PUBLIC INSPECTION COPY

EXTENDED TO NOVEMBER 15, 2021

Form **990**

Return of Organization Exempt From Income Tax

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

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

OMB No. 1545-0047

Inter	nal Rev	renue Service	➤ Go to www.irs.gov/Form990 for instructions and	the latest	information.	Inspection
Α	For th	ne 2020 calend	ar year, or tax year beginning and	ending		
В	Check i applicat	C Name o	f organization		D Employer identif	cation number
[Addr	DUTC	HESS LAND CONSERVANCY, INC.			
F	Nam	0	usiness as		14-16675	26
=	Initia	-	and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	
F	Final	DO D	OX 138	1100111/3016	845 677	
L	lretur termi aled		own, state or province, country, and ZIP or foreign postal code		G Gross readipts \$	6,248,870.
r	-1Ame	nded MITT	BROOK, NY 12545		H(a) Is this a group r	
F	retur Appl		nd address of principal officer: NANCY HATHAWAY			
L	tion		X 138, MILLBROOK, NY 12545		for subordinates	
_	-	kempt status:		or 527	H(b) Are all subordinates in	
			X 501(c)(3) 501(c)() ◀ (insert no.) 4947(a)(1) HESSLAND.ORG	01 [] 527		list. See instructions
				1	H(c) Group exemption	
	art I		X Corporation Trust Association Other ▶	I L Year	of formation, 1900[M State of legal domicile; NY
10.00	T	1 1 3 2 2 1 0 1 0 1 0 1 1 1 1 1 1 1 1 1 1 1 1	e the organization's mission or most significant activities: THE	DC MIT	לאשבטאו בה ט	EDICAMED MO
ė	1					
Governance			ING THE SCENIC, AGRICULTURAL, AND			
ern	2		if the organization discontinued its operations or dispos		1	sets,
Š	3				3	27
∞	4		ependent voting members of the governing body (Part VI, line 1b)			14
Activities &	5		of individuals employed in calendar year 2020 (Part V, line 2a)		And the second of the second o	27
Ξ	6		of volunteers (estimate if necessary)			
Act	7 a				7 <u>a</u>	0.
-	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11		7b	0.
					Prior Year	Current Year
e	8		and grants (Part VIII, line 1h)		4,880,168.	2,253,809.
ent	9		ce revenue (Part VIII, line 2g)	(21224)	0.	0.
Revenue	10		come (Part VIII, column (A), lines 3, 4, and 7d)		238,978.	479,805.
ш.	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-131,945.	-19,896.
	12		add lines 8 through 11 (must equal Part VIII, column (A), line 12)	4.1/43374	4,987,201.	2,713,718.
	13		nilar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	14	5000 10 000 000 000 000 000 000 000 000	o or for members (Part IX, column (A), line 4)	0.000	0.	0.
es	15		compensation, employee benefits (Part IX, column (A), lines 5-10)	19,9371	973,555.	997,338.
Expenses	16a		indraising fees (Part IX, column (A), line 11e)		0.	0.
ž	b		ng expenses (Part IX, column (D), line 25) 119,19	97.	2 550 410	1 000 050
ш	17		s (Part IX, column (A), lines 11a-11d, 11f-24e)	1914	3,772,418.	1,272,259.
			s. Add lines 13-17 (must equal Part IX, column (A), line 25)		4,745,973.	2,269,597.
	19	Revenue less e	expenses, Subtract line 18 from line 12		241,228.	444,121.
ssels or				-	inning of Current Year	End of Year
SSet		Total assets (P			16,262,848.	14,713,419.
Net As	21	Total liabilities	(Part X, line 26)		339,763.	684,323.
			und balances. Subtract line 21 from line 20		15,923,085.	14,029,096.
	irt II	Signature				
		0 0 50	declare that I have examined this return, including accompanying schedules			knowledge and belief, it is
true,	corre	ct, and complete.	Declaration of prepare (other fran officer) is based on all information of whi	ch preparer h	ias any knowledge.	
			and tarraccool		500	1
Sign	1	Signature	of officer		Date	
Her	е	NANC				
		Type or pi	rint name and title	1 1 1 hA	Δ	
		Print/Type prep	1 11-0-	with	\ L.,	PIN .
Paid			ESE WOLFE N. THERESE WOLFE	0.	7/27/21 Heckleys	
Prep	arer		UHY ADVISORS NY, INC.		Firm's EIN ▶	14-1555429
Use	Only	Firm's address	ONE HUDSON CITY CENTRE, SUITE 20	4		
			HUDSON, NY 12534		Phone no. 51	8-828-1565
May	the If	RS discuss this	return with the preparer shown above? See instructions			X Yes No

Form 990 (2020)

1,893,353.

Other program services (Describe on Schedule O.)

Total program service expenses

4e

55 to 3 125 cm 5

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			1
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	<u> </u>
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	İ		
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, 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,	<u> </u>		
•	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			<u> </u>
0		8		х
_	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
		9		X
	If "Yes," complete Schedule D, Part IV	9		
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	40	Х	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Λ	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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,		v	ŀ
	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			v
	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			37
	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			٠,,
	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		Х
f	Did the organization's separate or consolidated financial stalements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	_X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If *Yes,* complete			
	Schedule D. Parts XI and XII	12a		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	_X_	
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		<u>X</u>
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		_X_
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			
	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			
	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			
	1c and 8a? If "Yes." complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII. Fine 9a? #"Yes."		İ	
	complete Schedule G. Part III	19		Х
20°=	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	t	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this letum?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	2011		
۷ ۱	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	ļ	Х
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Form	990 (2020) DUTCHESS LAND CONSERVANCY, INC. 14-166	7526	Р	age 4
Pa	rt IV Checklist of Required Schedules (continued)			
ł			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
22	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
00	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
23	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
		23	х	ĺ
	Schedule J	20		
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	١		- V
	Schedule K. If "No," go to line 25a	24a		X
	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			ĺ
	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		L
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			l
ZVu	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
L-	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
D	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			ĺ
		25b		Х
	Schedule L, Part I	200		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			ĺ
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			v
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			i
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			i
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27	L	X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV	Ì		ĺ
	instructions, for applicable filing thresholds, conditions, and exceptions):	Ì		1
_	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	ļ		i
a		28a	Х	ĺ
	"Yes," complete Schedule L, Part IV	28b	Х	
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	200		
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If	0.5		Х
	"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		
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	ļ		i
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			i
00	sections 301.7701-2 and 301.7701-37 if 'Yes," complete Schedule R, Part I	33		Х
24	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R. Part II, ill, or iV, and			
34		34	Х	l
	Part V, line 1	35a		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	usa	-	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	0.51		1
	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?			1,7
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R. Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			ĺ
	Note: All Form 990 filers are required to complete Schedule O	38	Χ	<u> </u>
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
1	Check if Schedule O contains a response or note to any line in this Part V			
	Order a designate of contrast of contrast of the contrast of t		Yes	No
	Enter the number reported in Box 3 of Form 1996. Enter O if not applicable	<u></u>	_163	7,70
	Effet the regime a sported in the control of the co	á		1
ь	Enter the number of norms 44-579 included to line 18. Street 45, it not approache	-		1
C	Bid the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		v	1
	(gambling) winnings to prite winners?	1c	X	
4.1 - 44.1	1998 C	Form	990	(2020)

If "Yes," complete Form 4720. Schedule O.

	rt V Statements Regarding Other IRS Fillings and Tax Compliance (continued)	<u> </u>	<u>`</u>	495
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance (continued)		1	Т
	ł I	г	Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements.		İ	1
	filed for the calendar year ending with or within the year covered by this return 2a 14	-		ŀ
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	1		
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u> </u>	X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	1	1	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
h	If "Yes," enter the name of the foreign country			
~	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		·	
50	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	\vdash	<u> </u>
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	100		
ьа		l ea		X
	any contributions that were not tax deductible as charitable contributions?	6a		1
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	51	l	
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).		v	1.5
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services 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	X	ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			٠,,
	to file Form 8282?	7c	ļ	X
d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	L	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<u>7g</u>		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a]
ь	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			
	Gross receipts, included on Form 990, Part VIII. line 12, for public use of club facilities 10b	1	ĺ	
b 11		1	ĺ	
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders		i '	
al L	Gross income from members or shareholders 11a Gross income from other sources (Do not net amounts due or paid to other sources against	1		
b	l 1			l
40		12a		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	124		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	40	\vdash	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule 0.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the]
	organization is licensed to issue qualified health plans	∤		
С	Enter the amount of reserves on hand		ļl	ļ
14a		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or		ļ	_
	excess parachute payment(s) during the year?	15	 -	X
	If "Yes" see instructions and file Form 4720. Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		Х

Form 990 (2020) DUTCHESS LAND CONSERVANCY, INC. 14-1667526 Page 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 10h below, describe the circumstances, processes, or changes on Schedule 0. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			Х
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 1a 27			
	If there are material differences in voting rights among members of the governing body, or if the governing			an d
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.	٠.		
b	Enter the number of voting members included on line 1a, above, who are independent 1b 27		1.3	54 d
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			₩.
2.		2	Х	
2	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
3		,		X
	of officers, directors, trustees, or key employees to a management company or other person?	<u>3</u> 4		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Λ
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			47
	more members of the governing body?	7a		X
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		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	*		197
а	The governing body?	8a	X	
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? // "Yes." provide the names and addresses on Schedule O	9		_X_
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,		1	
	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	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			77.
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
	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?		ŀ	
_	The organization's CEO, Executive Director, or top management official	15a	х	
		15b	$\frac{1}{X}$	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	130	-11	
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
16a				Х
	taxable entity during the year?	16a		<u>~</u>
Þ	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	Ì		
	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. ►NY			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990. and 990-T (Section 501(c)(3)s	only) :	availab	le
	for public inspection. Indicate how you made these available. Check all that apply.			
	[X] Own website $[X]$ Another's website $[X]$ Upon request $[X]$ Other (explain on Schedule 0)			
19	Describe on Schedule C whether (and if so, now) the organization made its governing documents, conflict of interest policy, and	financ	al	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization shocks and records. 🕨			
	REBECCA THORNTON - 845-677-3002			
	4289 ROUTE 82, MILLBROOK, NY 12545			

Enson በበሽ (DUTCHESS LAND CONSERVANCY, INC.	14-1667526	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compe	nsated	
	Employees, and Independent Contractors		
	Check if Schedule O contains a response or note to any line in this Part VII	<u> </u>	

