Form 990

Return of Organization Exempt From Income Tax

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

2019 Open to Public

OMB No. 1545-0047

v. January 2020) artment of the Treas	Do not enter social security numbers on this form as it may Go to www.irs.gov/Form990 for instructions and the lates	at information.		Inspection
mal Revenue Service			D. Employer id	entification number
	calendar year, or tax year beginning , and ending C Name of organization		D Employer Id	enuncation number
Check if applicable:	SAVANNAH RIVERKEEPER, INC		58-26	20660
Address change	Daing hypinocs 3s	I Down favilta	E Telephone n	
Name change	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	706-8	26-8991
nitial return	P O BOX 60			
Final return/	City or town, state or province, country, and ZIP or foreign postal code		G Gross receip	ts \$ 1,207,369
erminated	AUGUSTA GA 30903			
Amended return	F Name and address of principal officer:	H(a) Is this a g	roup return for sub	ordinates:
Application pending		H(b) Are all su	bordinates include	ed? Yes No
	P.O. BOX 60 AUGUSTA GA 30903	If "No	o," attach a list. (se	ee instructions)
	AUGUSTA			
Tax-exempt statu	s: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527	H/c/ Group ex	cemption number	
Website:	www.savannahriverkeeper.org	L Year of formation:	2001	M State of legal domicile: GA
Form of organizati	ion: X Corporation Trust Association Other	L Tear of formation		
30000000000000000000000000000000000000				
1 Briefly	Summary describe the organization's mission or most significant activities: E SAVANNAH RIVERKEEPER'S (SRK) MISSION IS TO PROTECT E SAVANNAH RIVERKEEPER'S (SRK) MISSION IS TO PROTECT AND THE MATTERSHED AND THE MATTERSHE	T THE WATER	ROUALIT	Y OF
3 Numb	LIGHTENED STEWARDSHIP OF THIS office this box ▶ if the organization discontinued its operations or disposed of more than er of voting members of the governing body (Part VI, line 1a) er of independent voting members of the governing body (Part VI, line 1b)		4	7 7 7
5 Total	without of individuals employed in calendar year 2019 (Part V, line 2a)			600
6 Total	the of voluntoers (estimate if necessary)			
	from Part VIII column (C), line 12			
b Net u	nrelated business revertible from Fart VIII, establish (2) nrelated business taxable income from Form 990-T, line 39	Prior	Year	Current Year
	ibutions and grants (Part VIII, line 1h)	2	37,232	698,186
8 Contr	ram service revenue (Part VIII, line III)		6,980	18,97
9 Progr	tment income (Part VIII, column (A), lines 3, 4, and 7d)		6,415	18,613
9 Progr	r revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		12,326	
11 Otne	revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2	262,953	755,11
40 0	to and similar amounts paid (Part IX, column (A), lines 1-3)		0	
44 0	Standard to or for members (Part IX, column (A), line 4)		234,265	254,21
	ther componention, employee benefits (Part IX, column (A), lines 5-10)		0	
15 Salar	essional fundraising fees (Part IX, column (A), line 11e) I fundraising expenses (Part IX, column (D), line 25) ▶ 32,956			
b Total	I fundraising expenses (Part IX, column (D), line 25) ▶ 32,956		121,783	449,39
n	(Port IV, column (A), lines 11a-11d, 11f-24e)		356,048	
18 Tota	l expenses. Add lines 13–17 (must equal Part IX, column (A), line 23)		-93,095	
19 Reve	enue less expenses. Subtract line 18 from line 12	Beginning o	of Current Year	End of Year
ces			641,616	40 44
20 Tota	al assets (Part X, line 16)	discount of the same of the sa	10,169	
Net Passets of Agents of A	al liabilities (Part X, line 26) assets or fund balances. Subtract line 21 from line 20		631,447	697,21
호교 22 Net	assets or fund balances. Subtract line 21 from time 25			
Part II	Signature Block es of perjury, I declare that I have examined this return, including accompanying schedules and state es of perjury. Perfection of opporer (other than officer) is based on all information of which prepar	ements, and to the b	est of my knowl	ledge and belief, it is
Under penaltic	es of perjury, I declare that I have examined this return, including accompanying schedules and state and complete. Declaration of preparer (other than officer) is based on all information of which prepared to the complete of the complet	rer nas any knowledg	je.	
ado, correct, c			Dai	te
Sign	Signature of officer	ADD CUAT		
Sign Here	CHUCK HARDIN MILE BO	ARD CHAIL	<u> </u>	
licie	Type or print name and title	Da	ite Che	ck if PTIN
P	rint/Type preparer's name Preparer's signature		5/18/20 self-	
	1/0 /		Firm's EIN	00 000044
_	Canady Hodges, Caines & Richard	гу, шиг	FRITIS EIN F	
Use Only	5302 Frederick St Ste 200		Phone no.	912-354-29

31405

Savannah, GA

X Yes

4d Other program services (Describe on Schedule O.)

including grants of \$ (Expenses \$ 653,695) (Revenue \$

X

X

Form 990 (2019

20a

20b

If "Yes," complete Schedule G, Part III

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

Par	t IV Checklist of Required Schedules (continued)	Iv	es N	No
			63 1	
2	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on	22		X
	Part IX column (A), line 2? If "Yes," complete Schedule I, Parts I and III			
3	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	23		X
	employees? If "Yes," complete Schedule J			
4a	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	24a		X
	through 24d and complete Schedule K. If "No," go to line 25a	24b	197	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?			
	Did the organization invoctary processing the process of the organization maintain an escrow account other than a refunding escrow at any time during the year	24c		
	to defease any tax-exempt bonds?	24d		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?			
.5a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		X
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	200	THE	
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?	25b		X
	If "Ves." complete Schedule I. Part I	200		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	26		x
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	20		
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee creator or founder, substantial contributor or employee thereof, a grant selection committee			
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these	27		X
	persons? If "Yes " complete Schedule L. Part III			
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part			
	Winetructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	28a		X
	"Ves." complete Schedule I. Part IV	28b		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	200		-
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	28c		X
	"Voc." complete Schedule I Part IV	29		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	25		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	30		X
	and a security of the second second security of the second second security of the second sec	31		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	. 31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"	00		x
-	complete Schedule N. Part II	. 32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			x
33	cogtions 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	. 33		Λ
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			v
J-T	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		
b	If "Vos" 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-character	00		x
50	related organization? If "Ves." complete Schedule R. Part V, line 2	. 36		A
37	Did the experient conduct more than 5% of its activities through an entity that is not a related organization			X
31	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Scriedule R, Part VI	. 37		Δ
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and		~	
30	103 Note: All Form 990 filers are required to complete Schedule O.	38	X	
	Otatamente Begarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		T	
-			Yes	No
4-	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
12	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable			
t	Did the organization comply with backup withholding rules for reportable payments to vendors and			X
,	reportable gaming (gambling) winnings to prize winners?	1c	00	_

