#### Extended to November 15, 2018

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

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

Inspection

OMB No. 1545-0047

Α	For the	e 2017 calendar year, or tax year beginning and	ending	-	
В	Check if applicable	e: C Name of organization		D Employer identifi	cation number
	Addre	The Walden Woods Project			
	Name chang	Doing business as		95-4	292658
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	r
	Final return			781-	259-4700
_	termir ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	4,877,098.
Ļ	Amen return	HINCOIN, MA 01//3		H(a) Is this a group re	
	Application pendi		on	for subordinates	
		44 Baker Farm Road, Lincoln, MA 01//3		<b>H(b)</b> Are all subordinates in	
		empt status: X 501(c)(3) 501(c) ( ) ( insert no.) 4947(a)(1) ( 100 c)	or 527		list. (see instructions)
		te: www.walden.org	1	H(c) Group exemptio	
	art I	organization: X Corporation Trust Association Other ►  Summary	L Year	of formation: 1990  N	State of legal domicile: CA
		Briefly describe the organization's mission or most significant activities: Pres	ortzo 1	and in ecol	ogically
Activities & Governance	1	important areas.	CIVCI	dia in ccoi	<u>ogically</u>
ern	2	Check this box  if the organization discontinued its operations or dispose			_
Š	3	Number of voting members of the governing body (Part VI, line 1a)			8
∞ ∞	4	Number of independent voting members of the governing body (Part VI, line 1b)			7
ties	5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)			21 20
₹	6	Total number of volunteers (estimate if necessary)		6	84,087.
Ä		Total unrelated business revenue from Part VIII, column (C), line 12			-27,930.
	d	Net unrelated business taxable income from Form 990-T, line 34	······	Prior Year	Current Year
-	8	Contributions and grants (Part VIII, line 1h)		1,855,679.	1,318,908.
Revenue	9			0.	0.
e e	10	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)		311,357.	503,899.
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		77,080.	570,868.
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,244,116.	2,393,675.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		3,863.	4,850.
		Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
S	I	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		703,889.	685,813.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ğ	b	Total fundraising expenses (Part IX, column (D), line 25)  70, 2			
ш	1/	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,130,103.	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,837,855.	
, 6	19	Revenue less expenses. Subtract line 18 from line 12		406,261.	310,474.
tsol			Ве	eginning of Current Year	End of Year
SSE	20	Total assets (Part X, line 16)		28,199,874. 435,073.	28,791,635. 87,013.
Net Assets or	21	Total liabilities (Part X, line 26)		27,764,801.	28,704,622.
P	≧∣22 art II	Net assets or fund balances. Subtract line 21 from line 20		21,104,001.	20,704,022.
		alties of perjury, I declare that I have examined this return, including accompanying schedule:	s and statem	ents, and to the hest of m	v knowledge and belief it is
	•	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh		·	, memeage and sener, it is
	<u> </u>				
Sig	ın	Signature of officer		Date	
He		Kathleen R. Anderson, Secretary/Exec.	Dir.		
		Type or print name and title			
		Print/Type preparer's name Preparer's signature	<b>I</b>	Date Check	PTIN
Pai		Cynthia P. Almquist Cynthia P. Almqu	uist 0	08/21/18 if self-employ	P01309212
	parer	Firm's name Tonneson & Company, PC		Firm's EIN ▶	04-2943536
Us	Only	Firm's address 401 Edgewater Place, Suite 300		5. 70	1 245 0000
_	41	Wakefield, MA 01880-6208		Phone no. / 8	1-245-9999
		RS discuss this return with the preparer shown above? (see instructions)			X Yes No
/32	001 11-2	28-17 LHA For Paperwork Reduction Act Notice, see the separate instruction	uns.		Form <b>990</b> (2017)

14370821 794015 085430.000

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### Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	Х	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			37
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	4.	х	
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	Λ	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			Х
	complete Schedule G, Part III	19		Λ

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#### Part IV Checklist of Required Schedules (continued)

			Yes	No
<b>20</b> a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			l
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			l
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			l
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			l
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			l
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30	X	
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			,,
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			,,
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			37
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			\ <sub>37</sub>
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			_ v
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?		37	
	Note. All Form 990 filers are required to complete Schedule O	38	X	

# Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part v				
				Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 13			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	ID C	_		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re			v	
_	(gambling) winnings to prize winners?	I	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	2a 21			
	filed for the calendar year ending with or within the year covered by this return			Х	
D	If at least one is reported on line 2a, did the organization file all required federal employment tax return.		2b	Λ	
2-	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions Did the organization have unrelated business gross income of \$1,000 or more during the year?		За	Х	
3a	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	······	3b	X	
	At any time during the calendar year, did the organization have an interest in, or a signature or other a		30		
Ta	financial account in a foreign country (such as a bank account, securities account, or other financial		4a		Х
h	If "Yes," enter the name of the foreign country:	accounty:	Tu		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b		Х
C	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	any contributions that were not tax deductible as charitable contributions?		6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribut				
	were not tax deductible?		6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	$ Did the organization \ receive \ a payment \ in \ excess \ of \$75 \ made \ partly \ as \ a \ contribution \ and \ partly \ for \ goods \ and \ sense \ for \ goods \ go$	vices provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	•			
	to file Form 8282?		7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year				37
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit of		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file For		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations are printed in a department of the departmen		7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.		-		
а			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
а	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	_		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.				
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the	ايما			
	organization is licensed to issue qualified health plans	13b	-		
	Enter the amount of reserves on hand	13c	140		X
14a	Did the organization receive any payments for indoor tanning services during the tax year?  If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule.		14a 14b		
Ŋ	in 165, has it lied a 10mm/20 to report these payments? If No, provide an explanation in Schedule			990	/2017

Form 990 (2017)