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 $\cdot 0 \cdot$ in columns (\bar{D}) , (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per week	(do		(C Posi heck r ss per	tion nore son is	i than (s both	one Lan	ed any current officer, di (D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	
	(list any hours for related organizations below line)	Indiardual Hustee no director	स्डतीयांकाटी स्पडीश	Officer	azkojihus čaji	Highest compensated employer	Fernasi	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
1) REBECCA THORNTON	40.00	Г						1 = = = = = =		0.050	
RESIDENT		_		Х		<u>L</u> _		175,000.	0.	9,250	
2) REBECCA SEAMAN	4.00	1							0.	0	
HAIRMAN		X	_	Х	ļ	<u> </u>		0.	<u> </u>	U	
3) CHRISTOPHER L. MANN	3.00	١		,,			1	0.	0.	0	
ICE CHAIRMAN		X		X		 	-	V •			
4) OLIVIA VAN MELLE KAMP	3.00	١.,	1	,,				0.	0.	0	
ECRETARY		X	 	X		-	-	<u> </u>		<u> </u>	
5) NANCY N. HATHAWAY	3.00	x	ł	Х				0.	0.	0	
'REASURER	2.00	 ^-	-	<u> </u>		 	ļ	-			
6) JACK P. BANNING, JR.	2.00	X						0.	0.	0	
DIRECTOR	2.00	^	╁	-		-	 				
7) STEVEN BENARDETE	2.00	Х					Ì	0.	0.	0	
CIRECTOR (8) TIMOTHY M. BONTECOU	2.00	 ^-	 	 	┢	 					
(8) TIMOTHY M. BONTECOU	2.00	X						0.	0.	0	
9) CANDACE BROWNING-PLATT	1.00	1		-	Γ	1					
DIRECTOR		X				1		0.	0.	0	
(10) HANNAH BUCHAN	1.00		 			1					
DIRECTOR		Х					l	0.	0.	0	
(11) SARAH LYONS CHASE	1.00					Ţ			_		
DIRECTOR		X	1	L			1_	0.	0.	0	
(12) PETER COON	1.00					1					
DIRECTOR		Х				ļ	<u> </u>	0.	0.	0	
(13) WOLCOPT DUNHAM	1.00	_					ŀ			,	
DIRECTOR		X		-	ļ	ļ		0.	0.	0	
(14) LESLIE FARHANGI	2.00	_							0.	0	
DIRECTOR		Х	<u> </u>	<u> </u>	ļ	-	╀-	0.	0.	0	
(15) THOMAS FLEXNER	1.00	4						0.	0.	0	
DIRECTOR		X	- 	-	-	+		<u> </u>	0.	ļ — — — — — — — — — — — — — — — — — — —	
(16) THOMAS W. KEESEE	1.00	┧,,				Į	1	0.	0.	0	
DIRECTOR	1 00	Х	+	 	-	┿	┨	 		 	
(17) FERNANDA KELLOGG	1.00	X			1			0.	0.	0	

Part VII Section A. Officers, Directors, Trus	1	ploy	ees			ghe	st C	ompensated Employed	s (continued)				
(A)	(B)				C}			(D)	(E)			(F)	
Name and title	Average	(44	not c	Pos	mare	than	one	Reportable	Reportable		1	stimat	
	hours per week		c, unle cer ar					compensation	compensation	1	16	nount	
	(list any	Ë	T		Γ	T		from the	from related organizations		502	other oens:	
	hours for	director				-g:		organization	(W-2/1099-MIS			rom th	
	related	1E 93	ŝ/s Si			lissali,		(W-2/1099 MISC)	(-,		janiza	
	organizations	Fr	i ke		ilaku	E	ľ				an	d rela	ted
	below	Individual trustee or	ensulutanak truste	Offices	андиреш ин даж	Highest compensaled temployee	Farmer				org	anizat	ions
	line)	Ē	=	ë,	<u>,2</u>	£.5	ď.						
(18) BRAD KENDALL	2.00	١,,						_		^			^
DIRECTOR (19) TIMOTHY MAYHEW	1.00	Х	-	-	<u> </u>	-	-	0.		0.	 		0.
DIRECTOR	1.00	Х						0.		0.	ĺ		0.
(20) THOMAS NEWBERRY	1.00	1	\vdash			 				•			
DIRECTOR		Х						0.		0.			0.
(21) TERRY REGAN	1.00				-	-				•			
DIRECTOR		Х						0.		ο.	İ		0.
(22) ERIC W. ROBERTS	1.00		\Box			Γ		· · · · · · · · · · · · · · · · · · ·		· ·			
DIRECTOR		X				L.		0.		0.	Į		0.
(23) ERIC ROSENFELD	2.00												
DIRECTOR		Х				<u> </u>		0.		0.			0.
(24) DAVID R. STACK	1.00							_		_			_
DIRECTOR (25) DAVID R. TETOR	1 00	X	\vdash					0.		0.			0.
DIRECTOR	1.00	Х						0.		0.			0.
(26) KATHLEEN C. WEATHERS	1.00	17			-	-		0 •	<u> </u>				U .
DIRECTOR		х						0.		ο.			0.
1b Subtotal						•	•	175,000.		0.		9.2	
c Total from continuation sheets to Part VII							▶ [0.		0.			0.
d Total (add lines 1b and 1c)						,	>	175,000.		0.	(9,2	50.
2 Total number of individuals (including but no	ot limited to the	ose	liste	ds t	ove)) wh	o rec	eived more than \$100,0	000 of reportable				
compensation from the organization												,	1
										ſ		Yes	No
3 Did the organization list any former officer,		ee, ĸ	ey e	mpic	oyee	e, or	nign	iest compensated empl	oyee on		_		Х
line 1a? If "Yes," complete Schedule J for so 4 For any individual listed on line 1a, is the sur			ma	neat	iona	and	ath-	v composentian from th	a consistion	1	3	-	Λ
and related organizations greater than \$150								•	ie organization		4	х	
5 Did any person listed on line 1a receive or a									ual for services	ŀ	-		
rendered to the organization? // "Yes," come	-							-			5		Х
Section B. Independent Contractors													
1 Complete this table for your five highest con	npensated ind	eper	nden	t co	ntra	ctor	s tha	it received more than \$1	100,000 of compe	nsati	ion fro	m	
the organization, Report compensation for the	ne calendar ye	ar e	ndin	g wil	th o	r wit	hin t	he organization's tax ye	ear.				
(A) Name and business a	addrana	27.00						(B) Description of se	audes.	<u> </u>	(C) sation	
Hame and business	1001622	INC	NE				-	Description of Se	rvices	<u> </u>	энчрен	(\$atioi	·
									İ				
							-	· · · · · · · · · · · · · · · · · ·					
								······································					
							-		-				
									Ī				
2 Total number of independent contractors (in	cluding but po	t lim	ited	to th	 5046	a list	ed a	hove) who received mo	re than				
\$100,000 of compensation from the organize	9			اد پ	0	'ا د. ۱۰	- La La	core, mio receives mo	is crisir				
SEE DARW VII SECTION		ENI	רי עד	TC	<u>-</u>	QL	127	ነጥ¢				200	

	(B) Average hours per week (list any hours for related organizations below line)		neck	(C Posi	nd H C) ition that	арр		Compensated Employe (D) Reportable compensation from	ees (continued) (E) Reportable compensation from related	(F) Estimated amount of	
Name and title	Average hours per week (list any hours for related organizations below line)		neck	Posi	ition	app	ly)	Reportable compensation	Reportable compensation	Estimated amount of	
	week (list any hours for related organizations below line)	lial instee or director	Jstae			100		from	from related	Estimated	
	4 00 1	Individ	inslikulioral Irustoe	Officer	кай профес	Hephest compansated employer	Feimer	the organization (W-2/1099:MISC)	organizations (W-2/1099-MISC)	other compensation from the organization and related organizations	
(27) FRED WHITRIDGE, JR. DIRECTOR	1.00	Х						0.	0.	0	
(28) ROSS WILLIAMS	1.00									0	
DIRECTOR	-	<u>x</u>						0.	0.	0	
-											
						ļ -				<u> </u>	
-											
							<u> </u>				
								1			
		<u> </u>	<u>_</u>		<u> </u>	<u></u>					

		Check if Schedule O contains a response or note to	any line in this Part VIII .	and and the analysis of the section of the section by		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
N V	1	a Federated campaigns 1a				
Contributions, Giffs, Grants and Other Similar Amounts	•	b Membership dues 1b				ra. Yuly e
က်နို			,224,			
fts,]	***************************************		快生劑 獄 簿		
يِّ ق			547.			함께 보고했다. 함
S E		, , , , , , , , , , , , , , , , , , , ,	,,,,,,			
:E 1		f All other contributions, gifts, grants, and	na 0			
Æ		similar amounts not included above 1f 1,547				
out.			,241.			
<u>O</u> F		h Total, Add lines 1a-1f	2,253,809,	10 10 10 10 10 10 10 10 10 10 10 10 10 1		
		Business	Code		ENTERNANCE AND AND AND AND AND AND AND AND AND AND	
Ü	2	a				
نه ک	l	b				
ဟင့်		С				
5 5		d				
Program Service Revenue		е				
ፚ	ŀ	f All other program service revenue				
		g Total, Add lines 2a-2f	. >			
	3					
		other similar amounts)	137,003,		_	137,003.
	4		•		·	
	5	Royalties	▶			
		(i) Real (ii) Pers	onal			
	6	a Gross rents 6a				
		b Less: rental expenses 6b				
		c Rental income or (loss) 6c				
		d Net rental income or (toss)	>		······································	·····
		a Gross amount from sales of (i) Securities (ii) Ot	her			
		assets other than inventory 7a 3,843,426.	· · ·			함, 보고 된다.
		b Less: cost or other basis				
Ð		and sales expenses 7b 3,500,624.				
inu		342 902				
Revenue		d Net gain or (loss)	342,802,	342,802,		
ır.	i	a Gross income from fundraising events (not				
Other	٥	including \$ 279,224. of				
U						
		contributions reported on line 1c). See	225,			
		Part IV, line 18 8a	,528.			
		•				-34,303.
		c Net income or (loss) from fundraising events	- 34,303,			34,303,
	9	a Gross income from gaming activities. See				
		Part IV, line 19				
		b Less direct expenses 9b				,
		c Net income or (loss) from gaming activities	<u> </u>			
	10	a Gross sales of inventory, less returns				
		and allowances 10a		Property		
		b Less cost of goods sold 10b				
		c Net income or (loss) from sales of inventory	P			
ı,		Business				
20	11	a MISCELLANEOUS 900099	14,407.	14,407.		
ang Tig	1	b				
19.4		C				
Miscellaneous Revenue		d Alliother revenue				
		e Total, Add lines 11a-11d	▶ 14,407.			
	12	Total revenue. See instructions	2,713,718.	357,209,	· - l	102,700.

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Check if Schedule O contains a respons to not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
b, 8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
Grants and other assistance to domestic organizations				
and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic				
individuals. See Part IV, line 22				
Grants and other assistance to foreign				
organizations, foreign governments, and foreign				
individuals. See Part IV, lines 15 and 16			a da asa da ayay	
Benefits paid to or for members Compensation of current officers, directors,				
5 Compensation of current officers, directors, trustees, and key employees	175,000.	150,500.	12,250.	12,250
6 Compensation not included above to disqualified				
persons (as defined under section 4958(f)(1)) and				
persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	664,970.	513,708.	84,995.	66,267
8 Pension plan accruals and contributions (include				0.064
section 401(k) and 403(b) employer contributions)	25,150.	20,120,	2,766.	2,264 6,171
9 Other employee benefits	71,814.	61,777.	3,866.	6,1/1
0 Payroll taxes	60,404.	47,317.	7,253.	5,834
1 Fees for services (nonemployees):				
a Management		20 000	3,092.	
b Legal	33,312.	30,220.	17,791.	
c Accounting	17,791.		11,191.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	56,017.		56,017.	
f Investment management fees	26,011.		30,0111	
g Other. (If line 11g amount exceeds 10% of line 25,	122,130.	117,380.	2,639.	2,111
column (A) amount, list line 11g expenses on Sch (0.)	9,641.	117,3007		2,111 9,641
2 Advertising and promotion	10,095.	5,901.	3,640.	554
3 Office expenses	18,064.	14,649.	1,966.	1,449
4 Information technology				
5 Royalties	30,781.	18,772.	9,242.	2,767
6 Occupancy	5,135.	3,766.	1,042.	327
7 Travel 8 Payments of travel or entertainment expenses				
for any federal, state, or local public officials				
9 Conferences, conventions, and meetings	2,949.	2,524.	150.	275
0 Interest				
1 Payments to affiliates				
Depreciation, depletion, and amortization	26,680.	16,276.	8,004.	2,400
3 Insurance	50,230.	29,395.	20,236.	599
A Other expenses Hemeze expenses not covered			· ·	
above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A)				
amount, fist line 24e expenses on Schedule O.)		5.60 0.63		
a PURCHASE OF DEVELOPMENT	760,063.	760,063.		
b EDUCATION PROGRAMS	28,858.	28,858.	1 701	415
c DUES AND PUBLICATIONS	19,986.	15,789.		1,250
d EQUIPMENT RENTAL, REPAI	17,868.	12,028.		4,623
e All other expenses	62,659.	44,310.		119,197
5 Total functional expenses. Add lines 1 through 24c	2,269,597.	1,893,353.	231,041.	117,17
6 Joint costs. Complete this line only if the organization				
reported in column (8) joint costs from a combined				
educational campaign and fundraising solicitation.				
Advitoring Sub- ST- ROUTE TORK		<u> </u>	1	Form 990 (2