	V Statements Regarding Other IRS Filings and Tax Compliance (continu	ied)					
art	Statements Regarding Other IRS Filings and Tax Compilance (commis)	res	No
	Transmittal of Wage and Tax	1	1				
E	nter the number of employees reported on Form W-3, Transmittal of Wage and Tax	2a	7				
St	tatements, filed for the calendar year ending with or within the year covered by this return at least one is reported on line 2a, did the organization file all required federal employment tax returns?	?		2	b	X	
If	at least one is reported on line 2a, did the organization line an required to e-file (see instructions)						
N	ote: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			3	a		X
D				3	b		
If	"Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	hority					
Α	t any time during the calendar year, did the organization have an interest in, or a signature or other autit	coun	t)?	4	a		X
а	financial account in a foreign country (such as a bank account, securities account, or other financial ac	occuii					
If	"Yes," enter the name of the foreign country	counts	(FBAR).				
S	see instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Acc	Journe	(1 5,)		ia		X
٧					b		X
	old any taxable party notify the organization that it was or is a party to a pronibited tax sheller transactio				ic		
. 16	"Yes" to line 5a or 5b, did the organization file Form 8886-T?						
Г	loes the organization have annual gross receipts that are normally greater than \$100,000, and did the				6a		X
112	representation policit any contributions that were not tax deductible as charitable contributions?				1		
11	f "Yes," did the organization include with every solicitation an express statement that such contributions	sor			6b		
	niffs were not tax deductible?						
,	Overanizations that may receive deductible contributions under section 170(c).						
1 [old the organization receive a payment in excess of \$75 made partly as a contribution and partly for god	ods			70	X	*****
	1 in-a provided to the payor?				7a 7b	X	
	f "Vee." did the organization notify the donor of the value of the goods or services provided?				, D	21	
: [Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				7-		2
' '	required to file Form 8282?				7c		-
	15 to disease the number of Forms 8282 filed during the year	10	u		7-		2
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit con	ntract?	?		7e		1
	Divide a sociation during the year, pay premiums, directly or indirectly, on a personal benefit contract	A!			7f		1
		11 000	9 as require	^{j?}	7g		3
	is the experience received a contribution of cars, boats, airplanes, or other vehicles, did the digalization	OII IIIC	aronni)8-C?	7h		-
	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	d by th	ne		•		
	sponsoring organization have excess business holdings at any time during the year?				8		
	Sponsoring organizations maintaining donor advised funds.				•	*******	
	Did the exposing organization make any taxable distributions under section 4966?				9a		
a	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?				9b		
	Section 501(c)(7) organizations. Enter:	1	1				
'	Initiation fees and capital contributions included on Part VIII, line 12	10	0a				
a	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1	0b				
b	Gross receipts, included on rollingso, rate vin, and appropriate one Enter.						
	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders	1	1a				
a	Gross income from other sources (Do not net amounts due or paid to other sources						
b	against amounts due or received from them.)	1	1b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	n 1041	1?		12a		
2a	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1	2b				
b	If "Yes," enter the amount of tax-exempt interest received of assurance issuers.						
3	Section 501(c)(29) qualified nonprofit health insurance issuers.				13a		
a							
	Note: See the instructions for additional information the organization must report on Schedule O.						
b	Enter the amount of reserves the organization is required to maintain by the states in which	1	13b				
	the organization is licensed to issue qualified health plans		13c				
С	Enter the amount of reserves on hand		1 5 1 6		14a		
4a	Did the organization receive any payments for indoor tanning services during the tax year?	le O			14b		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul	ration	or				
5	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune				15		
	excess parachute payment(s) during the year?						
	If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment	incor	me?		16		

Form 990 (2019) SAVANNAH RIVERKEEPER, INC Part VI

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. X Check if Schedule O contains a response or note to any line in this Part VI

on A. Governing Body and Management		75			Yes	No
the state of the governing body at the end of the tax year	1a		7			
Inter the number of voting members of the governing body at the end of the tax year						
f there are material differences in voting rights among members of the governing body, or						
committee, explain on Schedule U.	1b		7			
Enter the number of voting members included on line 1a, above, who are independent						
Did any officer, director, trustee, or key employee have a family relationship of a business relationship was				2	X	
any other officer, director, trustee, or key employee?						
Did the organization delegate control over management duties customarily performed by or drider the direct				3		X
supervision of officers, directors, trustees, or key employees to a management company of other person.				4		X
Did the organization make any significant changes to its governing documents since the prior 1 of the organization's assets?		• • • •		5		X
Did the organization become aware during the year of a significant diversion of the organization's assets:		• • •		6		X
Did the organization have members or stockholders?						
Did the organization have members, stockholders, or other persons who had the power to elect or appoint				7a		X
one or more members of the governing body?						
Are any governance decisions of the organization reserved to (or subject to approval by) members,				7b		X
u u u u u anima hodu?	er by the	foll	owing:			
Did the organization contemporaneously document the meetings held or written actions undertaken during the year	a. by aid	.01		8a	X	
The governing body?				04	X	
Each committee with authority to act on behalf of the governing body?		• • • •				
to the same director trustee or key employee listed in Part VII, Section A, who cannot be reached at				9		X
	ternal F	Re	venue (
tion B. Policies (This Section B requests information about policies not required by the m	torriari				Yes	No
					X	
Did the organization have local chapters, branches, or affiliates?						
If "Yes," did the organization have written policies and procedures governing the activities of such chapters,				10b	X	
affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes:	the form	m?		11a		
Has the organization provided a complete copy of this Form 990 to all members of its governing body before mining	g and ronn					
Describe in Schedule O the process, if any, used by the organization to review this Form 990.				12a		X
	o to conf	flict	e?			
Were officers, directors, or trustees, and key employees required to disclose annually interests that could give he	ie to com					
Did the organization regularly and consistently monitor and enforce compliance with the policy: If it is,				120		
describe in Schedule O how this was done		• • • •				X
Did the organization have a written whistleblower policy?						X
Did the organization have a written document retention and destruction policy?						
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 decisions				15:		3
The organization's CEO, Executive Director, or top management official						2
Other officers or key employees of the organization						
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).						
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement				16	3	2
the attackle option during the year?						
15 "Nos." did the organization follow a written policy or procedure requiring the organization to evaluate its						
participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the				16	h	
organization's exempt status with respect to such arrangements?				110		
etion C. Disclosure				18 3.5	1911	
GA	Caption	 504	(6)			
Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-1	Section 5	JU 1	(0)			
(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.						
V Another's website X Unon request Other (explain on Scriedule O)		lie.	and			
Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of in	erest poi	псу	anu			
State the name, address, and telephone number of the person who possesses the organization's books and re-	Joius P					
328 RIVERERONI DRIVE				706-8	326-	-89
	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? But the organization contemporaneously document the meetings held or written actions undertaken during the year officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailling address? If 'Yes,' provide the names and addresses on Schedule O. Bid the organization have local chapters, branches, or affiliates? 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? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing 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 Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris Did the organization have a written while organization or the following persons include a review	The number of voting members of the governing body at the end of the tax year (there are material differences in voting rights among members of the governing body, or the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 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? Did the organization organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? It was any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization shalling address? If "Yes," provide the names and addresses on Schedule O. 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 brave their operations are consistent with the organization for sevent purposes? Has the organization have a written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with	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 the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on 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 have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management company or other person? Did the organization delegate control over management dutiles customarily performed by or under the direct suspervision of officers, directors, trustees, or key employees to a management company or other person? Did the organization become aware during the year of a significent diversion of the organization's assets? Did the organization become aware during the year of a significent diversion of the organization's assets? Did the organization have members or stockholders? Did the organization have members or stockholders? Did the organization have members or the overning body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Pach committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body personal purposes? Did the organization and purposes of the organization have written policies and procedures governing the activities of such chapters, the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches the ensure their operations are consistent w	there are material differences in voting fights among members of the governing body, or the governing body delegated broad suthority to an executive committee or similar committee, explain on Schedule O. The tent in umber of voting members included on line 1a, above, who are independent 1b 7 1ch you are fellowed. The state of the committee or similar 1ch any other officer, director, trustee, or key employee have a family relationship or a business relationship with 1ch any other officer, director, trustee, or key employee have a family relationship or a business relationship with 1ch any other officer, director, trustee, or key employee have a family relationship or a business relationship with 1ch any other officer, director, trustee, or key employees to a management company or other person? 1ch the organization delegate control over management duties customarily performed by or under the direct 1ch supervision of officers, directors, trustees, or key employees to a management company or other person? 1ch the organization have members or stockholders? 1ch the organization have members or stockholders, or other persons who had the power to elect or appoint 1ch one or more members of the governing body? 1ch the organization have members, stockholders, or other persons who had the power to elect or appoint 1ch one or more members of the governing body? 1ch the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 1ch governing body? 1ch the organization on behalf of the governing body? 1ch the organization some one of the powerning body? 1ch the organization independent of the governing body? 1ch the organization independent persons in the powerning body? 1ch the organization mailing address? If 'Yes,' provide the names and addresses on Schedule O to 1ch the organization have written policies and procedures governing the activities of such chapters, 1ch yes, 'did the organization have written policie	there are material differences in voting riephts among members of the governing body. or five governing body of degreate the road authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent	there are material differences in voting rights among members of the governing body, or of the governing body advantage to the governing body. or of the governing body delegated traves advanting to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1s, above, who are independent to the properties of the governing body delegated traves advanting to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1s, above, who are independent of the properties of the committee or similar committee, explain on Schedule O. But any other officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employees to a management company or other person? It is the organization have several directors, trustees, or key employees to a management company or other person? It is the organization have members or sockchioders? It is the organization have been the medicing had or written actions undertaken during the year by the following: Back any governing body? It is the organization one members of the governing body? It is there any officer, director, trustee, or key employee listed in Part IVI. Section A, who cannot be reached at the organization normal members of the governing body because the members of the governing body becau