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

	Check if Schedule O contains a response or note to any line in this Part VI			X						
Sec	tion A. Governing Body and Management									
			Yes	No						
1a	Enter the number of voting members of the governing body at the end of the tax year									
	If there are material differences in voting rights among members of the governing body, or if the governing									
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.									
b	Enter the number of voting members included in line 1a, above, who are independent 1b 7									
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other									
	officer, director, trustee, or key employee?	2		Х						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision									
	of officers, directors, or trustees, or key employees to a management company or other person?	3		Х						
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х						
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х						
6	Did the organization have members or stockholders?	6		Х						
7a	7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or									
	more members of the governing body?	7a		Х						
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or									
	persons other than the governing body?	7b		Х						
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:									
а	The governing body?	8a	Х							
b	Each committee with authority to act on behalf of the governing body?	8b	Х							
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the									
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)									
			Yes	No						
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х						
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,									
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х							
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х							
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х							
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe									
	in Schedule O how this was done	12c	Х							
13	Did the organization have a written whistleblower policy?	13	Х							
14	Did the organization have a written document retention and destruction policy?	14	Х							
15	Did the process for determining compensation of the following persons include a review and approval by independent									
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	The organization's CEO, Executive Director, or top management official	15a	Х							
b	Other officers or key employees of the organization	15b	Х							
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).									
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a									
	taxable entity during the year?	16a		X						
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation									
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's									
	exempt status with respect to such arrangements?	16b								
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ►CA, CT, MA, NY, TN, NC, SC, NH, UT			, AF						
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vailab	ole							
	for public inspection. Indicate how you made these available. Check all that apply.									
	X Own website X Another's website X Upon request Other (explain in Schedule O)									
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	l finan	cial							
	statements available to the public during the tax year.									
20	State the name, address, and telephone number of the person who possesses the organization's books and records:									
	Kathleen R. Anderson - 781-259-4700									
	44 Baker Farm, Lincoln, MA 01773									

Form **990** (2017)

# Form 990 (2017) The Walden W

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

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

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

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

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

<b>(A)</b> Name and Title	(B) Average hours per	box	not c , unle	Pos heck ss pe	more rson	than is bot	h an	<b>(D)</b> Reportable compensation	<b>(E)</b> Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer p	Key employee	Highest compensated amployee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) Kathleen Anderson	40.00	X		х				114,240.	0.	5,712
Secretary/Exec. Director (2) Donald Henley	6.00	<u> </u>		^				114,240.	0.	3,114
(2) Donard Henrey President	0.00	X		х				0.	0.	0
(3) Thomas O. Jones	1.00	12						0.	0.	-
Treasurer	1.00	X		х				0.	0.	0
(4) Anna Winter Rasmussen	1.00								•	
Board Member		x						0.	0.	0
(5) John P. DeVillars	1.00									
Board Member		x						0.	0.	O
(6) Ed Begley, Jr.	1.00									
Board Member		X						0.	0.	0
(7) John H. Tyson	1.00									
Board Member		X						0.	0.	0
(8) Elizabeth Lack	1.00									
Board Member		Х						0.	0.	0
		$\frac{1}{2}$								
		-								
		-								
		$\vdash$								
		1		ı	l	I	l	1		

Form **990** (2017)

Par	t VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees/	, and	d Hi	ghe	st C	Compensated Employe	es (continued)				
	(A) Name and title	(B) Average hours per week	(do		Pos heck ss pe	ition more rson	l than is bot	one h an	( <b>D)</b> Reportable compensation from	(E) Reportable compensatio	n	an	(F) stimate nount o other	
		(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organization (W-2/1099-MIS	s	com fr org an	pensa om the anizati d relate anization	e ion ed
		·	=	=	0	Ŋ.	工品	Œ						
	Sub-total								114,240.		0.		5,7	12.
С	Total from continuation sheets to Part V	II, Section A							0.		0.			0.
d 2	Total (add lines 1b and 1c)  Total number of individuals (including but n							no r	114,240. eceived more than \$100	,000 of reportab	<b>0.</b> le		5,7	12.
	compensation from the organization												Yes	1 No
3	Did the organization list any <b>former</b> officer, line 1a? <i>If</i> "Yes," <i>complete Schedule J for</i> s								highest compensated e			3		Х
4	For any individual listed on line 1a, is the su and related organizations greater than \$150											4		Х
5	Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	accrue compe	nsat	ion f	rom	any	unr/					5		Х
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest co the organization. Report compensation for	=	-								npens	ation 1	rom	
	<b>(A)</b> Name and business	address	N	INC	3				<b>(B)</b> Description of s	ervices	С	(C ompe	<b>)</b> nsatio	n
2	Total number of independent contractors (i \$100,000 of compensation from the organi	-	ot li	mite	d to		se lis	stec	d above) who received m	nore than				
	, , , , , , , , , , , , , , , , , , ,											Form	990 (2	2017)

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			<u>valden wo</u>	oas Proje	ect		95-4292	ნ58 Page <b>9</b>
Pa	rt VII	Statement of Reve	nue					
		Check if Schedule O conf	tains a response	or note to any line	e in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
nts nts	1 a	Federated campaigns	1a					
ara our		Membership dues						
Contributions, Gifts, Grants and Other Similar Amounts		Fundraising events		114,711.				
Gift lar,		Related organizations						
imi	е	Government grants (contribut	tions) 1e					
tior S	f	All other contributions, gifts, gran	nts, and					
ipi		similar amounts not included abo	ove 1f	1,204,197.				
d	g	Noncash contributions included in lines	s 1a-1f: \$	202,679.				
a C	h	Total. Add lines 1a-1f		▶	1,318,908.			
				Business Code				
<u>e</u>	2 a							
er Te	b							
n S	С							
gra Re	d							
Program Service Revenue	e							
_		All other program service reve						
_	<u>g</u> 3	Total. Add lines 2a-2f Investment income (including						
	3	other similar amounts)			131,954.			131,954.
	4	Income from investment of ta		. [	202,501.			202,501.
	5	Royalties			139.			139.
	·	noyanos	(i) Real	(ii) Personal				
	6 a	Gross rents	· ·	(ii) i Giodila.				
		Less: rental expenses						
		Rental income or (loss)						
		Net rental income or (loss)						
		Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	2,578,218.					
	b	Less: cost or other basis						
		and sales expenses						
		Gain or (loss)	371,945.					
	d	Net gain or (loss)		<b>&gt;</b>	371,945.			371,945.
ē	8 a	Gross income from fundraisin						
Other Revenue		including \$ 114						
Re		contributions reported on line	=	600 050				
Jer		Part IV, line 18		689,978.				
₹		Less: direct expenses		207,396.	482,582.			482,582.
		Net income or (loss) from fund	-		402,302.			402,302.
	o d	Gross income from gaming ad Part IV, line 19						
	h	Less: direct expenses						
		Net income or (loss) from gan						
		Gross sales of inventory, less						
		and allowances		157,901.				
	b	Less: cost of goods sold		69,754.				
		Net income or (loss) from sale			88,147.	4,060.	84,087.	
		Miscellaneous Revenu		Business Code				
	11 a							
	b							
	С							
	d	All other revenue						
	_	Takal Additions date and a						

84,087.

986,620.

4,060.

2,393,675.