Pai	t X	Balance Sheet			
		Check if Schedule O contains a response or note to any line in this Part X	<u> </u>	1	
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		1_1_	<u> </u>
	2	Savings and temporary cash investments	1,238,004.	2	1,509,394
	3	Pledges and grants receivable, net	103,296.	3	61,920
- 1	4	Accounts receivable, net	2,166.	4	2,016
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
Ì		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined		1 1 3 3 5	
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
<u>ا</u> ي	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use		8	
₹	9	Prepaid expenses and deferred charges	35,807.	9	34,327
	10 a	Land, buildings, and equipment: cost or other			
1		basis. Complete Part VI of Schedule D 10a 1,377,386.			
1	b	Less: accumulated depreciation 10b 523,260.	789,112.	10c	854,126
	11	Investments - publicly traded securities	6,865,240.	11	12,214,864
	12	Investments - other securities. See Part IV, line 11	6,422,977.	12	25,474
	13	Investments - program-related, See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	806,246.	15	11,298
_	16	Total assets, Add lines 1 through 15 (must equal line 33)	16,262,848.	16	14,713,419
	17	Accounts payable and accrued expenses	66,691.	17	39,807
	18	Grants payable		18	
ļ	19	Deferred revenue	273,072.	19	94,516
l	20	Tax-exempt bond fiabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	*
2	22	Loans and other payables to any current or former officer, director,			
ĕ		trustee, key employee, creator or founder, substantial contributor, or 35%			
Jabilities		controlled entity or family member of any of these persons		22	
-	23	Secured mortgages and notes payable to unrelated third parties		23	550,000.
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	· · · · · · · · · · · · · · · · · · ·
_	26	Total liabilities. Add lines 17 through 25	339,763.	26	684,323.
		Organizations that follow FASB ASC 958, check here 🕨 🔯			
ces		and complete lines 27, 28, 32, and 33.			
듄	27	Net assets without donor restrictions	12,217,138.	27	9,722,516.
ō	28	Net assets with donor restrictions	3,705,947.	28	4,306,580.
		Organizations that do not follow FASB ASC 958, check here			
		and complete lines 29 through 33,			
0	29	Capital stock or trust principal, or current funds		29	<u></u>
Se	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
ž.	31	Retained earnings, endowment, accumulated income, or other funds		31	
ivet Assets of Fund Salan	32	Total net assets or fund balances	15,923,085.	32	14,029,096.
	33	Total liabilities and net assets/fund balances	16,262,848.	33	14,713,419.

	990 (2020) DUTCHESS LAND CONSERVANCY, INC.	14-18	67526	Page 12
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		718.
2	Total expenses (must equal Part IX, column (A), line 25)	2		<u>,597.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3		,121.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	15,923	
5	Net unrealized gains (losses) on investments	5	-2,338	<u>,110.</u>
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 on Schedule O)	9	· · · · · · · · · · · · · · · · · · ·	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,			
	column (B))	10	14,029	,096.
Pa	rt XIII Financial Statements and Reporting			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Check if Schedule O contains a response or note to any line in this Part XII			<u> </u>
				Yes No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		4.150	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	D.		
2a				X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a		
	separate basis, consolidated basis, or both:			
	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 separate	basis,		
	consolidated basis, or both:			
	Separate basis X 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	audit,		
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X
	If the organization changed either its oversight process or selection process during the tax year, explain on Scho		1.00	Harris II
3 <i>a</i>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit		
	Act and OMB Circular A-133?		3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the require	ed audit		
•	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b	
			Form 9	990 (2020)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Into nat 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

2020

Open to Public Inspection

Employer identification number Name of the organization 14-1667526 DUTCHESS LAND CONSERVANCY, INC. Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 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). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 X 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4), 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or 12 [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, 12l, and 12g. J Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, 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 II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f. Enter the number of supported organizations g. Provide the following information about the supported organization(s). (v) Amount of monetary (vi) Amount of other (iii) "ype of organization (i) Name of supported क प्रकृत मुद्धा मुद्दा होते. (described on lines 1-10 support (see instructions) support (see instructions) rarganization Yes Nο above (see instructions))

Schedule A (Form 990 or 990 EZ) 2020 DUTCHESS LAND CONSERVANCY, INC. 14-1667526 Page 2

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	Section A. Public Support						
	dar year (or fiscal year beginning in) 🕨	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	Gifts, grants, contributions, and			Į			
	membership fees received. (Do not			ļ			
	include any "unusual grants.")						
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		Property of the property of the	o i Selainara-e-Tga (1985)	an an agus agus agus agus	Sair City 1	
5	The portion of total contributions		ray is avorb				
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included		nette tit.				
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)		lich durchen Argebeit der				
	Public support. Subtact line 5 from line 4,					<u> </u>	
	ction B. Total Support	1		1-) 0010	(d) 2019	(e) 2020	(f) Total
Cale	ndar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(0) 2013	(e) EUEO	117 . 5.10.
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the	ļ					
	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	La familia de la composición della composición d		<u> </u>		12	
12	Gross receipts from related activities	, etc. (see instructi	ons)	fourth or fifth tax		\	
13	First 5 years. If the Form 990 is for the				,		>
	organization check this box and sto ction C. Computation of Publ	ic Support Per	rcentage		· · · · · · · · · · · · · · · · ·		
<u>se</u>	Public support percentage for 2020 (line 6. column 10. c	divided by line 11	column (fi)		14	9,6
	m // fam. 0010	3 Cabadula & Part	II line 14		•	15	9/4
15	Public support percentage from 2015 a 33 1/3% support test - 2020. If the	a otherries at all a	nt check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this box	and
16	a 33 1/3% support test - 2020. If the	ac a publish si or	or uncor the box o	1			▶□
	stop here. The organization qualifies b 33 1/3% support test - 2019. If the	as a publicity supp	ot check a box on	line 13 or 16a. and	d line 15 is 33 1/3%	or more, check thi	s box
	b 33 1/3% support test - 2019. If the	organización ele n difice se a noblicia	sennorted presniz	ation			▶ 🛄
	and stop here. The organization qualifies as a publicly supported organization and stop here. The organization qualifies as a publicly supported organization from 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more.						
17	a 10% -facts-and-circumstances tes and if the organization meets the fac	te and or cornetant	res test icheck thi	s box and stop he	ere. Explain in Part	VI how the organiz	ation
	and if the organization meets the fact meets the facts and circumstances to	est. The executation	on qualifies as a n	ublicly supported o	organization		▶□
	meets the facts-and-circumstances to b 10% -facts-and-circumstances tes	est. The organizati	ganization did not	check a box on lin	e 13, 16a, 16b, or	17a, and line 15 is 1	10% or
	b 10% -facts-and-circumstances tes more, and if the organization meets!	the facts and a con-	mstances test icht	eck this box and is	stop here. Explain	in Part VI how the	
	 more, and if the organization meets to organization meets the facts and order 	rumstandes for t. T.	he organization of	alities as a publici	y supported organ	ization	▶ 🗀 🗎
	organization meets the facts-and-circ	on did not chack :	thos on line 13, 1	Sa. 16b. 17a. or 17	b, check this box a	and see instructions	
18	Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions School line 3, 16a, 16b, 17a, or 17b, check this box and see instructions School line 3, 16a, 16b, 17a, or 17b, check this box and see instructions						

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 (e) 2020 (d) 2019 (f) Total (a) 2016 (c) 2018 (b) 2017 Calendar year (or fiscal year beginning in) 1 Gifts, grants, contributions, and membership fees received. (Do not 2091899.23069524. 4880168. 9423851 4255972. 2417634 include any "unusual grants.") 2 Gross receipts from admissions, merchandise sold or services performed or facilities furnished in any activity that is related to the 225. 783,961. 97,070. 95,025. 322,695. 268,946. organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or business under section 513 4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 5 The value of services or facilities furnished by a governmental unit to the organization without charge 4975193. 2092124.23853485. 2514704. 9746546. 4524918. 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 179,289. 1053969. 189,344 239.892 238,934. 206,510. 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the 0. amount on line 13 for the year 1053969. 239,892. 238,934. 179,289. 189.344 206,510. c Add lines 7a and 7b 22799516. 8 Public support (Subtract line Retrem line fe) Section B. Total Support (d) 2019 (e) 2020 (f) Total (a) 2016 (b) 2017 (c) 2018 Calendar year (or fiscal year beginning in) 2092124. 23853485. 2514704 4975193 9746546. 4524918 9 Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, 166,898. 137,003. 680,416. 146,264 125,802 104,449. and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 137,003. 680,416. 166,898. 104,449. 125.802. 146,264 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b, whether or not the business is -76,193. 141,219,-126,566,-136,289. 45,443. regularly carried on 12 Other income. Do not include gain or loss from the sale of capital 14,407 57,420. 9,429. 16,293. 9,261. 8,030. assets (Explain in Part VI.) 2243534.24515128. 9912731. 4801200. 2542432. 5015231. 13 Total support. (Add lines 9, 30c, 11, and 12) 14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization check this box and stop here Section C. Computation of Public Support Percentage 93.00 % 15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f) 15 93.10 16 % 16 Public support percentage from 2019 Schedule A. Part III, line 15 Section D. Computation of Investment Income Percentage 2.78 17 θ_{ij}^{\prime} 17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f)) 2.69 18 0.0 18 Investment income percentage from 2019 Schedule A. Part III. line 17 19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not $\blacktriangleright X$ more than 33-1/3% check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3% check this box and stop here. The organization qualifies as a publicly supported organization

Part IV | Supporting Organizations

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

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- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c 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 box 12a or 12b in Part i, answer lines 4b and 4c 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)(8) purposes.
- Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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?
- 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 filling organization's supported organizations? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part Lof Schedule L (Form 930 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 Fart Lof 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 "Ves " 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 lassets 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 line 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).

