000	
c Other losses	2c	C. C	
d Other (Describe in Part XIII.)	2d		
e Add lines 2a through 2d		2e	
3 Subtract line 2e from line 1		3	
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b Other (Describe in Part XIII.)	4b	**************************************	
c Add lines 4a and 4b		4c	
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line	18.)	5	
Par XIII Supplemental Information.			
Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to Part II, Line 5 - Monitoring and Enforce Virgin River Land Preservation Associat	provide any additional inform ement Policy	ation.	
Monitoring, Violations, and Amendment P	olicy		
Part II, Line 9 - Accounting for Conser	vation Easement	- a	
Conservation easements are reported on	the balance she	eet at acquisi	tion
cost when purchased by the association	or at appraised	d value when do	onated.
Donated conservation easements are show	n as revenue in	n the year the	y are
received at their appraised value.			
Part W Line 4 Intended Uses for Tole	rmont Prode	•••••••••••••••••••••••••••••••••••••••	
Part V, Line 4 - Intended Uses for Endo	willent funds	***********	
The funds have been restricted to use f	. 1		

Schedule D (F	om 990)	2017	Virg	in Ri	ver La:	nd Pre	servat	ion	87-05	16535	Page 5
Schedule D (F	Suppl	emen	tal Info	rmation	(continued	d)	•				
										•	
progra	m to	mai	ntain	and	monito	r cert	ain ex	isting	conserv	ation ea	asements
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that h	ave l	peen	entr	usted	to th	e orga	nizati	on.			
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SCHEDULE M (Form 990)

Noncash Contributions

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

Attach to Form 990.

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Go to www.irs.gov/Form990 for the latest information. Virgin River Land Preservation

Employer identification number 87-0516535

	Associati	on,	Inc.		87-05	16535
Pa	irt I Types of Property					
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of det noncash contribu	•
1	Art — Works of art				-	
2	Art — Historical treasures					
3	Art — Fractional interests					
4	Books and publications		o se go con Established			
5	Clothing and household				· · · · · · · · · · · · · · · · · · ·	··· <u> </u>
	goods					
6	Cars and other vehicles					
7	Boats and planes					
8	Intellectual property		<u></u>			
9	Securities — Publicly traded					
10	Securities — Closely held stock					.
11	Securities — Partnership, LLC,					
	or trust interests					
12	Securities — Miscellaneous					
13	Qualified conservation					
	contribution — Historic					
	Structures		<u></u>			
14	Qualified conservation	X	1	1 260 000	Ouglified ann	
15	contribution — Other	 -	<u>.</u>	1,260,000	Qualified app	raisai
16	Real estate — Residential Real estate — Commercial					
17	Real estate — Other				<u>.</u> .	
18	Collectibles					
19	Food inventory					
20	Drugs and medical supplies		***			
21	Taxidermy					
22	Historical artifacts					
23	Scientific specimens					
24	Archeological artifacts					
25	Other ▶ (In-Kind Contrib)	X	1	3,200	Services perf	ormed
26	Other ▶()					
27	Other ►()					
28	Other ►(
29	Number of Forms 8283 received by	_				
	which the organization completed Fo	m 8283,	Part IV, Donee Acknowle	edgement	29	
						Yes No
30a	During the year, did the organization				•	
	28, that it must hold for at least three					
	to be used for exempt purposes for t		notaing period?			30a X
21	If "Yes," describe the arrangement in		actions that requires the re	wious of one popularies		
31	Does the organization have a gift accontributions?			•		
32a	Does the organization hire or use thi	rd nartice	or related organizations	to solicit procees or coll o	oncach	31 X
 4	a a matulia yata wa O		-	•		32a X
b	If "Yes," describe in Part II.				•••••	32a X
33	If the organization didn't report an an	nount in co	olumn (c) for a type of pr	operty for which column (a)) is checked.	
-	describe in Part II.					