Part IX | Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) (C) Do not include amounts reported on lines 6b. Program service expenses Total expenses Management and general expenses Fundraising 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 4,100. 4,100. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic 750. individuals. See Part IV, line 22 ..... 750. Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members ..... Compensation of current officers, directors, 119,952. 72,731. 23,883. 23,338. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 496,193. 378,904. 87,765. 29,524. 7 Other salaries and wages Pension plan accruals and contributions (include 20,724. 15,190. 3,756. 1,778. section 401(k) and 403(b) employer contributions) Other employee benefits 9 45,938 48,944. 2,691. 315. Payroll taxes 10 Fees for services (non-employees): a Management ..... 479. 479. Legal 24,294. 24,294. Accounting Lobbying Professional fundraising services. See Part IV, line 17 49,175. 49,175. Investment management fees ..... Other, (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) 1,986. 1,986. Advertising and promotion 12 Office expenses 13 Information technology 14 Royalties 15 16 Occupancy 13,680. 7,130. 6,550. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 210. 210. Conferences, conventions, and meetings 19 11,736. 7,483. 2,126. 2,127. 20 Payments to affiliates \_\_\_\_\_ 21 381,565. 365,982. 15,583. Depreciation, depletion, and amortization ..... 22 64,881. 218,214. 140,170. 13,163. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) Repair and Maintenance 319,862. 314,201. 5,661. Services 141,388. 104,956. 36,432. 102,936. 39,201. 63,735. Supplies 80,194 80,194. **Utilities** 11,054. 46,819. 35,765. e All other expenses 2,083,201. 1,544,947. 468,009. 70,245. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

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Check here

if following SOP 98-2 (ASC 958-720)

Pa	πλ	Balance Sheet					
		Check if Schedule O contains a response or not	e to ar	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			288,017.	1	199,374.
	2	Savings and temporary cash investments			26,399.	2	229,098.
	3	Pledges and grants receivable, net			864,079.	3	646,719.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and fo					
		trustees, key employees, and highest compensa					
		Part II of Schedule L				5	
	6	Loans and other receivables from other disquali					
		section 4958(f)(1)), persons described in section	4958(	c)(3)(B), and contributing			
		employers and sponsoring organizations of sect		-			
ফ		employees' beneficiary organizations (see instr).		·		6	
Assets	7	Notes and loans receivable, net			7		
As	8	Inventories for sale or use		8			
	9				129,118.	9	18,331.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	23,995,054.			
	b	Less: accumulated depreciation		7,049,267.	17,301,194.	10c	16,945,787.
	11	Investments - publicly traded securities		6,379,364.	11	7,210,239.	
	12	Investments - other securities. See Part IV, line 1	280,540.	12	432,194.		
	13	Investments - program-related. See Part IV, line		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	2,931,163.	15	3,109,893.		
	16	<b>Total assets.</b> Add lines 1 through 15 (must equal			28,199,874.	16	28,791,635.
	17	Accounts payable and accrued expenses			215,073.	17	87,013.
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F				21	
S	22	Loans and other payables to current and former	office	rs, directors, trustees,			
≝		key employees, highest compensated employee	s, and	disqualified persons.			
Liabilities		Complete Part II of Schedule L				22	
=	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated	d third	parties		24	
	25	Other liabilities (including federal income tax, pa		Г			
		parties, and other liabilities not included on lines	17-24	). Complete Part X of			
		Schedule D			220,000.	25	0.
	26	Total liabilities. Add lines 17 through 25			435,073.	26	87,013.
		Organizations that follow SFAS 117 (ASC 958	), chec	k here X and			
es		complete lines 27 through 29, and lines 33 an	d 34.				
Fund Balances	27	Unrestricted net assets			16,176,055.	27	16,768,514.
3ale	28	Temporarily restricted net assets			1,996,801.	28	2,341,523.
ğ	29	Permanently restricted net assets		<u></u>	9,591,945.	29	9,594,585.
Ţ		Organizations that do not follow SFAS 117 (A	SC 95	B), check here ▶			
		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds				30	
18S	31	Paid-in or capital surplus, or land, building, or eq				31	
Net Assets or	32	Retained earnings, endowment, accumulated in		F		32	
Z	33	Total net assets or fund balances			27,764,801.	33	28,704,622.
	34	Total liabilities and net assets/fund balances			28,199,874.	34	28,791,635.

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Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,39		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,08		
3	Revenue less expenses. Subtract line 2 from line 1	3			74.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	27,76		
5	Net unrealized gains (losses) on investments	5	62	<u>9,3</u>	47.
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	28,70	4,6	22.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				Ш
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a			
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e 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 in Sch	edule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits	<u></u>	3b		
			Form	990	(2017)

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## **Public Charity Status and Public Support**

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

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization Employer identification number The Walden Woods Project 95-4292658 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives: (1) more than 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 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other in your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Total

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

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	2,284,551.	3,347,970.	2,339,370.	1,855,679.	1,318,908.	11,146,478.
2	Tax revenues levied for the organ-						_
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						_
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	2,284,551.	3,347,970.	2,339,370.	1,855,679.	1,318,908.	11,146,478.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						4,550,770.
6	Public support. Subtract line 5 from line 4.						6,595,708.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	<b>(e)</b> 2017	(f) Total
7	Amounts from line 4	2,284,551.	3,347,970.	2,339,370.	1,855,679.	1,318,908.	11,146,478.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	73,694.	91,884.	112,323.	122,401.	132,093.	532,395.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						11,678,873.
12	Gross receipts from related activities,	, etc. (see instruction	ons)			12	544,727.
13	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)	
_	organization, check this box and stor						<u></u>
	ction C. Computation of Publ						F.C. 40
14	Public support percentage for 2017 (					14	56.48 %
15	Public support percentage from 2016					15	60.09 %
16a	33 1/3% support test - 2017. If the o	•		•		•	
_	stop here. The organization qualifies						<b>▶</b> X
b	33 1/3% support test - 2016. If the d						is box
	and <b>stop here.</b> The organization qual						▶□
17a	10% -facts-and-circumstances tes	_					
	and if the organization meets the "fac			-		-	
	meets the "facts-and-circumstances"						
b	10% -facts-and-circumstances tes	ū				•	
	more, and if the organization meets the		•				
	organization meets the "facts-and-circ						
<u>18</u>	Private foundation. If the organization	on did not check a l	box on line 13, 16	a, 16b, 17a, or 17k	o, check this box a	nd see instruction	s