	Yes	No
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	edule A (Form 990 or 990 EZ) 2020 DUTCHESS LAND CONSERVANCY, INC. 14-1	66752	6 F	age 5
Pa	rt IV Supporting Organizations (continued)	·	,	
		r	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?	İ		
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and	İ		
	11c below, the governing body of a supported organization?	11a	ļ	
	A family member of a person described in line 11a above?	11b	<u> </u>	
c	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			'
	detail in Part VI.	11c		
Sec	ction B. Type I Supporting Organizations			·
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers.			1
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			165.4
	organization, describe how the powers to appoint and/or remove officers, 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	100		by f
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	a la company		25,74
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting granization.	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 graanization(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		j.:	it with
	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			4.5
	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	i	İ
3	By reason of the relationship described in line 2, above, 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 year (see instructions	 5).		
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 governmental entity (see)	nstruction	s).	
2	Activities Test. Answer lines 2a and 2b 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		Ì	
	that these activities constituted substantially all of its activities.	2a		
ь	Did the activities described in line 2a, above, 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," explaining		ŀ	
	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	- 1	
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or		ĺ	
•	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	За		
ь	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	1	
	Schedule A (Form)			2020

	ectule A (Form 990 or 990-EZ) 2020 DUTCHESS LAND CONSERVA ort V Type III Non-Functionally Integrated 509(a)(3) Supporti		INC.	14-1667526 Page 6
1				D 1100 D 1 1 1
٠	Check here if the organization satisfied the Integral Part Test as a qualify All other Type III non-functionally integrated supporting organizations mu			Part VI). See instructions.
Sec	tion A - Adjusted Net Income	st compar	(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		
Sec	tion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see	1 1 1 1		
	instructions for short tax year or assets held for part of year):			
à	Average monthly value of securities	1a		
b	Average monthly cash balances	1b	*····	
	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d	··· ··· ··· ··· ··· ··· ··· ··· ··· ··	
	Discount claimed for blockage or other factors		·	
	lexplain 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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Gurrent Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 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	T I		
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	lly integrate	ed Type III supporting orga	nization (see
	instructional	. •	J. J. J. J.	•

e Excess from 2020

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-E					14-166/526	Page 8
Part IV, Section A, line 1; Part IV, Sec	I Information. Provide the times 1, 2, 3b, 3c, 4b, 4c, 5a ction D, lines 2 and 3; Part IV 6, and 8; and Part V, Section	a, 6, 9a, 9b, 9c, 11a, 1 ', Section E, lines 1c, 2	1b, and 11c; Parl a, 2b, 3a, and 3b	: IV, Section 8, Iines 1 o; Part V, Iine 1; Part V	and 2; Part IV. Section /, Section B, line 1e; Par	C, rt V,
SCHEDULE A, PART	' III, LINE 12,	EXPLANATIO	N FOR OT	HER INCOME:		
MISCELLANEOUS IN	ICOME					
2016 AMOUNT: \$	16,293.		.			
2017 AMOUNT: \$	9,261.					
2018 AMOUNT: \$						
2019 AMOUNT: \$	9,429.					
2020 AMOUNT: \$	14,407.					
Allibration	ph.					
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SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

Open to Public

Department of the Treasury

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Inspection

DMB No. 1545-0047

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

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

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

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

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

Laxi face scharare ii		A 1 - D. 4 III			
		ons: Complete Part III.		Empl	oyer identification number
Name of organization	PHROHEC	E LAND CONSERVANC	יע דאני		14-1667526
Part I-A Com	DUTCHES:	anization is exempt unde	er section 501(c)	or is a section 527 or	ganization.
Provide a descri Political campai Volunteer hours	iption of the organizaging activity expenditure for political campaignaless if the org	ation's direct and indirect politica pres on activities anization is exempt unde	al campaign activities i	n Part IV. ▶ \$	
1 Enter the amour	nt of any excise tax i	ncurred by the organization und	er section 4955	,	
2 Enter the amour 3 If the organization 4a Was a correction b If "Yes," describ Part I-C Com	nt of any excise tax in the incurred a section in made? The in Part IV. The in Part IV. The in Part IV.	ncurred by organization manage n 4955 tax, did it file Form 4720 anization is exempt unde	for this year? er section 501(c),	except section 501(c	Yes No Yes No
1 Enter the amour	nt directly expended	by the filing organization for sec	ction 527 exempt funct	tion activities 🕨 \$	
2 Enter the amour exempt function 3 Total exempt full line 17b 4 Did the filing org 5 Enter the names made payments contributions re-	nt of the filing organia activities nction expenditures ganization file Form s, addresses and em s. For each organization	zation's funds contributed to off Add lines 1 and 2. Enter here a 1120-POL for this year? uployer identification number (Elficion listed, enter the amount paid partly and directly delivered to a additional space is needed, provi	ner organizations for se and on Form 1120-POL which is a section 527 po d from the filing organia a separate political organic	section 527 \$ \$ s s	e amount of political
(a) N.		(b) Address	(c) EIN	(d) Amount paid from filing organization s funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

Part II-A Complete if the org section 501(h)).	anization is exer	npt under sectio	n 501(c)(3) and fil	ed Form 5768 (ele	ection under
expenses, and share	e of excess lobbying e			group member's name	e, address, EIN,
Limit	s on Lobbying Expe			(a) Filing organization's totals	(b) Affiliated group totals
Total lobbying expenditures to influ Total lobbying expenditures to influ Total lobbying expenditures (add lin Other exempt purpose expenditures Total exempt purpose expenditures Lobbying nontaxable amount. Enter	ence a legislative bod les 1a and 1b) s (add lines 1c and 1d the amount from the	ly (direct lobbying)) I following table in bol	h columns.		
If the amount on line 1e, column (a) or Not over \$500,000 Over \$500,000 but not over \$1,000 Over \$1,000,000 but not over \$1,500 Over \$1,500,000 but not over \$17,000 Over \$17,000,000	20% of t 000 \$100,00 0,000 \$175,00	bying nontaxable am the amount on line 1e 0 plus 15% of the exc 0 plus 10% of the exc 0 plus 5% of the exce 000.	ess over \$500,000. ess over \$1,000,000.		
 g Grassroots nontaxable amount (entents) h Subtract line 1g from line 1a. If zero i Subtract line 1f from line 1c. If zero j If there is an amount other than zero reporting section 4911 tax for this year 	or less, enter -0- or less, enter -0- o on either line 1h or li ear?	ne 1i, did the organiz	ation file Form 4720		Yes No
(Some organizations tha	See the separa	te instructions for li	ies 2a through 2f.)	of the five columns be	low.
	Lobbying Expen	ditures During 4-Yea	r Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line 2a. column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures				Schedule C (Form	990 or 990-EZ) 2020

Schedule C (Form 990 or 990-EZ) 2020 DUTCHESS LAND CONSERVANCY, INC. 14-1667526 Page 3

[Part II-B] Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislative, including any attempt to influence public opinion on a legislative matter or referending, through the use of: a Volunteers? b Paid staff or management [include compensation in expenses reported on lines 1c through 1i)? X Media advertisements? d Mailings to members, legislators, or the public? y Publications, or published or broadcast statements? t Grants to other organizations for licibying purposes? 1 Grants to other organizations for licibying purposes? 2 Direct contact with legislators, their staffs, government officials, or a legislative body? X Mailings to members, legislators, their staffs, government officials, or a legislative body? X Mailings (Internations) 1 Other activities? 1 Other activities? 1 Total, Add lines 1c through 1i 2a) Did the activities in fine 1 cause the organization to be not described in section 501(c)(3)? 3 If Yes, or enter the amount of any tax incurred under section 4912 of 1fthe fifting organization insured a section 4912 of 1fthe fifting organization insured a section 4912 of 1fthe fifting organization insured a section 4912 of 1fthe fifting organization insured a section 4912 of 1fthe fifting organization insured a section 4912 of 1fthe fifting organization insured a section 4912 of 1fthe fifting organization insured a section 4912 of 1fthe fifting organization insured a section 4912 of 1fthe fifting organization insured a section 4912 of 1fthe fifting organization insured a section 4912 of 1fthe fifting organization insured a section 4912 of 1fthe fifting organization insured a section 591(c)(d), or section 501(c)(d), or sec	For each ")	es" response on lines 1a through 1i below, provide in Part IV a detailed description	(a	1}	(b	}
tocal legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: a Volunteers? b Paid staff or management (include compensation in expenses reported on lines 1c through 11)? X X C Media advertisements? d Mailings to members, legislators, or the public? a Publications, or published or broadcast statuments? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Railies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? X V C C C C C C C C C C C C C C C C C C			Yes	No	Amo	unt
b Paid staff or management (include compensation in expenses reported on lines 1c through 19? X X A A A A A A A A A A A A A A A A A	local or re	legislation, including any attempt to influence public opinion on a legislative matter ierendum, through the use of:	X			
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g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total, Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If 'Yes,' enter the amount of any tax incurred under section 4912 c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A) Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political earningian activity expenditures from the prior year? 3 Did the organization agree to carry over lobbying and political engaging activity expenditures from the prior year? 1 Dues, assessments and similar amounts from members 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(c) condeductible lobbying and political expenditures (do not include amounts of political expenditure was paid). 2 Aggregate amount reported in section 603(e)(1)(A) notices of nondeductible section 162(e) dues 3 Aggregate amount reported in section 603(e)(1)(A) notices of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (See instructions) 6 Tovoide the descriptions required for Part IA. Ine 1, Part IB, line 4: Part IC, line 5: Part IIA (affiliated group last), Part IIA, lines 1 and 2 (See instructions), and Part IB,				Х		
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Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3 Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a 2	1 Were	substantially all (90% or more) dues received nondeductible by members:				
Complete if the organization is exempt under section 301(c)(4), section 301(c)(3), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1	2 Did t	he organization make only in-house lobbying expenditures of \$2,000 of less:	e minr Vear	2 3		
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (See instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A line 1, Part I-B, line 4; Part I-C, line 5; Part II-A (attilitated group list); Part II-A lines 1 and 2 (See instructions), and Part II-B, LINE 1, LOBBYING ACTIVITIES: THE ORGANIZATION PARTICIPATES IN MINIMAL LOBBYING ACTIVITIES CONSISTING		he organization agree to carry over loobying and political campaign activity experiences not all Campaign activities not all Campaign activity experiences not all Campaign activities not all Campaign	n 501(c)(5), or sec	ction	
1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). a Current year b Carryover from last year c Total 2 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (See instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (attiliated group list); Part II-A, lines 1 and 2 (See instructions), and Part II-B, LINE 1, LOBBYING ACTIVITIES: THE ORGANIZATION PARTICIPATES IN MINIMAL LOBBYING ACTIVITIES CONSISTING	Part III-	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	"No" OR	(b) Part	III-A, line	3, is
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2 Current year 2 D 2 Carryover from last year 2 D 2 Carryover from last year 2 D 2 Carryover from last year 2 Carryover from last year 2 Carryover from last year 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 5 Taxable amount of lobbying and political expenditures (See instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A. Inne 1, Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A. Innes 1 and 2 (See instructions), and Part II-B, LINE 1, LOBBYING ACTIVITIES: THE ORGANIZATION PARTICIPATES IN MINIMAL LOBBYING ACTIVITIES CONSISTING				1 1		
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expenditure next year? 5 Taxable amount of lobbying and political expenditures (See instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (attiliated group list); Part II-A, lines 1 and 2 (See instructions), and Part II-B, line 1, Also, complete this part for any additional information. PART II-B, LINE 1, LOBBYING ACTIVITIES: THE ORGANIZATION PARTICIPATES IN MINIMAL LOBBYING ACTIVITIES CONSISTING	4 If no	fices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc	olitical	***************************************		
5 Taxable amount of lobbying and political expenditures (See instructions) Part IV Supplemental Information Provide the descriptions required for Part I-A. line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (attiliated group list); Part II-A lines 1 and 2 (See instructions), and Part II-B, line 1, Also, complete this part for any additional information. PART II-B, LINE 1, LOBBYING ACTIVITIES: THE ORGANIZATION PARTICIPATES IN MINIMAL LOBBYING ACTIVITIES CONSISTING			ontical	1		
Part IV Supplemental Information Provide the descriptions required for Part I-A. line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (attiliated group list); Part II-A. lines 1 and 2 (See instructions), and Part II-B, line 1. Also, complete this part for any additional information. PART II-B, LINE 1, LOBBYING ACTIVITIES: THE ORGANIZATION PARTICIPATES IN MINIMAL LOBBYING ACTIVITIES CONSISTING						
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THE ORGANIZATION PARTICIPATES IN MINIMAL LOBBYING ACTIVITIES CONSISTING	Provide th	e descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group s), and Part II-B, line 1, Also, complete this part for any additional information.	list); Part II	-A, lines 1 a	and 2 (See	
	PART	II-B, LINE I, LOBBYING ACTIVITIES:				
A TOTAL CONTRACTOR OF THE PROPERTY OF THE PROP	THE O	RGANIZATION PARTICIPATES IN MINIMAL LOBBYING ACT	VITIE	S CONS	ISTING	ŗ
OF MAILINGS TO LEGISLATORS, ATTENDANCE AT LAND TRUST ALLIANCE/AMERICAN	OF MA	ILINGS TO LEGISLATORS, ATTENDANCE AT LAND TRUST A	LLLAN	CE/AME	RICAN	
FARMLAND TRUST/FRIENDS OF NEW YORK ENVIRONMENT/ORGANIZED LOBBY DAYS,	FARML	AND TRUST/FRIENDS OF NEW YORK ENVIRONMENT/ORGANIZ	ZED LOI	BBY DA	YS,	
MEETINGS WITH REPRESENTATIVES TO EDUCATE THEM ABOUT THE ORGANIZATION'S	MEETI	NGS WITH REPRESENTATIVES TO EDUCATE THEM ABOUT T	HE ORG	ANIZAT	ION'S	00.W44 14.W4
WORK, AND PARTICIPATION IN PRESS CONFERENCES CONCERNING STATE GRANT'S. Schedule C (Form 990 or 990-EZ) 2	WORK,	AND PARTICIPATION IN PRESS CONFERENCES CONCERNIN	NG STA	PE GRA	NT'S . n 990 or 996	D-EZ) 2020