AUGUSTA

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. See instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee. (F) Average Position Reportable Reportable Estimated amount Name and title compensation compensation of other (do not check more than one hours from related box, unless person is both an from the compensation per week organizations officer and a director/trustee) organization from the (list any (W-2/1099-MISC) (W-2/1099-MISC) organization and hours for Individual nstitutional related organizations related employee organizations helow compensated trustee dotted line) trustee (1) TONYA BONITATIBUS 40.00 0 0.00 X 48,354 0 EXECUTIVE DIRECTOR (2) FRANK CARL 1.00 0 0.00 X 0 0 BOARD MEMBER (3) CHUCK HARDIN 0.50 0.00 X X 0 0 0 BOARD CHAIR (4) CHAD KIMBRELL 0.50 0 BOARD MEMBER 0.00 X 0 0 (5) EMILY KURILLA 0.50 0 0.00 X 0 0 BOARD MEMBER (6) MARTIN SHELTON 1.00 X X 0 0 0 0.00 (7) TOM WIEDMEIR 1.00 0.00 X X 0 0 0 SECRETARY (8) SUZIE WILLIAMS 0.50 0.00 X 0 0 0 BOARD MEMEBER (10)(11)

orm 990 (2019) SAVANNAH	RIVERKEE	PE.	K,	11	anlo	Vees	an	d Highest Compensated E		i ago e
Part VII Section A. Officers (A) Name and title	(B) Average hours per week	(do	o not c	Posi theck i	ition more t	than or	ne an	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	(list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	organization and related organizations
							•	48,354	1	
total (add lines 1b and 1c) Total number of individuals (i	eets to Part VII,	Sect	ion /	Δ			* *	48,354		
reportable compensation from 3 Did the organization list any factorial employee on line 1a? If "Yes 4 For any individual listed on line organization and related or line for services rendered to the section B. Independent Contract	n the organization of the organization of the organization of the sum anizations greater of the organization? If "Yes a conganization? If "Yes a conganization."	ector dule of re	r, trus	stee, such able	key n ind com 0? li	emp ividua pensa f "Yes	loye	e, or highest compensated and other compensation fromplete Schedule J for such	om the 7 ndividual	3 X 4 X 5 X
Complete this table for your compensation from the orga	five highest comp nization. Report o	ensa	ated i	nder	end for th	ent c ne ca	ontra	al year enumy with or with	n the organization's tax yea (B) (B)	r. (C) Compensation
Name :	(A) and business address							Desc	reports of our code	
Total number of independer	nt contractors (inc	ludin	ig bu	t not	limit	ted to	tho	se listed above) who	0	
received more than \$100,00	o or compensation	×11 11C	ann U	.0 01	94111					Form 990 (201

							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	Federated compai	ane		1a						
1a Federated campaigns b Membership dues				1b	18,	135				
				1c						
	Fundraising events Related organization			1d						
	-			1e						
	Government grants (conti			10						
	All other contributions, gif and similar amounts not in	ncluded a	above	1f 680,051						
g	Noncash contributions inc	cluded in		1g \$			698,186			
h	Total. Add lines 1	a-1f .				>	030,100			
					Busines	s Code				
2a										
b										
С										
d										
е										
f	All other program	servic	e revenue							
g	Total. Add lines 2	2a-2f .			,					
3	Investment incom						5,647	5,647		
	other similar amo	unts)					3,047			
4 Income from investment of tax-exemp				ond pro	ceeds					
5	Royalties									
	(i) Rea		(i) Real	(ii) Personal						
6a	Gross rents	6a								
b	Less: rental expenses	6b								
c	Rental inc. or (loss)	6c								
d Net rental income or (loss)										
7a	7a Gross amount from (i) Securities			(ii) Other						
	sales of assets other than inventory 7a 443		638							
b	Less: cost or other									
	basis and sales exps.	7b	430							
c	Gain or (loss)	7c	13	,324			13,324	13,32	1	
	Net gain or (loss						13,324	13,32		
8a	Gross income from	fundra	ising events							
	(not including \$									
	of contributions rep	orted o	n line 1c).							
	See Part IV, line 18			8a		,019				
b	Less: direct expe	enses		8b		,285	14 72/	1		
c	Net income or (I	oss) fr	om fundraising e	vents		. •	14,734			
98	a Gross income from	n gamin	g activities.							
	See Part IV, line 1	9		9a						
t	Less: direct exp	enses		9b						
	Net income or (I			ities		. •				
10	a Gross sales of i	nvento	ry, less							
	returns and allo			10a						
1	Less: cost of go	ods so	old	10b						
	c Net income or (loss) fr	rom sales of inve	entory		. •				
					Busi	ness Code	2 07	9 3,87	9	
11	a Other Reve	nue			5	24298	3,87	3,67		
2										
11	d All other revenue e Total. Add lines	ле				•	3,87	0		