Schedule M (Form		<u>qın River</u>	<u>Land Pres</u>	<u>ervation</u>	<u>87-051</u>	.6535	Page 2
	the organization	is reporting in P	art I, column (l	o), the number o	by Part I, lines 30l of contributions, the onal information.	b, 32b, and 33, and vote number of items re	vhether eceived,
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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

OMB No. 1545-0047 2017

Open to Public Inspection

Internal Revenue Service ► Go to www.irs.gov/Form990 for the latest information. Name of the organization Virgin River Land Preservation Employer identification number Association, Inc 87-0516535 Form 990, Part VI, Line 6 - Classes of Members or Stockholders The organization has members. Membership is granted for one year following a membership contribution. Form 990, Part VI, Line 7a - Election of Members and Their Rights Per the organization's bylaws, at the annual meeting of members, the members shall elect persons to fill one-half of the vacancies on the Board of Trustees which come up for election in any year. Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 The projects director assists the accountant in the preparation of Form 990. The board of trustees reviews drafts of the form as it is being prepared, including at least one review in a regular board meeting. The board reviews and votes to approve the final draft of Form 990 before it is submitted.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy Each trustee and officer is required annually to read the Conflict of Interest Policy and sign acknowledgment. Though the policy requires covered persons to declare conflicts, the agenda of meetings includes an agenda item for trustees and officers to declare any foreseen conflicts of interest at the start of the meeting.

Form 990, Part VI, Line 15a - Compensation Process for Top Official Currently, the organization does not have paid management and none of the 7890 11/09/2018 10:58 AM

Schedule O (Form 990 or 990-EZ) (2017) Name of the organization	Page 2 Employer identification number
Virgin River Land Preservation	87-0516535
\$ 13,889 \$	0 \$ 0
• • • • • • • • • • • • • • • • • • • •	
	•••••
	Page 2 of 2

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

Attach to your tax return.

▶ Go to www.irs.gov/Form4562 for instructions and the latest information.

OMB No. 1545-0172

ment 47

Department of the Treasury Internal Revenue Service Name(s) shown on return

Virgin River Land Preservation

Identifying number

Association, Inc. 87-0516535 Business or activity to which this form relates Indirect Depreciation Part **Election To Expense Certain Property Under Section 179** Note: If you have any listed property, complete Part V before you complete Part I. Maximum amount (see instructions) 510,000 1 Total cost of section 179 property placed in service (see instructions) 2 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 2,030,000 Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-4 Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions (a) Description of property 6 (b) Cost (business use only) Listed property. Enter the amount from line 29 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 8 Tentative deduction. Enter the smaller of line 5 or line 8 9 9 Carryover of disallowed deduction from line 13 of your 2016 Form 4562 10 10 11 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 12 Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11 Carryover of disallowed deduction to 2018. Add lines 9 and 10, less line 12 Note: Don't use Part II or Part III below for listed property. Instead, use Part V. Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions.) Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions) Property subject to section 168(f)(1) election 15 Other depreciation (including ACRS) ... Part III MACRS Depreciation (Don't include listed property.) (See instructions.) MACRS deductions for assets placed in service in tax years beginning before 2017 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here Section B—Assets Placed in Service During 2017 Tax Year Using the General Depreciation System (b) Month and year (c) Basis for depreciation (a) Classification of property placed in (business/investment use (e) Convention (f) Method (g) Depreciation deduction period service only-see instructions) 19a 3-year property Ь 5-year property 7-year property d 10-year property e 15-year property 20-year property 25-year property 25 yrs. S/L Residential rental 27.5 yrs. S/L MM property MM 27.5 yrs. S/L MM Nonresidential real S/L 39 yrs. property MM S/L Section C-Assets Placed in Service During 2017 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs. b 12-year S/L 40-year 40 vrs. MM S/L Summary (See instructions.) Listed property. Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter

here and on the appropriate lines of your return. Partnerships and S corporations—see instructions

For assets shown above and placed in service during the current year, enter the

23