Schedule C (Form 990 or 990 EZ) 2020 DUTCHESS LAND CONSERVANCY, INC. Part IV Supplemental Information (continued)	14-1667526 Page 4
OTHER EXPENSES CONSIST OF MILEAGE AND OTHER REIMBURSABLES TO	THOSE WHO
ATTEND THESE MEETINGS AND CONFERENCES. THE ORGANIZATION COMPL	IES WITH
ALL NEW YORK STATE AND FEDERAL LOBBYING LIMITS.	
	· · · · · · · · · · · · · · · · · · ·
	A A A A A A A A A A A A A A A A A A A

SCHEDULE D (Form 990)

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.

DME No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

DUTCHESS LAND CONSERVANCY, INC.

Employer identification number 14-1667526

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds o	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in v	writing that the assets held in donor advise	ed funds
0	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be u	used only
0	for charitable purposes and not for the benefit of the donor o	r donor advisor, or for any other purpose o	onterring
	impermissible private benefit?		
Par		ganization answered "Yes" on Form 990, P	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization		
•	X Preservation of land for public use (for example, recrea		a historically important land area
	X Protection of natural habitat		a certified historic structure
	X Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form o	of a conservation easement on the last
_	day of the tax year.		Held at the End of the Tax Year
	•		2a 421
			1 - 1 12 506 00
G	Number of conservation easements on a certified historic str		
d	Number of conservation easements included in (c) acquired a	after 7/25/06, and not on a historic structur	re
	listed in the National Register		
3	Number of conservation easements modified, transferred, rel	eased, extinguished, or terminated by the	organization during the tax
	year 1	-	
4	Number of states where property subject to conservation eas	sement is located 1	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	<u> </u>
•	violations, and enforcement of the conservation easements it	tholds?	X Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	ervation easements during the year
-	▶ 4957		
7	Amount of expenses incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservati	ion easements during the year
	▶ \$ 386,473.		
8	Does each conservation easement reported on line 2(d) above	re satisfy the requirements of section 170(h	n)(4)(B)(i)
-	and section 170(h)(4)(B)(ii)?		X Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense s	statement and
	balance sireet, and include, if applicable, the text of the footr	note to the organization's financial stateme	nts that describes the
	association's recognition for conservation easements		
Pai	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or Otl	her Similar Assets.
·	Complete if the organization answered "Yes" on Form	990, Part IV. line 8.	
ta	If the organization elected, as permitted under FASB ASC 95	8, not to report in its revenue statement ar	nd balance sheet works
	of art, historical treasures, or other similar assets held for put	olic exhibition, education, or research in ful	rtherance of public
	service, provide in Part XIII the text of the footnote to its final	ncial statements that describes these items	5.
b	If the organization elected, as permitted under FASB ASC 95	i8, to report in its revenue statement and b	alance sheet works of
_	art, historical treasures, or other similar assets held for public	exhibition, education, or research in furth	erance of public service.
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII. line 1		➤ \$ ➤ \$
	(iii) Assets included in Form 990. Part X		
2	If the organization received or neld works of art, historical tre	asures, or other similar assets for financial	gain, provide
_	the following amounts required to be reported under FASB A	ISC 958 relating to these items:	
а	Revenue included on Form 950, Part VIII, line 1		▶ \$
	Assets in Bisland in Form 990 Part X		. > \$

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-		S LAND CON				or Oth	. Cissi	14-16	67526	Pi	age 2
L									s (contin	uea)	
3	5 5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7										
	collection items (check all that apply):										
a	Public exhibition	d		Loan or exc	~ . •						
Ь	Scholarly research	е	•	Other							
С	Preservation for future generations										
4	Provide a description of the organization's co							pose in Part	XIII.		
5	During the year, did the organization solicit of										-
[6-	to be sold to raise funds rather than to be me	aintained as part of the	he orgai	nization's co	illection?				Yes		No
ra	rt IV Escrow and Custodial Arranger reported an amount on Form 990, Par		ete if the	e organizatio	on answered	"Yes" o	n Form 9	90, Part IV,	line 9, or		
1a	Is the organization an agent, trustee, custodi	an or other intermed	iary for e	contribution	s or other as	sets not	included	<u> </u>			
	on Form 990, Part X?		•						Yes		No
b	If "Yes," explain the arrangement in Part XIII						*** *****				
	•	·	5					<u> </u>	Amount		
С	Beginning balance						10				
	Additions during the year							1			
	Distributions during the year						1e				
f	Ending balance									****	
2a	Did the organization include an amount on Fo								Yes		No
	If "Yes," explain the arrangement in Part XIII.										ĺ
Par	tV Endowment Funds. Complete it	f the organization an	swered	"Yes" on Fo	rm 990, Par	t IV, line	10.				
		(a) Current year	(b) P	rior year	(c) Two yea	ers back	(d) Thre	e years back	(e) Four y	ears b	элск
1a	Beginning of year balance	5,440,362,	4	468 642	4,83	4 069	4	461 801	3,9	48,1	181
ь	Contributions	4,269,880,		50,560.	6	9 431,		106,540.	1	.05,6	50.
C	Net investment earnings, gains, and losses	1,240,965.	1	,086,160.	- 22	2,505.		697,410.	4	43,8	313,
ď	Grants or scholarships										
e	Other expenditures for facilities										
	and programs	175,000		165,000.	21	2,353.		431 682		35,8	43.
f	Administrative expenses										
g	End of year balance	10,776,207,	5	,440,362.	4,46	8,642.	4	834,069,	4,4	61,8	01,
2	Provide the estimated percentage of the curre	ent year end balance	(fine 1g	, column (a))) held as:						
	Board designated or quasi-endowment -	83.0000	_%								
b	Permanent endowment ► 17.0000	<u></u> %									
c	Term endowment 🕨	V ₀									
	The percentages on lines 2a, 2b, and 2c shou	ild equal 100%.									
За	Are there endowment funds not in the posses	ssion of the organizat	tion that	are held an	d administer	red for th	ne organi	zation	,		
	by.								Y	es	No
	(i) Unrelated organizations								3a(i)	X	
	(ii) Related organizations								3a(ii)		X
b	If "Yes" on line 3a(ii), are the related organizat	ions listed as require	id on So	hedule R?					3b		
	Describe in Part XIII the intended uses of the o		vment fu	ınds.				 			
Par											
	Complete if the organization answered	"Yes" on Form 990,	Part IV,	line 11a, Se	e Form 990	, Part X.	line 10.				
	Description of property	(a) Cost or otl		(b) Cost		' '	ccumula	I	(d) Book v	/alue	
		basis (investm	ent)	basis (de	preciatio	<u>n</u>			
1a	Land				5,000.				756	*****	
b	Buildings	<u> </u>			5,000.			301.	5	<u>, 69</u>	
¢	Leasehold improvements				4,888.		394,8		_		0.
	Equipment	<u> </u>		220	0,498.		128,0	71.	92	, 42	<u>7.</u>
	Other										
Total.	And lines 1a through 1e. (Column (d) must eq	ual Form 990, Part X	columi	2 (61, line 10	c.l			▶	854	,12	6.

Total. (Column (o) must equal Form 990, Part X, col. (B) line 25.) 2. Usability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organizations financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 743. Check here if the text of the foolingte has been provided in Part XIII [X]

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edule D (Form 990) 2020	DUTCHESS	LAND	CONSERVANCY,	INC

Par	t XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	eturn.					
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.						
1	Total revenue, gains, and other support per audited financial statements	1					
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:						
а	Net unrealized gains (losses) on investments	1					
b	Donated services and use of facilities						
c	Recoveries of prior year grants 2c	<u>.</u>					
d	Other (Describe in Part XIII.)]					
e	Add lines 2a through 2d	2e					
3	Subtract line 2e from line 1	3					
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1;						
а	Investment expenses not included on Form 990, Part VIII, line 7b	,					
b	Other (Describe in Part XIII.)						
c	Add lines 4a and 4b	4c					
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5					
Par	t XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Return.					
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.						
1	Total expenses and losses per audited financial statements	1					
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	411					
a		1					
ь		- · · · · · · · · · · · · · · · · · · ·					
Ç	Other losses 2c						
d	Other (Describe in Part XIII.)	1					
е	Add lines 2a through 2d	2e					
3	Subtract line 2e from line 1	3					
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:						
а	Investment expenses not included on Form 990, Part VIII, line 7b	4					
b	Other (Describe in Part XIII.)	1 1					
С	Add lines 4a and 4b	4c					
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5]					
	t XIII Supplemental information.						
	de 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	l; 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.						
PAF	RT II, LINE 3:						
		ACTION TO A TO A TO A TO A TO A TO A TO A TO					
EAS	EMENT: HATHAWAY 110.69 ACRES; LANDOWNER: NANCY HATHAWAY; A	MENDMENT':					
THE	AMENDMENT WAS RECORDED AT THE OFFICE OF DUTCHESS COUNTY C	LERK A'I					
DOC	CUMENT NO. 02-2020-4492 ON 11/5/2020 AND IS DESCRIBED BELOW						
SUE	SEQUENTLY, AFTER IT WAS FILED, IT WAS LEARNED THAT THE MAP	ATTACHED TO					
DOC	CUMENT 02-2020-4492 WAS NOT CORRECTLY SCANNED BY THE COUNTY	CLERK'S					
OFF	ICE; THUS, A CORRECTIVE AMENDMENT WAS FILED AT DOCUMENT NO).					
02-	2020-4586 ON 11/12/2020 TO CORRECT THE MAP. THE SOLE PURPO	SE OF THE					
CORRECTIVE AMENDMENT AS FILED AT DOCUMENT 02-2020-4586 WAS TO ASSURE THAT							
THE MAP ATTACHMENT WAS SCANNED CORRECTLY BY THE COUNTY CLERK'S OFFICE.							
AAAD AMAE (AS AAAQAAAAAA) IIIAD DQ SIIIIAD QQ SIIIA Q SIII Q SIII Q Q SIII Q Q SIII Q Q SIII Q SIII Q Q SIII Q SIII Q Q SIIII Q SIII Q SIII Q SIII Q SIII Q SIII Q SIII Q SIII Q SIII Q SIIII							
ORIGINAL EASEMENT: THE ORIGINAL GRANTORS OF THE EASEMENT WERE NANCY AND							
SKIGINAL DAGEMENT. THE OKTOINAL GROWING OF THE BROWING WHICH HELD							
דב כו	DAVID HATHAWAY. THE HATHAWAY EASEMENT WAS RECORDED IN THE OFFICE OF THE						
	Schedule D (Form 990) 2020						
at 2 19		,					