Statement of Functional Expenses Part IX

Sect	ion 501(c)(3) and 501(c)(4) organizations must comp			e column (A).	
Do .	Check if Schedule O contains a respons	e or note to any line in this i	Part IX (B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations			3	
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	228,343	218,228	6,168	3,947
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	4,483	4,483		
9	Other employee benefits				
10	Payroll taxes	21,393	20,704	689	
11	Fees for services (nonemployees):				
a	Management				
b	Legal				
С	Accounting				
d					
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A) amount, list line 11g expenses on Schedule O.)	2,650		2,650	
12	Advertising and promotion	34,982	15,699		19,283
13	Office expenses	6,001		110	5,891
14	Information technology	3,065	3,065		
15	Royalties				
16	Occupancy	2,381		2,381	
17	Travel	1,615	1,615		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,523	2,523		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	4,227	4,227	2 700	
23	Insurance	3,789		3,789	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.) RESTORATION BELOW AUGUSTA	243,720	243,720		
a	* * * * * * * * * * * * * * * * * * * *	94,578	94,578		
b	PIE GRANT EXPENSES OTHER EXPENSES	24,615	19,784	996	3,835
C	CAMP EXPENSES	10,528	10,528	330	3,033
d	*	14,716	14,541	175	
	All other expenses	703,609	653,695	16,958	32,956
25	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here	703,009	333,033	10,930	32,930
	following SOP 98-2 (ASC 958-720)				- 000

SAVANNAH RIVERKEEPER,

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 295,081 94,494 Cash—non-interest-bearing 2 Savings and temporary cash investments 2 3 Pledges and grants receivable, net 3 15,700 100,055 4 4 Accounts receivable, net Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 Loans and other receivables from other disqualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 7 Notes and loans receivable, net 8 Inventories for sale or use 2,265 2,412 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 226,160 basis. Complete Part VI of Schedule D 10a 36,502 193,682 189,658 b Less: accumulated depreciation 10b 206,953 250,973 Investments—publicly traded securities Investments—other securities. See Part IV, line 11 12 12 13 13 Investments—program-related. See Part IV, line 11 14 Intangible assets 14 15 15 Other assets. See Part IV, line 11 709,657 641,616 16 Total assets. Add lines 1 through 15 (must equal line 33) 16 10,426 10,169 Accounts payable and accrued expenses 17 17 18 18 Grants payable 19 19 Deferred revenue 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to any current or former officer, director, iabilities trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 2,017 25 12,443 10,169 Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here > X Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 417,536 361,929 Net assets without donor restrictions 269,518 279,678 Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 697,214 631,447 32 Total net assets or fund balances 709,657 641,616 33 Total liabilities and net assets/fund balances

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	990 (2019) SAVANNAH RIVERKEEPER, INC 58-2630660			Pa	ge 12
Pa	rt XI Reconciliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				X
	Total revenue (must equal Part VIII, column (A), line 12)		7	35.	770
2	Total expenses (must equal Part IX, column (A), line 25)				609
3	Revenue less expenses. Subtract line 2 from line 1				161
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			447
5	Net unrealized gains (losses) on investments				339
6	Donated services and use of facilities				
7	Investment expenses				
8	Prior period adjustments			1,	267
9	Other changes in net assets or fund balances (explain on Schedule O)				13.7
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	32, column (B))	10	6	97,	214
Pa	rt XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII				
1 2a	Accounting method used to prepare the Form 990: CashX Accrual Other Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. Were the organization's financial statements compiled or reviewed by an independent accountant? 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:		2a		х
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:				
	X 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 of				
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

▶ Attach to Form 990 or Form 990-EZ.

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

Inspection

Employer identification number

ame	oi uie	organization	SAVANNAH RIVI	ERKEEPER, INC			58-2630	0660					
Pa	rt I	Reaso		Status (All organizations	must co	nplete th	is part.) See instructions						
				it is: (For lines 1 through 12, ch									
1		A church, con	vention of churches, or associ	ciation of churches described in	section 1	70(b)(1)(A)	(i).						
2	П	A school desc	ribed in section 170(b)(1)(A	(ii). (Attach Schedule E (Form	990 or 990	-EZ).)							
3	П	A hospital or a	cooperative hospital service	e organization described in sec	tion 170(b)	(1)(A)(iii).							
4		A medical rese	earch organization operated i	in conjunction with a hospital d	escribed in	section 17	0(b)(1)(A)(iii). Enter the hospi	tal's name,					
		city, and state	:				tal unit described in						
5	Ш	37		a college or university owned of	or operated	by a govern	imental unit described in						
		section 170(b)(1)(A)(iv). (Complete Part I	l.)	- tion 170/	b)(4)(A)(v)							
6	-	A federal, stat	e, or local government or gov	vernmental unit described in se	TO COVER	montal unit	or from the general nublic						
7	X	described in section 170(b)(1)(A)(vi). (Complete Part II.)											
8		A community	trust described in section 17	70(b)(1)(A)(vi). (Complete Part	II.)								
9		An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:											
10		An organization that normally receives: (1) more than 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	П	An organization	on organized and operated ex	xclusively to test for public safe	ty. See sec	tion 509(a)(4).						
12	П	An organizatio	on organized and operated ex	xclusively for the benefit of, to p	perform the	functions o	f, or to carry out the purposes						
		of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.											
	a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the												
		supporting	g organization. You must co	omplete Part IV, Sections A a	nd B.								
	b	Type II. A	supporting organization sup	pervised or controlled in connect	ction with its	supported	organization(s), by having						
	Ī	control or	management of the supporti	ing organization vested in the s	same persor	ns that cont	rol or manage the supported						
		organizat	ion(s). You must complete	Part IV, Sections A and C.									
	С	its suppor	rted organization(s) (see inst	upporting organization operate ructions). You must complete	Part IV, Se	ections A,	D, and E.						
	d	that is no	t functionally integrated. The	I. A supporting organization operanization generally must sa	itisfy a distri	bution requ	irement and an attentiveness						
	е	Check thi	is box if the organization rece	nust complete Part IV, Section ived a written determination from	om the IRS	that it is a 7	Type I, Type II, Type III						
				-functionally integrated support	ung organiza	auom.							
	f		nber of supported organization ollowing information about the										
	g			(iii) Type of organization	(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of					
		ne of supported rganization	(ii) EIN	(described on lines 1–10	listed in yo	ur governing	support (see	other support (see					
				above (see instructions))	-	iment?	instructions)	instructions)					
					Yes	No							
(A)													
(B)													
(C)													
(D)													
(E)													
,-,													
Tot								A (F 000 4-000 F7) 0044					
For	Pane	nwork Reductio	n Act Notice, see the Instruction	ons for Form 990 or 990-EZ.			Schedule	A (Form 990 or 990-EZ) 2019					

Page 2

Schedule A (Form 990 or 990-EZ) 2019	SAVANNAH	RIVERKEEPER,	INC	58-2630660
Part II Support Schedule (Complete only if yo	for Organization	ons Described in Se	ctions 1	70(b)(1)(A)(iv) and 170(b)(1)(A)(vi) or if the organization failed to qualify under low, please complete Part III.)