Schedule A (Form 990 or 990-EZ) 2017

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

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

Section A. Public Support	elow, please com	piete Part II.)				
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2014	(6) 2015	(4) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
membership fees received. (Do not						
include any "unusual grants.")						
<b>2</b> Gross receipts from admissions, merchandise sold or services per-						
formed, 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 bus-						
iness under section 513						
4 Tax revenues levied for the organ-						
ization'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>b</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						
<b>c</b> Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support			1			
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	<b>(e)</b> 2017	(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	<u> </u>					
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
c Add lines 10a and 10b						_
<b>11</b> 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.)						
14 First five years. If the Form 990 is for	the organization	s first second thi	rd fourth or fifth t	ax vear as a sectio	n 501(c)(3) organiz	ration
check this box and <b>stop here</b>	•	•		•	. , . ,	<b></b> ,
Section C. Computation of Publ						
15 Public support percentage for 2017 (I			column (f))		15	%
<b>16</b> Public support percentage from 2016					16	%
Section D. Computation of Inves					1 1	,,
17 Investment income percentage for 20					17	%
18 Investment income percentage from 2					18	%
19a 33 1/3% support tests - 2017. If the						
more than 33 1/3%, check this box a						
b 33 1/3% support tests - 2016. If the						
line 18 is not more than 33 1/3%, che						
20 Private foundation. If the organization						

#### Part IV | Supporting Organizations

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

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c 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.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

1			Yes	No
2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b				
2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b		1		
3a  3b  3c  4a  4b  4c  5a  5b  5c  6  7  8  9a  9b  9c  10a  10b				
3b 3c 4a 4b 4b 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b		2		
3b 3c 4a 4b 4b 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b				
3c 4a 4b 4b 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b		3a		
3c 4a 4b 4b 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b				
4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b		3b		
4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b		20		
4b  4c  5a  5b  5c  6  7  8  9a  9b  9c  10a  10b		30		
4b  4c  5a  5b  5c  6  7  8  9a  9b  9c  10a  10b		4a		
4c 5a 5b 5c 6 7 8 9a 9b 9c 10a 10b				
5a 5b 5c 6 7 8 9a 9b 9c 10a 10b		4b		
5a 5b 5c 6 7 8 9a 9b 9c 10a 10b				
5b 5c 6 7 8 9a 9b 9c 10a 10b		4c		
5b 5c 6 7 8 9a 9b 9c 10a 10b				
5b 5c 6 7 8 9a 9b 9c 10a 10b		5a		
5c 6 7 8 9a 9b 9c 10a 10b				
6 7 8 9a 9b 9c				
7 8 9a 9b 9c 10a				
9a 9b 9c 10a		6		
9a 9b 9c 10a				
9a 9b 9c 10a		7		
9a 9b 9c 10a		Q		
9b 9c 10a		3		
9b 9c 10a		9a		
9c 10a				
10a		9b		
10b		9c		
10b				
		10a		
	^		N F 3	2017

Pai	t IV   Supporting Organizations (continued)			.g. c
	(continued)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			-110
	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		
	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		
	tion B. Type I Supporting Organizations			
	71 11 3 3		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 <b>Part VI</b> 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		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	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		
Sec	tion D. All Type III Supporting Organizations			
	, , , , , , , , , , , , , , , , , , ,		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (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			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	tructions	s).	
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orga	anizations			
1	1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instruction					
	other Type III non-functionally integrated supporting organizations must co	mplete \$	Sections A through E.			
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)		
1	Net short-term capital gain	1				
2	Recoveries of prior-year distributions	2				
3	Other gross income (see instructions)	3				
4	Add lines 1 through 3	4				
5	Depreciation and depletion	5				
6	Portion of operating expenses paid or incurred for production or					
	collection of gross income or for management, conservation, or					
	maintenance of property held for production of income (see instructions)	6				
7	Other expenses (see instructions)	7				
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8				
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)		
1	Aggregate fair market value of all non-exempt-use assets (see					
	instructions for short tax year or assets held for part of year):					
а	Average monthly value of securities	1a				
b	Average monthly cash balances	1b				
С	Fair market value of other non-exempt-use assets	1c				
d	Total (add lines 1a, 1b, and 1c)	1d				
е	Discount claimed for blockage or other					
	factors (explain in detail in Part VI):					
2	Acquisition indebtedness applicable to non-exempt-use assets	2				
3	Subtract line 2 from line 1d	3				
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,					
	see instructions)	4				
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5				
6	Multiply line 5 by .035	6				
7	Recoveries of prior-year distributions	7				
8	Minimum Asset Amount (add line 7 to line 6)	8				
Sect	ion C - Distributable Amount			Current Year		
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1				
2	Enter 85% of line 1	2				
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3				
4	Enter greater of line 2 or line 3	4				
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-functional	y integra	ated Type III supporting org	ganization (see		
	instructions).					

Schedule A (Form 990 or 990-EZ) 2017

ı aı	Type iii Non-Functionally integrated 509	(a)(3) Supporting Org	amzations (continued)	
Secti	on D - Distributions			Current Year
_1_	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose			
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	ne organization is responsive	Э	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
С	From 2014			
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
ī	Carryover from 2012 not applied (see instructions)			
	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D,			
	line 7:			
a	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j			
	and 4c.			
8	Breakdown of line 7:			
a	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