Part XIII Supplemental Information (continued) DUTCHESS COUNTY CLERK AT DOCUMENT NO. 02-1997-9593. MODIFICATION: THE EASEMENT MODIFICATION (A) RE-DESIGNATES 2.0 ACRES AS PRESERVATION AREA, REDUCING THE SIZE OF BUILDING ENVELOPE B FROM 6.5 TO 4.5 ACRES; (B) REPLACES EXHIBIT B, THE CONSERVATION EASEMENT MAP, TO PROVIDE CLARITY TO LABELING; (C) CLARIFIES THE PERMITTED SIZE OF THE THREE PERMITTED PRINCIPAL RESIDENCES AND TENANT/GUEST HOUSES; (D) REPLACES THE ORIGINAL LEGAL DESCRIPTION WITH REFERENCE TO A SURVEY MAP FILED WITH THE OFFICE OF THE DUTCHESS COUNTY CLERK; AND (E) ESTABLISHES CLEARER GUIDELINES FOR ALLOCATING RESERVED RIGHTS IN THE EVENT OF EXISTING RIGHT TO SUBDIVIDE THE PROPERTY IS EXERCISED. REASONS FOR MODIFICATIONS: THE PURPOSE OF THE AMENDMENT WAS TO INCREASE THE CONSERVATION VALUE OF THE EASEMENT BY ADDING LAND TO THE PRESERVATION AREA. COMMENTS: THE AMENDMENT IS CONSISTENT WITH THE CONSERVATION PURPOSES OF THE ORIGINAL EASEMENTS, DOES NOT RESULT IN A NET INCREASE IN THE RIGHTS HELD BY THE LANDOWNER, DOES NOT REDUCE THE AMOUNT OF LAND PROTECTED BY THE EASEMENT, AND CONFERS NO

PART II, LINE 5:

NET PRIVATE BENEFIT ON THE LANDOWNER.

THE ORGANIZATION HAS THE FOLLOWING POLICIES/PROCEDURES IN PLACE AND APPROVED BY THE ORGANIZATION'S BOARD: THE ORGANIZATION'S CONSERVATION EASEMENT ENFORCEMENT PROCEDURE (UPDATED AND APPROVED IN 2020): THIS PROCEDURE DISCUSSES THE IMPORTANCE OF CONSERVATION EASEMENT ENFORCEMENT, PROCESS GUIDELINES, PREVENTION STRATEGIES, STEPS TO TAKE IN THE EVENT OF A VIOLATION FROM REMEDIATION TO LITIGATION. CONSERVATION EASEMENT ACQUISITION PROCEDURES AND CHECKLIST: THIS DOCUMENT OUTLINES THE PROCEDURE FOR EASEMENT ACQUISITION FROM A-Z INCLUDING THE ORGANIZATION'S OBLIGATION TO MONITOR EASEMENT PROTECTED PROPERTIES ANNUALLY. THE EASEMENT STEWARDSHIP FUND POLICY: THIS POLICY NOTES THE LEGAL OBLIGATION

DONOR RESTRICTED ENDOWMENT AS OF DECEMBER 31, 2020 CONSIST OF FUNDS

CONTRIBUTED FOR THE LONG-TERM ADMINISTRATION OF CONSERVATION EASEMENTS.

THE EARNINGS ON THESE FUNDS ARE SOLELY FOR THE PURPOSE OF COVERING THE

COSTS OF STEWARDING EACH EASEMENT. DONOR RESTRICTED ENDOWMENT TOTALED

\$1,862,828 AT DECEMBER 31, 2020. NET ASSETS WITHOUT DONOR RESTRICTIONS AS

Schedule D (Form 990) 2020 DUTCHESS LAND CONSERVANCY, INC. 14-1667526 Page 5 [Part XIII] Supplemental Information (continued)
OF DECEMBER 31, 2020 CONSIST OF FOUR BOARD DESIGNATED CATEGORIES. THE
BOARD DESIGNATED AMOUNTS ARE FOR THE FOLLOWING PURPOSES: STEWARDSHIP FUND
\$2,789,892; LAND PROTECTION FUND \$5,355,094; LAND EASEMENT ACQUISITION
FUND \$367,317; AND RESERVE FUND \$401,076 FOR TOTAL BOARD DESIGNATED NET
ASSETS OF \$8,913,379.
PART X, LINE 2:
THE ORGANIZATION HAS EVALUATED ANY UNCERTAIN TAX POSITIONS AND RELATED
INCOME TAX CONTINGENCIES AND DETERMINED UNCERTAIN POSITIONS, IF ANY, ARE
NOT MATERIAL TO THE FINANCIAL STATEMENTS, ACCORDING TO FASB ASC 740-10.
PENALTIES AND INTEREST ASSESSED BY INCOME TAXING AUTHORITIES ARE INCLUDED
IN OPERATING EXPENSES, IF INCURRED. NONE OF THE ORGANIZATION'S RETURNS ARE
CURRENTLY UNDER EXAMINATION.

SCHEDULE G

Supplemental Information Regarding Fundraising or Gaming Activities

(Form 990 or 990-EZ)

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

▶ Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Schedule G (Form 990 or 990-EZ) 2020

Name of the organization DUTCHESS LAND CONSBRVANCY, INC. Employer identification number 14-1667526	Department of the Treasury	- · · · · · · · · · · · · · · · · · · ·						Open to Public			
Part Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations e Solicitation of povernment grants b Internet and email solicitations f Solicitation of povernment grants c Phone solicitations g Special fundraising events d In-person solicitations g Special fundraising events d In-person solicitations g Special fundraising events d In-person solicitations g Person solicitations g	Out to www.as.gov/formeso for instructions and the latest information.										
Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-£Z filers are not required to complete this part. 1. Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations e Solicitation of non-government grants b Interest and email solicitations f Solicitation of government grants c Phone solicitations g Special fundraising events d Interest and email solicitations g Special fundraising events d Interest and email solicitations g Special fundraising events d Interest and email solicitations g Special fundraising services? yes No b if "Yes," list the 10 highest paid incliniduals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (ii) Activity (iii) Gross receipts (iv) Gross receipts (iv) Amount paid (or retained by) from activity (individual or entity (fundraiser) (iv) Amount paid (or retained by) organization Yes No (iv) Amount paid (or retained by) organization Yes No (iv) Amount paid (or retained by) organization Yes No (iv) Amount paid (or retained by) organization Yes No (iv) Amount paid (or retained by) organization Yes No (iv) Amount paid (or retained by) organization Yes No (iv) Amount paid (or retained by) organization Yes No (iv) Amount paid (or retained by) organization Yes No (iv) Amount paid (or retained by) organization Yes No (iv) Amount paid (or retained by) organization Yes No (iv) Amount paid (or retained by) organization Yes (iv) Amount paid (or retained by) organization (iv) Amount paid (or retained by) organization (iv) Amount paid (or retained by) organization (iv) Amount paid (or retained b											
1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a	Part I Fundrais	ing Activities	· Complete if the organization answe			n Form 990, Part IV,	line 1				
a Mail solicitations c Solicitation of non-government grants c Phone solicitations f Solicitation of government grants d In-person solicitations g Special fundraising events d In-person solicitations g Special fundraising events d In-person solicitations g Special fundraising events d In-person solicitations g Special fundraising events d In-person solicitations g Special fundraising events d In-person solicitation have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VIII) or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual (ii) Activity (iii) Down to provide the provided to provide to pro				a acti	√ities.	Check all that apply.					
c Phone solicitations g Special fundratising events d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundratising services? Yes No b If "Yes," list the 10 highest paid individuals or entities (fundratisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Did Individual or entity (fundraiser) (iv) Gross receipts (v) Amount paid to (or retained by) organization (iii) Organization (iv) Gross receipts (v) Amount paid to (or retained by) organization (iv) Gross receipts (v) Gross receipts											
d											
2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual or entity (fundraiser) (ii) Activity Ves No (iv) Gross receipts (iv) Armount paid to retained by) fundraiser (iv) Armount paid to retained by) fundraiser (iv) Armount paid to retained by) fundraiser (iv) Armount paid to retained by) fundraiser (iv) Armount paid to retained by) fundraiser (iv) Armount paid to retained by) fundraiser (iv) Armount paid to retained by) organization Ves No (iv) Armount paid to retained by) fundraiser (iv) Armount paid to retained by) organization Ves No (iv) Armount paid to retained by) fundraiser (iv) Armount paid to retained by) organization Ves No (iv) Armount paid to retained by) fundraiser (iv) Armount paid to retained by) organization											
key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Dod have cualled by from activity (iv) Gross receipts from activity from activity organization (iv) Amount paid to (or retained by) fundraiser listed in col. (i) organization (ii) Activity (iv) Amount paid to (or retained by) fundraiser listed in col. (i) organization (iv) Amount paid to (or retained by) fundraiser listed in col. (i) organization (iv) Amount paid to (or retained by) fundraiser listed in col. (ii) organization (iv) Amount paid to (or retained by) fundraiser listed in col. (ii) organization (iv) Amount paid to (or retained by) fundraiser listed in col. (ii) organization (iv) Amount paid to (or retained by) fundraiser listed in col. (ii) organization (iv) Amount paid to (or retained by) fundraiser listed in col. (ii) organization (iv) Amount paid to (or retained by) fundraiser listed in col. (ii) organization (iv) Amount paid to (or retained by) fundraiser listed in col. (ii) organization (iv) Amount paid to (or retained by) fundraiser listed in col. (ii) organization (iv) Amount paid to (or retained by) fundraiser listed in col. (ii) organization (iv) Amount paid to (or retained by) fundraiser listed in col. (ii) organization (iv) Amount paid to (or retained by) fundraiser listed in col. (ii) organization (iv) Amount paid to (or retained by) fundraiser listed in col. (ii) organization (iv) Amount paid to (or retained by) fundraiser listed in col. (ii) organization (iv) Amount paid to (or retained by) fundraiser listed in col. (ii) organization (iv) Amount paid to (or retained by) fundraiser listed in col. (ii) organization (iv) Amount paid to (organization) (iv) Amount paid to (organization) (iv) Amount	,										
b If "Yes," first the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Old fundraiser from activity (iv) Gross receipts from activity (iv) Gross receipts from activity (individual from activity (iv) Amount paid to (or retained by) fundraiser listed in col. (i) (ii) Activity (iv) Amount paid to (or retained by) (iv) Gross receipts from activity (iv) Gross receipts from activity (iv) Amount paid to (or retained by) (iv) Amount paid to							tees,				
Compensated at least \$5,000 by the organization. (i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Did fundraiser (iv) Gross receipts from activity from activity fundraiser listed in col. (i) (iv) Amount paid to (or retained by) rundraiser listed in col. (i) (vi) Amount paid to (or retained by) organization (vi) Amount paid to (or retained by) organization (vii) Activity (viii) Did from activity from activity from activity and activity organization (viii) Activity (vi) Amount paid to (or retained by) organization (viii) Activity (viii) Activity (viii) Did from activity from activity from activity from activity from activity organization (viii) Activity (viii) Activity (viii) Did from activity from activit			•			•	ha fur				
(ii) Name and address of individual or entity (fundraiser) (iii) Activity (iii) or fundraiser (iv) Gross receipts from activity (iv) Gross receipts from activity (v) Amount paid to (or retained by) fundraiser listed in col. (i) (vi) Amount paid to (or retained by) organization (vi) Amount paid to (or retained by) organization (vi) Amount paid to (or retained by) fundraiser listed in col. (i) (vi) Amount paid to (or retained by) organization (vi) Amount paid to (or retained by) organization (vi) Amount paid to (or retained by) fundraiser listed in col. (i) (vi) Amount paid to (or retained by) organization (vi) Amount paid to (or retained by) fundraiser listed in col. (i) (vi) Amount paid to (or retained by) organization (vi) Amount paid to (or retained by) fundraiser listed in col. (i)				ant to	agree	interits direct which t	iig ital	IUI BISCI IS TO L	e.		
(ii) Activity or entity (fundraiser) (iii) Activity independent of the product				T		1	1				
or entity (fundraiser) Per No	(i) Name and address	s of individual	Anna Angelia de la	(iii)	Did alser	(iv) Gross receipts	(v) to (c	Amount paid or retained by)			
Yes No Yes No	or entity (fund	raiser)	(ii) Metivity	or cor	itrol of	from activity		fundraiser			
otal List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration											
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration				162	140	1					
3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration				-			-		-		
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	<u>Fotal</u>	1.44									
		n the organization	ris registered or licensed to solicit co	ontribu	itions	or has been notilied	it is e	xempt from re	gistration		
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