	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
Calen	dar year (or fiscal year beginning iii)	(a) 2015	(b) 2010	(6) 2017	(u) 2010	(6) 2015	(i) rotal
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	644,244	165,282	181,468	237,232	680,589	1,908,815
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					24,000	24,000
4	Total. Add lines 1 through 3	644,244	165,282	181,468	237,232	704,589	1,932,815
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						507.100
	shown on line 11, column (f)						587,100
6	Public support. Subtract line 5 from line 4						1,345,715
	tion B. Total Support	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2015	(b) 2016			704,589	1,932,815
7	Amounts from line 4	644,244	165,282	181,468	237,232	704,589	1,932,613
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources		4,909	29,091	5,301	5,647	44,948
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.)	34,033	3,738	1,610	3,963	3,879	47,223
11	Total support. Add lines 7 through 10						2,024,986
12	Gross receipts from related activities, etc. (s	see instructions)				12	65,545
13	First five years. If the Form 990 is for the o)	
	organization, check this box and stop here						
Sec	tion C. Computation of Public Su	pport Percenta					
14	Public support percentage for 2019 (line 6,)		14	66.46%
15	Public support percentage from 2018 Scheo			,		15	91.68%
16a	33 1/3% support test—2019. If the organiz					c this	
100	box and stop here . The organization qualifi						▶ X
b	33 1/3% support test—2018. If the organiz				33 1/3% or more.	check	
-	this box and stop here . The organization qu						>
17a	10%-facts-and-circumstances test—201						
	10% or more, and if the organization meets						
	Part VI how the organization meets the "faci						
	organization						>
b	10%-facts-and-circumstances test—201	8. If the organization	did not check a bo	x on line 13, 16a,	16b, or 17a, and lin	е	
	15 is 10% or more, and if the organization n						
	Explain in Part VI how the organization mee	ets the "facts-and-cir	cumstances" test. T	he organization qu	ualifies as a publicly	,	
							>
18	Private foundation. If the organization did	not check a box on	ine 13, 16a, 16b, 1	7a, or 17b, check t	this box and see		
	instructions						>
						Schedule A (Form 99	

Sched		VANNAH KIV				-2630660	Page 3
Pa	rt III Support Schedule for C (Complete only if you che If the organization fails to	ecked the box o	n line 10 of Par	t I or if the orga	anization failed	to qualify under F	art II.
Sec	tion A. Public Support	quality dilucit	ne teste noted s	ciott, picaco c	omproto i di titi		
	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
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						
8	Public support. (Subtract line 7c from line 6.)						
	tion B. Total Support						
Caler	dar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)				ii 504/-)	(0)	
14	First five years. If the Form 990 is for the organization, check this box and stop her	re					>
Sec	tion C. Computation of Public S						
15	Public support percentage for 2019 (line 8						%
16	Public support percentage from 2018 Sch						%
	tion D. Computation of Investm			column (f)		17	%
17	Investment income percentage for 2019 (%
18 19a	Investment income percentage from 2018 33 1/3% support tests—2019. If the organization of the contract of the	anization did not che	eck the box on line	14, and line 15 is m	nore than 33 1/3%,		
104	at manage main min ord				A CONTRACTOR OF THE PARTY OF TH		

17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and

20

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SAVANNAH RIVERKEEPER,

Supporting Organizations Part IV

(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 S	Supporting	Organiz	ations

- 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).
- 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")? If 4a "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) purposes
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," 5a 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.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 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 9a disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- 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.)

	Yes	No

•		
1		
2		

3a		10-16
Ja		•••••
3b		

3c		

4a		
4b		

4c		

50		
5a		
5a		
5a 5b		
5b		
5b		
5b 5c		
5b		
5b 5c		
5b 5c 6		
5b 5c 6 7 8		
5b 5c 6 7 8		
5b 5c 6		
5b 5c 6 6 7 8 8 9a 9b		
5b 5c 6 6 7 8 8 9a 9b		
5b 5c 6 6 7 8 8 9a 9b		
5b 5c 6 7 8 8 9a 9b		
5b 5c 6 7 8 8 9a 9b		
5b 5c 6 7 8 9a 9b		
5b 5c 6 7 8 8 9a 9b		
5b 5c 6 7 8 8 9a 9b		
5b 5c 6 7 8 9a 9b		

Schedu	ule A (Form 990 or 990-EZ) 2019 SAVANNAH RIVERKEEPER, INC	58-2630660		Page 5
Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secti	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sect	ion C. Type II Supporting Organizations			
0000	ion of Type it emperating enganizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
1	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sect	ion D. All Type III Supporting Organizations			1.84
0000	ion b. Air Type in Supporting Significance		Yes	No
4	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
1	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior ta	×		
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
2	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
		2		
	the organization maintained a close and continuous working relationship with the supported organization(s).			
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's	3		
Coot	supported organizations played in this regard. ion E. Type III Functionally-Integrated Supporting Organizations		1	
		instructions)		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see	insuuctions).		
a	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.	tity (see instructions)		
С	The organization supported a governmental entity. Describe in Part VI how you supported a government en	illy (See instructions).		
			Yes	No
	Activities Test. Answer (a) and (b) below.		163	140
а				
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	2-		
	that these activities constituted substantially all of its activities.	2a		
b				
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	-		
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
a				
	trustees of each of the supported organizations? Provide details in Part VI.	3a_		
b				
	of its currented erganizations? If "Ves." describe in Part VI the role played by the organization in this regard.	3b	1	

58-2630660 SAVANNAH RIVERKEEPER, Schedule A (Form 990 or 990-EZ) 2019 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Part V Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 4 Add lines 1 through 3. 4 5 Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 8 (B) Current Year (A) Prior Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): 1a Average monthly value of securities Average monthly cash balances 1b 1c Fair market value of other non-exempt-use assets C 1d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 3 Subtract line 2 from line 1d. Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 Multiply line 5 by .035. Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6)

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-functionally in	ntegrated Type III si	upporting organization (see	

instructions)

SAVANNAH RIVERKEEPER, INC

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organization	ons (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exempt purp	oses		
2	Amounts paid to perform activity that directly furthers exempt purpose			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of sup	ported organizations		
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organizations	zation is responsive		
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019			
	(reasonable cause required-explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2019			
	From 2014			
b	From 2015			
С	From 2016			
	From 2017			
	From 2018			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from			
	Section D, line 7:			
	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
_	Excess from 2018			
е	Excess from 2019		Sahadul	A (Form 990 or 990-FZ) 2019

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
Part II, Line 10 - Other Income Detail
\$ 47,223
•

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Tor organizations exemper roll mounts ran onless section (1)

➤ Complete if the organization is described below.
➤ Attach to Form 990 or Form 990-EZ.