#### **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

The Walden Woods Project

**Employer identification number** 95-4292658

Pai	t I Organizations Maintaining Donor Advised Fur		s or Accou	Ints. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6.			and a second sec
	organization answered Tes on Form 550, Fart IV, into 6.	(a) Donor advised funds	(b) Fun	ds and other accounts
4	Total number at end of year	(a) zener davised idinae	(2) : 3	
1 2	Total number at end of 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			
	are the organization's property, subject to the organization's exclusi			Yes No
6	Did the organization inform all grantees, donors, and donor advisors		•	
	for charitable purposes and not for the benefit of the donor or dono	r advisor, or for any other purpos	e conferring	
Da	impermissible private benefit?			Yes No
Pai			Part IV, line 7	·
1	Purpose(s) of conservation easements held by the organization (che			
	Preservation of land for public use (e.g., recreation or education	· —		
	X Protection of natural habitat	Preservation of a ce	rtified historic	structure
	X Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualified cor	nservation contribution in the forn	n of a conserv	ation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements		2a	4
b	Total acreage restricted by conservation easements		2b	61.10
С	Number of conservation easements on a certified historic structure	included in (a)	2c	0
d	Number of conservation easements included in (c) acquired after 7/	25/06, and not on a historic struc	ture	
	listed in the National Register		2d	0
3	Number of conservation easements modified, transferred, released,			n during the tax
	year ▶0			
4	Number of states where property subject to conservation easement	: is located ▶ 1		
5	Does the organization have a written policy regarding the periodic m	nonitoring, inspection, handling of	f	
	violations, and enforcement of the conservation easements it holds'	?		Yes X No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling			
	<b>1</b> 00			
7	Amount of expenses incurred in monitoring, inspecting, handling of	violations, and enforcing conserv	ation easeme	nts during the year
	<b>▶</b> \$ 1,675.			
8	Does each conservation easement reported on line 2(d) above satis	fy the requirements of section 17	0(h)(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?			Yes No
9	In Part XIII, describe how the organization reports conservation ease			
	include, if applicable, the text of the footnote to the organization's fi	nancial statements that describe	s the organiza	tion's accounting for
	conservation easements.			
Pai	t III Organizations Maintaining Collections of Art,	Historical Treasures, or 0	Other Simil	ar Assets.
	Complete if the organization answered "Yes" on Form 990, P	art IV, line 8.		
1a	If the organization elected, as permitted under SFAS 116 (ASC 958)	, not to report in its revenue state	ement and bala	ance sheet works of art,
	historical treasures, or other similar assets held for public exhibition	, education, or research in further	ance of public	service, provide, in Part XIII,
	the text of the footnote to its financial statements that describes the	ese items.		
b	If the organization elected, as permitted under SFAS 116 (ASC 958)	, to report in its revenue statemen	nt and balance	e sheet works of art, historical
	treasures, or other similar assets held for public exhibition, educatio	n, or research in furtherance of p	ublic service, į	provide the following amounts
	relating to these items:	·		-
	(i) Revenue included on Form 990, Part VIII, line 1			\$
				\$ 715,262.
2	If the organization received or held works of art, historical treasures,			
	the following amounts required to be reported under SFAS 116 (AS			
а	Revenue included on Form 990, Part VIII, line 1			\$
b	Assets included in Form 990, Part X			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Pai	t III Organizations Maintaining Co	llections of Ar	t, Historical Tr	easures, c	r Othe	r Simila	ar Asse	<b>ts</b> (continued)	
3	Using the organization's acquisition, accession	, and other records	s, check any of the	following tha	t are a si	gnificant ι	use of its	collection item	าร
	(check all that apply):								
а	Y Public exhibition	d	Loan or exc	hange progra	ıms				
b	X Scholarly research	е	Other						
С	X Preservation for future generations								
4									
5	During the year, did the organization solicit or r	eceive donations o	f art, historical trea	sures, or othe	er similar	assets			
	to be sold to raise funds rather than to be main	ntained as part of th	ne organization's co	ollection?				Yes X	☐ No_
Pai	t IV Escrow and Custodial Arrange	ements. Comple	te if the organizatio	n answered "	'Yes" on	Form 990	, Part IV,	line 9, or	
	reported an amount on Form 990, Part	X, line 21.							
1a	Is the organization an agent, trustee, custodian	or other intermed	ary for contribution	s or other as	sets not	included		_	_
	on Form 990, Part X?							Yes	No
b	If "Yes," explain the arrangement in Part XIII ar	nd complete the following	owing table:						
								Amount	
С	Beginning balance					. 1c			
	Additions during the year								
е	Distributions during the year								
f	Ending balance								
2a	Did the organization include an amount on For							Yes	No
b	If "Yes," explain the arrangement in Part XIII. C	heck here if the ex	olanation has been	provided on	Part XIII				
Pai	t V Endowment Funds. Complete if t	he organization ans	swered "Yes" on Fo	rm 990, Part	IV, line 1	0.			
		(a) Current year	(b) Prior year	(c) Two year	s back (	<b>d)</b> Three y	ears back	(e) Four years	back
1a	Beginning of year balance	6,659,904.	6,128,014.	6,631	1,766.	6,1	17,000.	3,867,	,760.
	Contributions	-100,155.	207,475.	50	,000.		12,459.	1,496,	,468.
С	Net investment earnings, gains, and losses	1,133,234.	374,678.		-253.	5	50,114.	790,	,907.
d	Grants or scholarships								
	Other expenditures for facilities								
	and programs	1,375.	2,067.	503	3,109.				
f	Administrative expenses	49,175.	48,196.	50	390.		47,807.	38,	,135.
g	End of year balance	7,642,433.	6,659,904.	6,128	3,014.	6,6	31,766.	6,117,	,000.
2	Provide the estimated percentage of the current	nt year end balance	e (line 1g, column (a	a)) held as:	•				
а	Board designated or quasi-endowment	•	%						
b	Permanent endowment > 76.91	%	=						
С	Temporarily restricted endowment ▶ 23	<u>.0</u> 9 %							
	The percentages on lines 2a, 2b, and 2c shoul								
За	Are there endowment funds not in the possess	sion of the organiza	tion that are held a	nd administe	red for th	ne organiz	ation		
	by:							Yes	No
	(i) unrelated organizations							3a(i)	X
	(ii) related organizations							3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organization	ons listed as require	ed on Schedule R?					3b	
4	Describe in Part XIII the intended uses of the o	rganization's endo	wment funds.						
Pai	t VI Land, Buildings, and Equipme	nt.							
	Complete if the organization answered	"Yes" on Form 990	, Part IV, line 11a. S	See Form 990	, Part X,	line 10.			
	Description of property	(a) Cost or ot	her (b) Cost	or other	(c) Ac	cumulate	d	(d) Book valu	e
		basis (investm	ent) basis	(other)	dep	reciation			
1a	Land		13,78	4,587.			1	3,784,5	87.
	Buildings		9,40	8,384.	6,3	341,6	75.	3,066,7	09.
	Leasehold improvements			2,924.		58,5		14,3	
d	Equipment			6,035.	5	90,44		45,5	91.
е	Other		9	3,124.		58,5	74.	34,5	50.
	. Add lines 1a through 1e. (Column (d) must equ	ual Form 990, Part	K, column (B), line 1	0c.)			<b>▶</b> 1	6,945,7	87.

Schedule D (Form 990) 2017 The Walden	Woods Project	t 95	-4292658 Page
Part VII Investments - Other Securities.			<u> </u>
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1) Financial derivatives			
(2) Closely-held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1) Collections			715,262
(2) Conservation Restriction-	PR		2,000,000
(3) Other Assets			15,500
(4) Conservation Restriction-	FH		206,339
(5) Film Production Costs			172,792
(6)			· · · · ·

(2) Conservation Restriction-PR       2,000,00         (3) Other Assets       15,50         (4) Conservation Restriction-FH       206,33         (5) Film Production Costs       172,79         (6)       (7)         (8)       (8)	(/	(,
(3) Other Assets       15,50         (4) Conservation Restriction-FH       206,33         (5) Film Production Costs       172,79         (6)       (7)         (8)       (8)		715,262.
(4) Conservation Restriction-FH 206,33 (5) Film Production Costs 172,79 (6) (7) (8)	(2) Conservation Restriction-PR	2,000,000.
(5) Film Production Costs 172,79 (6) (7) (8)		15,500.
(6) (7) (8)	$\sim 1.7$	206,339.
(7) (8)	(5) Film Production Costs	172,792.
	(6)	
	(7)	
	(8)	
(9)	(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)   ■ 3,109,89	Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	3,109,893.