	nędu art	ile G (Form 990 or 990 EZ) 2020 DUTCHES II Fundraising Events. Complete if the of fundraising event contributions and ground and gr	ie organization answered	d "Yes" on Form 990, Pa	rt IV, line 18, or reported	-1667526 Paged more than \$15,000 pts greater than \$5,000
			(a) Event #1 DRIVE-IN EVENT (event type)	(b) Event #2 CELEBRATE THE OUTDOORS (event type)	(c) Other events NONE (total number)	(d) Total events (add col. (a) throug col. (c))
Revenue	1	Gross receipts	157,176.	122,273.		279,449
_	2	Less: Contributions	156,951.	122,273.		279,224
	3	Gross income (line 1 minus line 2)	225.			225
	4	Cash prizes				<u>.</u>
រង	5	Noncash prizes				
カカのこうのとし	6	Rent/facility costs	12,940.			12,940
בות ה	7	Food and beverages				
3	8	Entertainment Other direct expenses	20,000. 1,588.			20,000
	10	Direct expense summary. Add lines 4 through	9 in calumn (d)			34,528
	rt l			990, Part IV, line 19. or		-34,30
Ţ		\$15,000 on Form 990-EZ, line 6a.	(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (ac
10.00			(a) onigo	bingo/progressive bingo	(c) Other garning	col. (a) through col. (
	1	Gross revenue	All Marie II		· ourseman	
	2	Cash prizes				
	3	Noncash prizes				
	4	Rent/facility costs				
-	5	Other direct expenses	principal and the second	<u></u>	<u> </u>	
	6	Volunteer labor	Yes% No	Yes %	Yes % No	
	7	Direct expense summary, Add lines 2 through	5 in column (d)		•	
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		>	
ł	ls 1	er the state(s) in which the organization conduct ne organization licensed to conduct gaming act No," explain	livities in each of these s	lates?		Yes N
		re any of the organization's gaming licenses rev res, l'explain			ear?	Yes N
		• • • •				m 990 or 990-EZ} 202

Հրե.	edule G (Form 990 or 990-EZ) 2020 DUTCHESS LAND CONSERVANCY, INC. 1	4-1667526	Page 3
	Does the organization conduct gaming activities with nonmembers?	Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity conducted in:	f: 1	
а	The organization's facility	13a	<u>%</u>
b	An outside facility	13b	%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name ►		
	Address >		-
	Does the organization have a contract with a third party from whom the organization receives gaming revenue?		☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amoun	t	
	of gaming revenue retained by the third party > \$		
С	If "Yes," enter name and address of the third party:		
	Name ►		
	Address ►		
16	Gaming manager information:		
	Name ►		
	Gaming manager compensation \$		
	Description of services provided		
	•	<u></u>	
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	Yes	□ Na
	retain the state gaming license?		
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the	ie .	
Pa	organization's own exempt activities during the tax year 5 Supplemental Information. Provide the explanations required by Part I. line 2b. columns (iii) and (v); and	d Part III, lines 9.	9b, 10b.
	15b, 15c, 16. and 17b, as applicable. Also provide any additional information. See instructions.		
	100, 100, 10.000		
	/A		
	Schodule G	(Form 990 or 990	D-EZ) 2020
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Schedule G (Form 990 or 990-E2) Part IV Supplemental Info	DUTCHESS LAND	CONSERVANCY,	INC.	14-1667526 Page 4
Part IV Supplemental Info	rmation (continued)			
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SCHEDULE J (Form 990)

Department of the Treasury

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

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

OM5 No. 1545-9947

Open to Public Inspection

internal Revenue Service Name of the organization

DUTCHESS LAND CONSERVANCY, INC.

Employer identification number 14-1667526

P	art I Questions Regarding Compensation	<u> </u>		
			Yes	No
18	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		-	
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)		1.6	
	,	3.59	1 4 1/3	
ł,	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	'''	ľ
2	Oid the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors.	1.17		
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	12.	
				1
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			F .
	GEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			1
	establish compensation of the CEO/Executive Director, but explain in Part III,	1 :-		
	X Compensation committee			T-1
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee	1.	:	
	Approval by the board of compensation committee	ļ.		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filling			
•	organization or a related organization:			9
я	Receive a severance payment or change-of-control payment?			v
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4a		X
c	Participate in or receive payment from an equity-based compensation arrangement?	4b		X
٠		4c		Λ_
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			•
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of:			
а	The organization?	5a		x
b	Any related organization?	5b		X
	If 'Yes' on line 5a or 5b, describe in Part III.	30		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of.			
а	The organization?	6a		х
Ь	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
	not described on lines 5 and 6? If "Yes," describe in Part III	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	 		17
-	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	,		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	8		^_
-	Regulations section 53 4958-6/d?			

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

Schedule J (Form 990) 2020

DUTCHESS LAND CONSERVANCY, INC.

Schedule J (Form 990) 2020

Page 2

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. 14-1667526

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII,

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of V	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(a)·()(a)	in column (B) reported as deferred on prior Form 990
(1) REBECCA THURNTON	E	175,000.	0.	.0	5,250.	4,000.	184.250.	
PRESIDENT	Ξ	• 0	0,	0		.0	0	. 0
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Schedule J (Form 990) 2020

SCHEDULE L

Transactions With Interested Persons

(Form 990 or 990-EZ) ► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a,

28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b. ➤ Attach to Form 990 or Form 990-EZ.

Open To Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

80.75 20.56

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

Name of the organization	DUTCHES	S LAND CO	NSEF	NAV	CY, INC.			14	-16	675		ion n	ımber
Part I Excess Ben	nefit Transa	ctions (section :	501(c)(3), seci	tion 501(c)(4), and se			enizati	ons on	ıly).			
1	1 4	inswered "Yes" on (b) Relationship be			art IV, line 25a or 25t lified					b.	(d)	Corre	ected?
(a) Name of disqualified	person	person and	organiz	ation	(c) D	escription of trar	rsactio	on			es	No
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W													
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2 Enter the amount of tax section 4958	,	_	•		qualified persons dur	•	•		▶ \$				
3 Enter the amount of tax	k, if any, on line	2, above, reimbur	sed by	the or	ganization				\$				
Part II Loans to an	id/or From	Interested Per	sons										
					, Part V, line 38a or F	orn:	990, Part IV, lin	e 26; c	or if the	e orga	nizatio	n	
		990, Part X, line 5,			r			·		U . N			
(a) Name of interested person	(b) Relationsl with organizat		fro	oan to or m the	(e) Original principal amount	(f) Balance due) In sult?	(h) Ap by bo	ard or	1 117 8	/ritten ment?
-			To	From				Yes	No	comm Yes	No	Yes	T
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	ssistance B	enefiting Inter	este	l Per]				
		nswered "Yes" on	Form 9	90. Pa									
(a) Name of interested	person	(b) Relationship interested per the organiz	son an		(c) Amount of assistance		(d) Type assistand				Purp ssist:		•
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Schedule L (Form 990 or 990 EZ) 2020 DUTCHESS LAND CONSERVANCY, INC.

14-1667526 Page 2

SCHEDULE O

(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.

OMB No. 1545-9047 Open to Public inspection

Name of the organization

DUTCHESS LAND CONSERVANCY, INC.

Employer identification number 14-1667526

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
(CONTINUED) DUTCHESS COUNTY, NEW YORK, AND THE SURROUNDING AREA.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
OBTAINING CONSERVATION EASEMENTS ON PRIVATELY HELD LAND AND MONITORING
THESE EASEMENTS IN PERPETUITY. CONSERVATION EASEMENTS, ACQUIRED THROUGH
EITHER DONATION OR PURCHASE, ARE LEGAL AGREEMENTS LIMITING FUTURE
DEVELOPMENT IN ORDER TO PROTECT LAND FOR CONSERVATION PURPOSES. IN
ADDITION, DLC PROVIDES PROFESSIONAL ASSISTANCE TO LANDOWNERS AND
MUNICIPALITIES TO ENCOURAGE ENVIRONMENTALLY SOUND PLANNING, AND
EDUCATES THE PUBLIC ON MATTERS OF LAND CONSERVATION AND STEWARDSHIP. IN
2009 THE ORGANIZATION WAS AWARDED ACCREDATION STATUS BY THE LAND TRUST
ACCREDITATION COMMISSION, AN INDEPENDENT PROGRAM OF THE LAND TRUST
ALLIANCE. IN 2014 AND 2020, THE ORGANIZATION RECEIVED ITS FIRST AND
SECOND ACCREDITATION RENEWALS, RESPECTIVELY.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
LAND CONSERVATION (CONTINUED): RECEIVED A GRANT TO PURCHASE THE SEVEN
WELLS PROPERTY TO ADD TO THE DOVER STONE CHURCH PRESERVE.
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
STEWARDSHIP (CONTINUED): MICROSOFT'S MAPSLIVE.COM, GOOGLE EARTH, AND
BING, WHICH PROVIDE VERY USEFUL ADDITIONAL SOURCES OF AERIAL
PHOTOGRAPHY AND ACTIVELY LOOKING INTO SATELLITE IMAGERY AS A MONITORING
POOL. THE ORGANIZATION'S STEWARDSHIP RESPONSIBILITIES CONTINUE TO
INCREASE EACH YEAR AS MORE AND MORE EASEMENTS ARE ACCEPTED. THE HA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule 0 (Form 990 or 990-EZ) 2020