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

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- · Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

	Section 501(c)(4), (5), or (6) organizations: Complete Part III.				
	e of organization			Employer identi	fication number
	SAVANNAH RIVERKEEPER	, INC	Note that	58-26306	
Pai	t I-A Complete if the organization is exemp	ot under section 501(c)	or is a section	527 organization	n
1		political campaign activities in F	art IV. (see instruc	tions for	
	definition of "political campaign activities")				
2	Political campaign activity expenditures (see instructions)			▶\$	
3	Volunteer hours for political campaign activities (see instruction	ons)			
	TI-B Complete if the organization is exemp	ot under section 501(c)	3).		
1	Enter the amount of any excise tax incurred by the organization			▶\$	
2	Enter the amount of any excise tax incurred by organization n	nanagers under section 4955		▶\$	
3	If the organization incurred a section 4955 tax, did it file Form				Yes No
	Was a correction made?				V M-
b	If "Ves " describe in Part IV				
Pa	rt I-C Complete if the organization is exem	pt under section 501(c),	except section	on 501(c)(3).	
1	Enter the amount directly expended by the filing organization	for section 527 exempt function			
	activities			▶\$	
2	Enter the amount of the filing organization's funds contributed	to other organizations for secti	on		
	527 exempt function activities			▶\$	
3	Total exempt function expenditures. Add lines 1 and 2. Enter	here and on Form 1120-POL,			
	line 17b			▶\$	
4	Did the filing organization file Form 1120-POL for this year?				Yes No
5	Enter the names, addresses and employer identification num	ber (EIN) of all section 527 poli	tical organizations	to which the filing	
	organization made payments. For each organization listed, e	nter the amount paid from the fi	ling organization's	funds. Also enter	
	the amount of political contributions received that were prom	ptly and directly delivered to a s	eparate political or	ganization, such	
	as a separate segregated fund or a political action committee	(PAC). If additional space is no	eeded, provide info		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate
					political organization. If none, enter -0
(1)					
(0)					
(2)					
(3)					
(3)					
(4)					
(-)					
(5)					
,-,					
(6)					
,					

chedule C (Form 990 or 990-EZ) 2019 SAVA	NNAH RIVERK	EEPER, INC		8-2630660	Page 2
Part II-A Complete if the organ	ization is exempt	under section 50°			
Check If the filing organization	n belongs to an affilia	ated group (and list in	Part IV each affiliate	ed group member's r	name,
address, EIN, expense	es, and share of exce	ess lobbying expendit	ures).		
3 Check ▶ ☐ if the filing organization	n checked box A and	"limited control" prov	visions apply.		
	bbying Expendit			(a) Filing	(b) Affiliated
(The term "expenditures"	means amounts p	aid or incurred.)	orga	nization's totals	group totals
1a Total lobbying expenditures to influence pr	ublic opinion (grassroot	s lobbying)			
b Total lobbying expenditures to influence a	legislative body (direct	lobbying)			
c Total lobbying expenditures (add lines 1a					
d Other exempt purpose expenditures					
e Total exempt purpose expenditures (add I	ines 1c and 1d)	3000			
f Lobbying nontaxable amount. Enter the ar					
columns.					
If the amount on line 1e, column (a) or (b) is	: The lobbying non	taxable amount is:			
Not over \$500,000	20% of the amount	The same of the sa			
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15%	of the excess over \$500,0	00.		
Over \$1,000,000 but not over \$1,500,000		of the excess over \$1,000			
Over \$1,500,000 but not over \$17,000,000		of the excess over \$1,500,			
Over \$17,000,000	\$1,000,000.				
g Grassroots nontaxable amount (enter 25°	% of line 1f)				
h Subtract line 1g from line 1a. If zero or les	ss, enter -0-				
i Subtract line 1f from line 1c. If zero or les	s, enter -0-				
i If there is an amount other than zero on e	either line 1h or line 1i, d	lid the organization file F	orm 4720		
reporting section 4911 tax for this year?					Yes No
	4-Year Averag	ing Period Under Se	ection 501(h)		
(Some organizations that m	ade a section 501(h See the separate	n) election do not ha instructions for line	ve to complete all s 2a through 2f.)	of the five columns	below.
	Lobbying Expendit	tures During 4-Year	Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount					
(150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2019

58-2630660 SAVANNAH RIVERKEEPER, Page 3 Schedule C (Form 990 or 990-EZ) 2019 Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 Part II-B (election under section 501(h)). (a) (b) For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed Yes No Amount description of the lobbying activity. During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: X a Volunteers? X b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? X c Media advertisements? X d Mailings to members, legislators, or the public? X e Publications, or published or broadcast statements? X f Grants to other organizations for lobbying purposes? 2,809 X g Direct contact with legislators, their staffs, government officials, or a legislative body? X h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? X i Other activities? 2,809 i Total. Add lines 1c through 1i X 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes." enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

	Dues, assessificitis and similar amounts from members		
2	and the second of		
a	Current year	2a	
	Carryover from last year	2b	
	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying		
	and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C, Part II-B, Line 1

\$1,302 OF LOBBYING ACTIVITIES WERE FOR SOUTH CAROLINA GOVERNMENTAL ISSUES AND WERE COMPRISED OF \$500 FOR MEETING EXPENSE, \$349 OF MILEAGE REIMBURSENT, \$332 FOR SALARIES AND \$121 FOR TRAVEL. \$1,507 OF EXPENSES WERE FOR GEORGIA GOVERNMENTAL ISSUES AND WERE COMPRISED OF \$1,428 IN SALARIES AND \$79 IN TRAVEL EXPENSE.

Schodule C (Form	990 or 990-F7) 2019	SAVANNAH	RIVERKEEPER,	INC	58-2630660	Page 4
Part IV	Supplemental	Information (co	ontinued)			
Pailiv	Supplemental	iniormation joe	линаоч,			

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047 Open to Public

Inspection

Name of the organization

Employer identification number

SZ	AVANNAH RIVERKEEPER, INC		58-2630660
*********	Organizations Maintaining Donor Advised Fur Complete if the organization answered "Yes" on F	nds or Other Similar Funds or A Form 990, Part IV, line 6.	Accounts.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing that the	he assets held in donor advised	
٠	funds are the organization's property, subject to the organization's exclus		Yes No
6	Did the organization inform all grantees, donors, and donor advisors in w		🗀 🐱 🗖 👊
٥	only for charitable purposes and not for the benefit of the donor or donor		
	conferring impermissible private benefit?		Yes No
D.	irt II Conservation Easements.		100 110
.1	Complete if the organization answered "Yes" on F		
1	Purpose(s) of conservation easements held by the organization (check a		
	Preservation of land for public use (for example, recreation or educate		
	Protection of natural habitat	Preservation of a certified his	storic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conserva	ation contribution in the form of a conserva	000000000
	easement on the last day of the tax year.		Held at the End of the Tax Year
a	Total number of conservation easements		
b	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic structure include		2c
d	Number of conservation easements included in (c) acquired after 7/25/06		
	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, released, extir	nguished, or terminated by the organization	n during the
	tax year ▶		
4	Number of states where property subject to conservation easement is loc		
5	Does the organization have a written policy regarding the periodic monitor	oring, inspection, handling of	П. П.
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of v	violations, and enforcing conservation ease	ements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, handling of violat	ions, and enforcing conservation easemer	nts during the year
	> \$		
8	Does each conservation easement reported on line 2(d) above satisfy the	e requirements of section 170(h)(4)(B)(i)	□ Vee □ Ne
9	In Part XIII, describe how the organization reports conservation easemer		
	balance sheet, and include, if applicable, the text of the footnote to the or organization's accounting for conservation easements.	ganization's linaricial statements that desc	cribes trie
D.	art III Organizations Maintaining Collections of Art,	Historical Treasures or Other	Similar Assets
	Complete if the organization answered "Yes" on F	Form 990, Part IV, line 8.	Jimmai 7.000to.
1a	If the organization elected, as permitted under FASB ASC 958, not to rep		
	of art, historical treasures, or other similar assets held for public exhibitio	n, education, or research in furtherance of	public
	service, provide in Part XIII the text of the footnote to its financial statement	ents that describes these items.	
b	If the organization elected, as permitted under FASB ASC 958, to report		
	art, historical treasures, or other similar assets held for public exhibition,	education, or research in furtherance of pu	ublic service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		> \$
	(ii) Assets included in Form 990, Part X		> \$
2	If the organization received or held works of art, historical treasures, or o	ther similar assets for financial gain, provid	de the
	following amounts required to be reported under FASB ASC 958 relating		
a	Revenue included on Form 990, Part VIII, line 1		
b	Assets included in Form 990, Part X		🕨 \$