Part X Other Liabilities.

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

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	

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

Walden	Woods	Project	95-4292658	Page 4

Pa	t XI Reconciliation of Revenue per Audited Financial St	atemente with	•		
	Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.			
1	Total revenue, gains, and other support per audited financial statements .			1	3,270,732.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	629,347.		
b	Donated services and use of facilities	2b	22,032.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	274,853.		
е	Add lines 2a through 2d			2e	926,232.
3	Subtract line 2e from line 1			3	2,344,500.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	49,175.		
b	Other (Describe in Part XIII.)	4b			
	Add lines 4a and 4b			4c	49,175.
С	Add into 18 and 18			40	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12	<u>!.)</u>		5	2,393,675.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 rt XII Reconciliation of Expenses per Audited Financial St	tatements Wit		5	2,393,675.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12  rt XII Reconciliation of Expenses per Audited Financial St  Complete if the organization answered "Yes" on Form 990, Part IV, line	tatements Wit ne 12a.	h Expenses per	5	2,393,675. irn.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 rt XII Reconciliation of Expenses per Audited Financial St	tatements Wit ne 12a.	h Expenses per	5	2,393,675.
5 Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12  IT XII Reconciliation of Expenses per Audited Financial Statements  Complete if the organization answered "Yes" on Form 990, Part IV, li  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:	tatements Wit	h Expenses per	5 Retu	2,393,675. irn.
5 Pa 1 2	Total revenue. Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12 rt XII Reconciliation of Expenses per Audited Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements	tatements Wit	h Expenses per	5 Retu	2,393,675. irn.
5 Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12  IT XII Reconciliation of Expenses per Audited Financial Statements  Complete if the organization answered "Yes" on Form 990, Part IV, li  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:	tatements With ne 12a.	h Expenses per	5 Retu	2,393,675. irn.
5 Pa 1 2	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12  rt XII Reconciliation of Expenses per Audited Financial St  Complete if the organization answered "Yes" on Form 990, Part IV, li  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities	2) tatements With ne 12a. 2a 2b	h Expenses per	5 Retu	2,393,675. irn.
5 Pa	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 rt XII Reconciliation of Expenses per Audited Financial Statements  Complete if the organization answered "Yes" on Form 990, Part IV, li  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses	2) tatements With ne 12a.  2a 2b 2c	h Expenses per	5 Retu	2,393,675. irn. 2,330,911.
Part 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12  It XII Reconciliation of Expenses per Audited Financial St  Complete if the organization answered "Yes" on Form 990, Part IV, li  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIII.)	2a 2b 2c 2d	22,032. 274,853.	5 Retu	2,393,675. irn. 2,330,911. 296,885.
Part 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12  It XII Reconciliation of Expenses per Audited Financial St  Complete if the organization answered "Yes" on Form 990, Part IV, li  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses	2a 2b 2c 2d	22,032. 274,853.	5 Retu	2,393,675. irn. 2,330,911.
Part 1 2 a b c d e	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 rt XII Reconciliation of Expenses per Audited Financial Statements  Complete if the organization answered "Yes" on Form 990, Part IV, li  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIII.)  Add lines 2a through 2d	2a 2b 2c 2d	22,032. 274,853.	5 Retu	2,393,675. irn. 2,330,911. 296,885.
5 Pa 1 2 a b c d e 3	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12  It XII Reconciliation of Expenses per Audited Financial St  Complete if the organization answered "Yes" on Form 990, Part IV, li  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIII.)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	22,032. 274,853.	5 Retu	2,393,675. irn. 2,330,911. 296,885.
1 2 a b c d e 3 4	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12  IT XII Reconciliation of Expenses per Audited Financial Statements  Complete if the organization answered "Yes" on Form 990, Part IV, line 12  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIII.)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d 4a	22,032. 274,853.	5 Retu	2,393,675.  irn.  2,330,911.  296,885.  2,034,026.
5 Pal 1 2 a b c d e 3 4 a b b	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12  It XII Reconciliation of Expenses per Audited Financial Statements  Complete if the organization answered "Yes" on Form 990, Part IV, line Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIII.)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:  Investment expenses not included on Form 990, Part VIII, line 7b	2a 2b 2c 2d 4a 4b	22,032. 274,853. 49,175.	5 Retu	2,393,675. irn. 2,330,911. 296,885.

#### Part XIII Supplemental Information.

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

#### Part II, line 9:

Conservation easements are reported in the financial statements at appraised value. Appraised value is based on the difference of the estimated value of the related conservation land before and after the restriction is granted.

#### Part III, line 4:

The Thoreau Institute Library at The Walden Woods Project houses the world's most comprehensive collection of material related to Henry David Thoreau. In order to fulfill our educational mission, all materials are freely accessible by visitors and many are being made virtually accessible through the internet to serve those who are not able to visit the library

Part XIII | Supplemental Information (continued)

in person. In addition, our Curator of Collections is available to answer reference questions, help with research and give talks to visiting students and other groups.

#### Part V, line 4:

The Walden Woods Project intends to continue to solicit contributions to build its endowment fund. Ultimately, earnings from the endowment will be applied to offset annual operating costs.

#### Part X, Line 2:

The Project is a non-profit corporation organized under the laws of Massachusetts and is exempt from federal income taxes under Section 501(c)(3) of the Internal Revenue Code. Accordingly, the financial statements do not reflect a provision for income taxes. This determination has been reviewed according to guidance in a Financial Accounting Standards Board pronouncement related to accounting for uncertainty in income taxes. In determining the recognition of uncertain tax positions, the Project now applies a more-likely-than-not recognition threshold and determines the measurement of uncertain tax positions by considering the amounts and probabilities of the outcomes that could be realized upon ultimate settlement with taxing authorities. As of December 31, 2017, the Project has no uncertain tax positions that qualify for either recognition or disclosure in the financial statements. The Project is generally subject to potential examination by taxing jurisdictions for the prior three years.

The Project is potentially subject to Unrelated Business Income Tax (UBIT)

relating to the sale of produce at a farm stand, which is not related to

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017 The Walden Woods Project	95-4292658 Page 5
Part XIII   Supplemental Information (continued)	
the Project's primary purpose of preserving conservation la	nd. For the
years ended December 31, 2017 and 2016, the Project did not	incur any UBIT
related to its farm stand operation.	
Part XI, Line 2d - Other Adjustments:	
Cost of Goods Sold- The Farm at Walden Woods	67,457.
Special Event Costs	207,396.
Total to Schedule D, Part XI, Line 2d	274,853.
Part XII, Line 2d - Other Adjustments:	
Cost of Goods Sold- The Farm at Walden Woods	67,457.
Special Event Costs	207,396.
Total to Schedule D, Part XII, Line 2d	274,853.
Schedule D, Page 4, Part XII and XIII, line 2d	
Cost of goods sold related to The Walden Woods Project's fa	rmstand
activity and expenses related to special events are categor	ized as
expenses for financial statement purposes and included in re	evenue for 990
filing purposes.	

#### **SCHEDULE G**

Department of the Treasury

Internal Revenue Service

(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.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization

The Walden Woods Project

Employer identification number 95-4292658

	Complete if the organization answer	ered "Y	'es" oı	n Form 990, Part IV,	line 17. Form 990-E2		
Indicate whether the organization rais     a	sed funds through any of the following solicitates of Solicitates of Solicitates of Special solicitates or oral agreement with any individual solicitates or entities (fundraisers) pursuitates of solicitates of solicitates or entities (fundraisers) pursuitates of solicitates of solicitates or entities (fundraisers) pursuitates of solicitates of solic	tion of tion of fundra (incluence)	non-g gover aising ding o ional f	overnment grants nment grants events fficers, directors, true fundraising services?	stees, or Yes		
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?  (iv) Gross receipts from activity (v) Amount paid to (or retained by) fundraiser listed in col. (i) (vi) Amount paid to (or retained by) fundraiser listed in col. (ii)					
		Yes	No				
Total  3 List all states in which the organization or licensing.	on is registered or licensed to solicit	contrib	• • • • • • • • • • • • • • • • • • •	s or has been notified	d it is exempt from re	egistration	
LHA For Paperwork Reduction Act Noti	ice. see the Instructions for Form	990 or	990-1	EZ. S	Schedule G (Form 9	90 or 990-EZ) 2017	

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

of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.									
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events			
				Movie	None	(add col. (a) through			
			Gala	Premiere		col. (c))			
a)			(event type)	(event type)	(total number)	Coi. (C))			
ž									
Revenue	1	Gross receipts	780,237.	24,452.		804,689.			
ш									
	2	Less: Contributions	109,461.	5,250.		114,711.			
	3	Gross income (line 1 minus line 2)	670,776.	19,202.		689,978.			
	4	Cash prizes							
			4 000			4 000			
S	5	Noncash prizes	4,000.			4,000.			
nse		Double - Who a sale	658.	260.		918.			
хре	6	Rent/facility costs	030.	200.		910.			
Direct Expenses	_	Food and houses	94,434.	7,486.		101,920.			
jrec	′	Food and beverages	74,454.	7,400.		101,720.			
	8	Entertainment	43,370.	14,129.		57.499.			
	9	Other direct expenses	40,273.	2,786.		57,499. 43,059.			
	10				•	207,396.			
		Net income summary. Subtract line 10 from li			_	482,582.			
Pa									
•		\$15,000 on Form 990-EZ, line 6a.							
Φ			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add			
eun			(u) Billigo	bingo/progressive bingo	(b) Other gaming	col. (a) through col. (c))			
Revenue									
<u> </u>	1	Gross revenue							
es	2	Cash prizes				_			
ens									
Direct Expenses	3	Noncash prizes							
ect	4	Pont/facility costs							
Ë	4	Rent/facility costs							
	5	Other direct expenses							
	_	Cutor direct experieds	Yes %	Yes %	Yes %				
	6	Volunteer labor	No No	No No	No No				
	_								
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)		<b>&gt;</b>				
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		<b>&gt;</b>				
		ter the state(s) in which the organization condu	· · -						
	a Is the organization licensed to conduct gaming activities in each of these states?								
b	lf "	No," explain:							
40	\ <u>\</u>	and any of the approximation to the second	walead access to the st	annada aka aka aka da ada a		V N			
		ere any of the organization's gaming licenses re	•	-	year?	Yes No			
D	II "	Yes," explain:							
	_								

732082 09-13-17

Schedule G (Form 990 or 990-EZ) 2017

Sch	edule G (Form 990 or 990-EZ) 2017 The Walden Woods Project 95-	-4292658	Page 3
11	Does the organization conduct gaming activities with nonmembers?	Yes	No No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:		
	The organization's facility	13a	%
	An outside facility		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	[	
•	Elitor the hallo did address of the person this propares the organization organization gamming operation to be the did not re-		
	Name		
	Address ►		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	☐ No
k	o If "Yes," enter the amount of gaming revenue received by the organization > \$ and the amount		
	of gaming revenue retained by the third party >\$		
	Fig. If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation > \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
	Mandatory distributions:		
8	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	└── No
k	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	:	
_	organization's own exempt activities during the tax year > \$		
Pa	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part II	I, lines 9, 9b, 1	0b, 15b,
	15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
			_

Schedule G (F	orm 990 or 990-EZ)	The Wald	len Woods	Project	95-4292658 Page 4
Part IV S	orm 990 or 990-EZ) Supplemental Infor	mation (continu	ued)		
-					

# SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

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

The Walden Woods Project

Employer identification number 95-4292658

Pai	rt i Types of Property										
		(a)	(b)	(c)				(d)			
		Check if applicable	Number of contributions or	Noncash contr amounts repor		, no		nod of det contribut		_	
		арріісаріє		Form 990, Part V		l lic	nicasii	CONTINUE	lion ai	nount	
1	Art - Works of art										
2	Art - Historical treasures										
3	Art - Fractional interests										
4	Books and publications										
5	Clothing and household goods										
6	Cars and other vehicles										
7	Boats and planes										
8	Intellectual property										
9	Securities - Publicly traded	X	2	202	,689.	FMV	at	time	of	Do	nat
10	Securities - Closely held stock										
11	Securities - Partnership, LLC, or										
	trust interests										
12	Securities - Miscellaneous										
13	Qualified conservation contribution -										
	Historic structures										
14	Qualified conservation contribution - Other										
15	Real estate - Residential										
16	Real estate - Commercial										
17	Real estate - Other										
18	Collectibles										
19	Food inventory										
20	Drugs and medical supplies										
21	Taxidermy										
22	Historical artifacts										
23	Scientific specimens										
24	Archeological artifacts										
25	Other • ()										
26	Other • ()										
27	Other • ()										
28	Other (										
29	Number of Forms 8283 received by the organize	zation durin	g the tax year for o	contributions							
	for which the organization completed Form 82	83, Part IV,	Donee Acknowled	gement	29						
								_		Yes	No
30a	During the year, did the organization receive by	y contributio	on any property rep	oorted in Part I, lin	es 1 throu	gh 28, t	that it				
	must hold for at least three years from the date	e of the initia	al contribution, and	d which isn't requir	red to be u	ised for					
	exempt purposes for the entire holding period'	?							30a		X
b	<b>b</b> If "Yes," describe the arrangement in Part II.										
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?							31		Х	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash										
	contributions?							X			
b	If "Yes," describe in Part II.										
33	If the organization didn't report an amount in c	olumn (c) fo	or a type of propert	y for which colum	n (a) is che	cked,					
	describe in Part II.										
ТΗΔ	For Panerwork Reduction Act Notice see	the Instruc	tions for Form 90	n			Sci	adula M	(Forn	990)	2017

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

732142 09-07-17

#### **SCHEDULE 0**

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

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.