Pai	rt III Organizations Maintaining	Collections of	Art, Historical Tr	easures, or Otl	ner Simila	r Assets	continue	(d)	
3	Using the organization's acquisition, accessio collection items (check all that apply):	n, and other records,	check any of the follow	ving that make signif	ficant use of	its			
а	Public exhibition	d 🗍	Loan or exchange pro	gram					
b	Scholarly research		Other						
C	Preservation for future generations								
4	Provide a description of the organization's col	lections and explain h	now they further the org	ganization's exempt	purpose in P	art			
-	XIII.								
5	During the year, did the organization solicit or	receive donations of	art, historical treasure	s, or other similar					
	assets to be sold to raise funds rather than to	be maintained as par	rt of the organization's	collection?			. Ye	5	No
Pa	rt IV Fscrow and Custodial Arr	angements.							
0000000	Complete if the organization	answered "Yes"	on Form 990, Pa	rt IV, line 9, or r	eported a	n amount o	on Form		
4-	990, Part X, line 21. Is the organization an agent, trustee, custodia	en or other intermedia	ry for contributions or	other assets not					
1a	included on Form 990, Part X?	an or other intermedia					Ye	s	No
h	If "Yes," explain the arrangement in Part XIII a								
D	b II fes, explain the arrangement in ration and complete the remaining terrary					Amount			
	Beginning balance					1c			
	Additions during the year					1d			_
	Distributions during the year					1e			
	Ending balance					1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line 2	21, for escrow or custo	dial account liability?			Ye		No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the exp	lanation has been pro	vided on Part XIII					
	rt V Endowment Funds.								
	Complete if the organization	n answered "Yes			1		(4) 540		nali.
		(a) Current year	(b) Prior year	(c) Two years back	(d) In	ree years back	(e) Four	r years b	DACK
	Beginning of year balance								
b	Contributions								_
С	Net investment earnings, gains, and								
	losses								
	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
	Administrative expenses								
_	End of year balance	ent year end halance	(line 1g. column (a)) h	eld as:				THE	
2	Board designated or quasi-endowment	%	(iiiio rg, colaiiii (a)) .						
	Permanent endowment ▶ %								
	Term endowment ▶ %								
٠	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.							
3a	Are there endowment funds not in the posse	ssion of the organizat	ion that are held and a	dministered for the					
	organization by:							Yes	No
							3a(i)		
	(ii) Related organizations						3a(ii)		
b	If "Yes" on line 3a(ii), are the related organization	ations listed as require	ed on Schedule R?				3b		
4	Describe in Part XIII the intended uses of the	e organization's endov	vment funds.						
Pa	art VI Land, Buildings, and Equ	uipment.				000 D-4	V II 1	0	
	Complete if the organization				See Form	990, Part	(d) Book	J.	
	Description of property	(a) Cost or other		r other basis ther)	(c) Accumulated		(d) BOOK	value	
		(investmen		152,179	Coprecialie		1	52,	179
	Land			132,119					
	Buildings			51,871	16	,342		35,	529
	Leasehold improvements			22,110		,160			950
	I Equipment					/			
_ e	Other	equal Form 990 Port	X. column (B) line 10	c.)		•	1	89,	658
ota	at. Add lines to through te. (Column (d) must	equal Form 990, Fall	2., SOIGHT (D), III O TO	7		Sch	edule D (Fr		

Schedule D (Fo	orm 990) 2019	SAVANNAH	RIVERKEEPE	ER,	INC	58-2630660		Page 3
Part VII	Investments	- Other Secu	rities.					
	Complete if the	he organization	n answered "Yes	on F	orm 990, Part IV, line	11b. See Form 990, P		
		ption of security or categ	ory		(b) Book value	(c) Method o		
		iding name of security)				Cost or end-of-ye	ear market value	
1) Financial d								
3) Other								
(0)								
(H)								
	n (b) must equal Fo	orm 990. Part X. co		•				
Part VIII		- Program R						
				on F	orm 990, Part IV, line	11c. See Form 990, P	art X, line 13.	
Peters.		escription of investment			(b) Book value	(c) Method o		
						Cost or end-of-ye	ear market value	
(1)								
(2)								
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)	· (b)	000 Ded V a	-(D) line 12 \					
Part IX	Other Asset		or. (b) line is.)					
raitin			n answered "Yes	on F	orm 990. Part IV. line	11d. See Form 990, P	art X. line 15.	
	Complete ii t	no organizatio	(a) Description				(b) Book value	
(1)								
(2)								
(3)								
(4)								
(5)				W M				
(6)								
(7)								
(8)								
(9)		200 5 414	-1 (D) (45)					
	Other Liabil		ol. (B) line 15.)			············		
Part X			n answered "Yes	" on F	orm 990 Part IV line	11e or 11f. See Form	990. Part X.	
	line 25.	ne organizatio	ii answered Tee	, 0111	om ooo, rantiv, mic	, , , , , , , , , , , , , , , , , , , ,		
1.		Description of liability					(b) Book value	
	income taxes							
	Liabiliti	es					2	,017
(3)								
(4)								18
(5)								
(6)								
(7)								
(8)								
(9)							2	,017
Total. (Columi	n (b) must equal F	orm 990, Part X, c	ol. (B) line 25.)					, 01/

	rt XI Reconciliation of Revenue per Audited Financial Sta	tements With Re	venue per Return.	
_	Complete if the organization answered "Yes" on Form 99	90, Fait IV, IIIC 12	1	809,394
1	Total revenue, gains, and other support per audited financial statements			
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	2a	32,339	
	Net unrealized gains (losses) on investments			
	Donated services and use of facilities			
	Recoveries of prior year grants		41,285	
d	Other (Describe in Part XIII.)		20	73,624
е	Add lines 2a through 2d			735,770
3	Subtract line 2e from line 1	I I		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	4a		
	Investment expenses not included on Form 990, Part VIII, line 7b			
	Other (Describe in Part XIII.)		40	
C	Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			-AF 550
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Farth, line 12.)	tatements With F	xpenses per Retu	rn.
Pa	reconciliation of Expenses per Audited Financial S	ION Part IV line 1	2a	
	Complete if the organization answered "Yes" on Form 9	190, Fait IV, IIIC I	1	744,894
1				
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 20 1		
а				
b		2b		
C		2c	41,285	
d	Other (Describe in Part XIII.)	2d		41,285
е	Add lines 2a through 2d			E02 C00
3	Subtract line 2e from line 1			
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		4b		
c	Add lines 4a and 4b		4	E00 C00
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			7037000
Pro	art XIII Supplemental Information. vide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; P art XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pro Part XI, Line 2d - Revenue Amounts Inclu	wide any additional illic	incials - Ot	
E	FUNDRAISING EVENT EXPENSES		\$	41,265
	Part XII, Line 2d - Expense Amounts Incl	uded in Fir	nancials - 0 \$	ther 41,285
		uded in Fir		
		uded in Fir		
		uded in Fir		
		uded in Fir		
		uded in Fir		
		uded in Fir		