2017
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

The Walden Woods Project

Employer identification number 95-4292658

Form 990, Part III, Line 4a, Program Service Accomplishments:

wide variety of organized groups, including school groups, elder

services groups, and tourists. Management activities include

maintenance of existing trails, trail design, interpretation and

construction, maintenance of trail head parking facilities, and

ecological improvements intended to benefit wildlife and the natural

value of our land.

Invasive exotic plants are a major threat to the ecological integrity of our land. The Project actively manages our properties to reduce the prevalence of invasive plants and to minimize the threat they represent. The Project's land management programs support collaboration between a wide variety of civic and environmental groups who regularly provide volunteer invasive species management to our organization.

The Walden Woods Project manages conservation restrictions on 67.8

acres of land, which prevents development of sites not owned in fee

(total acres owned in fee: 97.6). Annual conservation restriction

monitoring is done to ensure that the protections prescribed in the

conservation restrictions are in effect.

Farm at Walden Woods:

The Walden Woods Project operates a USDA-certified Organic vegetable

farm, carrying forward a local tradition of farming on a parcel of land

at the north-western edge of historic Walden Woods. The farm is located

on a major east-west route used by thousands of commuters and travelers

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2017)

732211 09-07-17

Name of the organization

**Employer identification number** 

95-4292658 The Walden Woods Project daily and is of great significance in maintaining the historically rural character of Concord through Walden Woods. The farm borders on our Bear Garden Hill and Boiling Spring properties, providing an important buffer to those woodlands and maintaining the visual

character of farm land and woodland along this major travel corridor.

#### Friends of Walden Pond:

The Walden Woods Project is the official Friends of Walden Pond group. Walden Pond is visited by nearly 600,000 people every year. They come to experience the pond that inspired Thoreau's masterpiece, to learn about Thoreau in the very place he lived, to take a hike through the Walden Woods, or just escape the summer heat at a beautiful New England pond. No matter the reason people come, Walden is a heavily-used state park, and requires a lot of care and maintenance to keep it healthy and protected.

The Friends of Walden Pond partners with the Massachusetts Department of Conservation and Recreation to support the programs and facilities at Walden Pond State Reservation. We are working to make Walden more accessible, to keep the pond healthy, and to serve the needs of the diverse people that visit this iconic part of the New England landscape.

Form 990, Part III, Line 4b, Program Service Accomplishments: world-and to develop an environmental ethic. As Thoreau himself is a highly interdisciplinary subject, we address the topics of transcendentalism, social reform, writing, natural history and 19-century history in our programs.

Employer identification number 95-4292658

We have had several years of record-breaking numbers for student groups visiting us here in Walden Woods, having served 769 students for 2014-2015, 1101 students in 2015-2016, and 1411 in 2016-2017. Current completed and planned visits put our 2017-2018 number over 1600. When groups come for a visit, we put together a customized experience, whereby they either participate in a guided educational walk through areas of Walden Woods, an interactive lesson at a vernal pool, and/or a session with our Curator of Collections in the Thoreau Institute Library, which houses the world's most extensive collection of Thoreau-related material. Additionally, we continue to serve several hundred students each year through our Skype in the Classroom program (for those who are too far away to visit the Woods).

Our Approaching Walden summer professional development program brings
in two dozen educators from across the country for a 6-day, immersive
study of Thoreau's writings and the place that inspired him. The
program receives consistently high acclaim each year from participants.

Participants have the option of completing additional readings and
assignments to receive 3 graduate-level credits for the course through
Fitchburg State University.

As 2017 marked Thoreau's bicentennial, in addition to our Stewardship

Lecture Series, we also hosted or coordinated a number of public

programs, including a first-of-its-kind Thoreau Bicentennial Statewide

Read, in which nearly 60% of the towns/cities across Massachusetts

participated. We welcomed actor and activist Christopher Child back to

the stage for a special bicentennial performance of his one-man play

Name of the organization

**Employer identification number** 

95-4292658 The Walden Woods Project about Thoreau's life, Clear Sky, Pure Light. We also hosted a panel of scholars who have translated Thoreau into other languages, including

Portuguese, Chinese, Spanish, Czech, and Finnish.

Form 990, Part III, Line 4c, Program Service Accomplishments: in-person or virtually. In 2017, visitors and researchers came from Canada, Europe, Asia and Australia. Translators from around the world have worked with the curator to provide accurate and representative translations. "Skype in the Classroom" sessions bring our curator into classrooms around the world, reaching hundreds of students in 2017, and working with a class in China in 2018. We continue to publish many works electronically and update finding aids to our collections.

Form 990, Part VI, Section B, line 11b:

Draft copies of the Federal Form 990 for the year ended December 31, 2017 were provided via e-mail and paper copy to all members of the Board of Directors for their review. All comments and suggested changes from members of the Board of Directors were gathered, reviewed and when deemed appropriate the Federal Form 990 was modified to include these comments and changes.

Form 990, Part VI, Section B, Line 12c:

On an annual basis the Project provides a copy of its conflict of interest policy to all members of the Board of Directors. The Executive Director reviews with the Board any potential conflicts of interest that may arise and the impact, if any, such conflicts may have upon the organization. the year ended December 31, 2017, no such conflicts of interest were reported by any member of the Board of Directors.

The Walden Woods Project	95-4292658
Form 990, Part VI, Section B, Line 15:	
The Board of Directors of the Walden Woods Project meets	without Kathleen
Anderson, Executive Director, being present to discuss he	r compensation and
any related salary and benefit issues. The Treasurer the	n forwards all
related documentation and approval to the Accounting Mana	ger directly and
the related payroll is adjusted accordingly.	
Form 990, Part VI, Section C, Line 19:	
The Walden Woods Project's annual audited financial state	ments and
governing documents are available at the Attorney General	's office of the
Commonwealth of Massachusetts or upon direct request to t	he Walden Woods
Project.	