Schedule D (Form 990) 2019 SAVANNAH RIVERKEEPER, INC 58-2630660 Page 5 Part XIII Supplemental Information (continued)
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· · · · · · · · · · · · · · · · · · ·

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection

Employer identification number

Indicate wh a Mail so b Interne c Phone	SAVANNAH RIVERKE Fundraising Activities. Complet Form 990-EZ filers are not require ether the organization raised funds through licitations t and email solicitations solicitations on solicitations anization have a written or oral agreement loyees listed in Form 990, Part VII) or ent the 10 highest paid individuals or entities	e if the organization of the following e Solicitation g Special further struith any individual (in	activitien of nor	es. Che n-gover vernme	ck all that apply.	990, Part IV, line 1	7.
Indicate wh a Mail so b Interne c Phone	ether the organization raised funds through licitations and email solicitations solicitations on solicitations anization have a written or oral agreement licitation in Form 990. Part VII) or entitlement licitation in Form 990. Part VIII) or entitlement licitations	ed to complete this the hand of the following e Solicitation f Solicitation g Special fu	activitien of nor	es. Che n-gover vernme	ck all that apply.		
a Mail so b Interne c Phone d In-pers	licitations t and email solicitations solicitations on solicitations anization have a written or oral agreemer	e Solicitation f Solicitation g Special fu	n of noi n of gov	n-gover vernme	nment grants		
b Interne c Phone	t and email solicitations solicitations on solicitations anization have a written or oral agreemer	f Solicitation g Special fu	n of go	/ernme			
c Phone	solicitations on solicitations anization have a written or oral agreemer	g Special fu			nt grants		
d In-pers	on solicitations anization have a written or oral agreemer	at with any individual (in	ndraisi	ng ever			
d In-pers	anization have a written or oral agreemer	nt with any individual (in			nts		
po	laviage lieted in Form QUII Part VIII of Pol	it with any individual (in					
	the 10 highest paid individuals or entities	ity in continuous in that p	100000	Orial id	10101119	designs in to bo	Yes N
h If "Yes." list	ted at least \$5,000 by the organization.	(fundraisers) pursuar	it to agi	eemen	ts under which the lun	uraiser is to be	
compensal	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	raise cus cor	hid fund- er have dody or strol of butions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
5							
6							
7							
8							
9							
0							
Total			.,	>			
3 List all st	ates in which the organization is registere on or licensing.	d or licensed to solicit	contrib	utions o	or has been notified it i	s exempt from	
						,	

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

	gross receipts g	reater than \$5,000.			
		(a) Event #1 AUGUSTA ROAST (event type)	(b) Event #2 SAVANNAH ROAST (event type)	(c) Other events PADDLE FEST (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	25,854	18,062	12,103	56,019
	2 Less: Contributions 3 Gross income (line 1 minus line 2)	25,854	18,062	12,103	56,019
	4 Cash prizes				
	5 Noncash prizes				
ses	6 Rent/facility costs				
Direct Expenses	7 Food and beverages	5,970	2,589	2,024	10,583
Direc	8 Entertainment		10.000	2 522	30,702
	9 Other direct expenses	13,183			
	10 Direct expense summary11 Net income summary. Summary.	41,285 14,734			
P	art III Gaming. Com	plete if the organization answorm 990-EZ, line 6a.	wered "Yes" on Form 990, P	art IV, line 19, or reporte	ed more than
Revenue		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
	1 Gross revenue				
sesues	2 Cash prizes 3 Noncash prizes				
Direct Expenses	4 Rent/facility costs				
	5 Other direct expenses	Vos %	Yes %	Yes %	
	6 Volunteer labor	Yes %	No	No	
	7 Direct expense summar	y. Add lines 2 through 5 in column (d	i)	>	
	8 Net gaming income sum	mary. Subtract line 7 from line 1, co	lumn (d)	>	
	Enter the state(s) in which the state is the organization licensed by If "No," explain:	ne organization conducts gaming act to conduct gaming activities in each	ivities: of these states?		Yes N
	a Were any of the organization b If "Yes," explain:	n's gaming licenses revoked, susper	nded, or terminated during the tax y	ear?	Yes N

Sche	edule G (Form 990 or 990-EZ) 2019	SAVANNAH	RIVERKEEPER,	INC	58-2630660		Page 3
11	Does the organization conduct gar	ning activities with nonme	mbers?			Yes	No
12	Is the organization a grantor, bene formed to administer charitable ga	ficiary or trustee of a trust	, or a member of a partner	ship or other entity		Yes	No
13	Indicate the percentage of gaming						
а	The organization's facility				13a		%
b	An outside facility				13b		%
14	Enter the name and address of the	person who prepares the	organization's gaming/sp	ecial events books and			
	records:						
	Name ▶						
	Address▶						
5a	Does the organization have a cont					7	
	revenue?					Yes	No
b	If "Yes," enter the amount of gamin				and the		
	amount of gaming revenue retaine		\$				
C	ii res, entername and address o	of the third party.					
	Name ▶						
	Address ▶		~				
16	Gaming manager information:						
	Name ▶						
	Gaming manager compensation	\$					
	Description of services provided ▶						
	Director/officer	Employee	Independent contractor				
	Mandatan distributions						
7	Mandatory distributions: Is the organization required under	state law to make charital	ale dietributions from the a	aming proceeds to			
а						Yes	No
h	retain the state gaming license? Enter the amount of distributions re	equired under state law to	be distributed to other exe	mpt organizations or			
	spent in the organization's own ex						
Pa	rt IV Supplemental Info	ormation. Provide th	e explanations require		2b, columns (iii) and (v); a y additional information.	ind	
	COC IIIOU GOUGIIS.						

					Schedule G (Form 990 o	r 990-E	Z) 2019

SCHEDULE O (Form 990 or 990-EZ)

\$ 300

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047 2019

Open to Public

Inspection

Employer identification number

58-2630660 SAVANNAH RIVERKEEPER, INC Form 990, Part VI, Line 2 - Related Party Information Among Officers TONYA BONATATIBUS MARY JACOBSON FINANCE DIR EXEC DIR DAUGHTER/MOTHER Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 FORM 990 CIRCULATED TO BOARD FOR REVIEW PRIOR TO FILING Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation MADE AVAILABLE UPON REQUEST Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation FUNDRAISING EVENT EXPENSES -41,285FUNDRAISING EVENT EXPENSES