ORGANIZATION CONTINUES TO IMPROVE THE TRACKING OF EASEMENT PROTECTED

PROPERTY SALES, COMMUNICATION WITH LANDOWNERS, AND MAINTAINING A "WATCH

LIST" OF EASEMENT PROTECTED LAND ON THE MARKET TO CHECK FOR NEW

OWNERSHIP. THROUGHOUT THE YEAR, THE STAFF FILES CRITICAL EASEMENT

RELATED DOCUMENTS IN THE ORGANIZATION'S ARCHIVAL STORAGE UNIT IN AN

OFF-SITE FACILITY TO ENSURE THE LONG-TERM SAFETY OF THE ORGANIZATION'S

MOST VALUABLE DOCUMENTS. THE ORGANIZATION ALSO CONTINUED ITS

COLLABORATION WITH COLUMBIA LAND CONSERVANCY (CLC) ON ITS FARMER

LANDOWNER MATCH PROGRAM, THAT FACILITATES LEASE AGREEMENTS BETWEEN

LANDOWNERS SEEKING TO HAVE THEIR LAND FARMED, AND FARMERS SEEKING LAND,

AS A WAY TO KEEP LAND OPEN.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

EDUCATION (CONTINUED): THROUGHOUT THE YEAR. STAFF AND BOARD MEMBERS

VIRTUALLY ATTENDED THE NATIONAL LAND TRUST RALLY (CONFERENCE), ATTENDED

THE NEW YORK LAND TRUST SYMPOSIUM, NUMEROUS SEMINARS, CLASSES AND

WEBINARS TO INCREASE KNOWLEDGE, PARTICIPATED ON NUMEROUS COMMITTEES

(STATE, REGIONAL, AND LOCAL) AND ATTENDED VARIOUS GATHERINGS TO PROMOTE

AWARENESS OF THE ENVIRONMENT, LAND CONSERVATION, AND DLC'S WORK. DLC'S

PRESIDENT CONTINUES TO SERVE ON THE LAND TRUST ALLIANCE NY ADVISORY

BOARD.

FORM 990, PART VI, SECTION A, LINE 1:

COMPOSITION OF THE EXECUTIVE COMMITTEE: THE EXECUTIVE COMMITTEE IS COMPOSED

OF ELEVEN MEMBERS OF THE ORGANIZATION'S BOARD OF DIRECTORS (CAN BE ANYWHERE

FROM 4 TO 12 MEMBERS AND MUST BE BOARD MEMBERS PER THE ORGANIZATION'S BY

LAWS). THIS COMMITTEE MEETS MONTHLY AND OVERSEES THE DAY TO DAY OPERATIONS

OF THE ORGANIZATION AND MANAGES BOARD ISSUES BETWEEN BOARD MEETINGS AS

Schedule O (Form 990 or 990-EZ) 2020

Schedule O (Form 990 or 990-EZ) 2020

APPROPRIATE. NOT LESS THAN FOUR MEMBERS CONSTITUTE A QUORUM. SCOPE OF EXECUTIVE COMMITTEE AUTHORITY: OUTLINED UNDER THE ORGANIZATION'S BY LAWS ADOPTED IN APRIL 2014 AND EFFECTIVE AS OF JULY 1, 2014. THE ORGANIZATION'S BOARD DELEGATED AUTHORITY TO THE EXECUTIVE COMMITTEE, BY RESOLUTION ADOPTED BY THE BOARD IN JULY 2008, AS AMENDED BY RESOLUTION, AND BY A DELEGATION OF TRANSACTION APPROVAL POLICY ADOPTED BY THE BOARD AND UPDATED AND RE-APPROVED IN JULY 2019. THE EXECUTIVE COMMITTEE HAS ALL OF THE AUTHORITY OF THE BOARD, EXCEPT AUTHORITY AS TO: (A) THE FILLING OF VACANCIES IN THE BOARD OR IN ANY COMMITTEE THEREOF; (B) THE FIXING OF COMPENSATION OF THE DIRECTORS FOR SERVING ON THE BOARD OR ANY COMMITTEE THEREOF; (C) THE AMENDMENT OR REPEAL OF THE BY-LAWS OR THE ADOPTION OF NEW BY-LAWS; OR (D) THE AMENDMENT OR REPEAL OF ANY RESOLUTION TO THE BOARD WHICH BY ITS TERMS SHALL NOT BE SO AMENDABLE OR REPEALABLE. THIS AUTHORITY IS LIMITED SO THAT, WITH RESPECT TO ANY LAND OR EASEMENT TRANSACTION, THE EXECUTIVE COMMITTEE IS ONLY AUTHORIZED TO: (A) REVIEW AND APPROVE CONSERVATION EASEMENTS BETWEEN REGULAR MEETINGS OF THE BOARD; (B) ACT ON LAND DEALS AS DELEGATED TO IT BY THE BOARD OF DIRECTORS; (C) ACT ON MINOR ITEMS BETWEEN REGULAR MEETINGS OF THE BOARD; AND (D) MEET IN SITUATIONS WHERE THE EXECUTIVE COMMITTEE CONCLUDES THAT IT IS NECESSARY OR DESIRABLE TO TAKE PROMPT ACTION WHERE IT IS IMPOSSIBLE OR IMPRACTICAL TO CALL A SPECIAL MEETING OF THE BOARD, AND TAKE WHATEVER ACTION IT DEEMS NECESSARY. ALL MAJOR ITEMS, ITEMS THAT ARE CONTROVERSIAL IN NATURE AND ALL CONSERVATION EASEMENT AMENDMENTS ARE DECIDED BY THE FULL BOARD. INFORMATION PERTAINING TO CONSERVATION EASEMENTS AND ALL OTHER ITEMS TO BE CONSIDERED BY THE EXECUTIVE COMMITTEE ARE SENT TO THE FULL BOARD PRIOR TO EACH EXECUTIVE COMMITTEE MEETING. SPECIFIC NOTICE IS GIVEN TO THE FULL BOARD WHENEVER POSSIBLE WHEN THE EXECUTIVE COMMITTEE IS CONSIDERING MAKING A FINAL DECISION ON BEHALF OF THE FULL BOARD. EXECUTIVE COMMITTEE MINUTES REFLECTING ITS DISCUSSION AND

Employer identification number 14-1667526

DECISIONS ARE CIRCULATED TO ALL BOARD MEMBERS PRIOR TO THE FOLLOWING FULL BOARD MEETING. A REPORT OF ANY ACTIONS SPECIFICALLY TAKEN BY THE EXECUTIVE COMMITTEE ON BEHALF OF THE BOARD ARE GIVEN AT EACH FULL MEETING OF THE BOARD. ALL DECISIONS MADE BY THE EXECUTIVE COMMITTEE ON BEHALF OF THE BOARD ARE PRESENTED TO THE FULL BOARD FOR RATIFICATION AT THE NEXT SUBSEQUENT MEETING. IN CASES WHERE TIME IS OF THE ESSENCE AND ITEMS UP FOR A DECISION BY THE EXECUTIVE COMMITTEE ARE CONTROVERSIAL, A SPECIAL MEETING OF THE BOARD IS CALLED TO DELIBERATE SUCH ISSUES. THE ORGANIZATION'S CONFLICT OF INTEREST POLICY APPLIES IN ALL CASES PERTAINING TO THE ORGANIZATION'S DELEGATION OF TRANSACTION APPROVAL POLICY. THE BOARD REVIEWS AND ASSESSES THE DELEGATION OF TRANSACTION APPROVAL POLICY AND ITS IMPLEMENTATION EVERY TWO YEARS AND MAKES MODIFICATIONS AS VOTED UPON BY THE FULL BOARD.

FORM 990, PART VI, SECTION A, LINE 2:

THE ORGANIZATION AND A LOCAL NON-PROFIT ORGANIZATION, THE CARY INSTITUTE OF ECOSYSTEM STUDIES (CIES), HAVE OVERLAPPING ORGANIZATION AND BOARD MEMBERS (OBM), BOARD FAMILY MEMBERS TIM BONTECOU (OBM) AND FRED WHITRIDGE'S (OBM) WIFE SERENA WHITRIDGE ALL SERVE ON THE BOARD OF CIES.

FORM 990, PART VI, SECTION B, LINE 11B:

THE ORGANIZATION'S AUDITORS PREPARE THE FORM 990 BASED ON THEIR AUDIT AND IT IS PRESENTED TO THE ORGANIZATION'S PRESIDENT, TREASURER, AND FINANCIAL MANAGER IN DRAFT FORM FOR REVIEW, WHO THEN ENSURE THAT THE AUDIT COMMITTEE HAS THE OPPORTUNITY TO REVIEW IT. FOLLOWING THEIR COMMENTS AND ANY APPROPRIATE REVISIONS AGREED TO AND MADE BY THE AUDITORS IT IS MADE AVAILABLE TO ALL BOARD MEMBERS TO REVIEW PRIOR TO FILING WITH THE IRS. ONCE FORM 990 IS FILED, IT IS INCLUDED ON THE ORGANIZATION'S WEBSITE VIA A DIRECT GUIDESTAR CONNECTION AS WELL AS IN THE ORGANIZATION'S BOARD MANUAL 925 MA (6)

Employer identification number 14-1667526

WHICH THE BOARD CAN REVIEW ON THE ORGANIZATION'S WEBSITE BY SPECIAL

PASSWORD. ALTERNATIVELY, ALL BOARD MEMBERS MAY RECEIVE A PAPER COPY UPON
REQUEST.

FORM 990, PART VI, SECTION B, LINE 12C: THE ORGANIZATION REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY. THE ORGANIZATION UPDATED ITS CONFLICT OF INTEREST POLICY IN 2015 IN CONJUNCTION WITH THE NEW YORK STATE NON-PROFIT REVITALIZATION ACT. PERSONS COVERED UNDER THE CONFLICT OF INTEREST POLICY: COVERED PERSONS INCLUDE ANY INSIDER OF THE ORGANIZATION WHO IS ANY DIRECTOR, OFFICER, ADVISORY COMMITTEE MEMBER OR EMPLOYEE, OR ANY TRUSTEE OF THE LAND OR SUBSTANTIAL CONTRIBUTOR, PARTY RELATED TO THE ABOVE, VOLUNTEER WITH AN INVOLVEMENT IN POLICY OR STEWARDSHIP OF EASEMENTS, ANYONE WITH AN ABILITY TO INFLUENCE DECISIONS OF THE ORGANIZATION OR A PERSON WITH ACCESS TO INFORMATION NOT AVAILABLE TO THE GENERAL PUBLIC. THE LEVEL AT WHICH DETERMINATIONS OF WHETHER A CONFLICT EXISTS ARE MADE: ANY CONFLICT OR POSSIBLE APPEARANCE THEREOF IS FULLY DISCLOSED A) ANNUALLY IN WRITING; B) ORALLY AT BOARD, EXECUTIVE COMMITTEE AND OTHER SUCH ORGANIZATION MEETINGS AND RECORDED IN THE MINUTES; OR C) AT OTHER SUCH TIMES WHEN A CONFLICT MAY OCCUR. DISCLOSURE IS TO THE CHARIMAN OF THE AUDIT COMMITTEE (FOR ALL EMPLOYEES OTHER THAN THE PRESIDENT) AND THE ORGANIZATION'S PRESIDENT (FOR EMPLOYEES OTHER THAN THE PRESIDENT), OR TO BOTH. THE LEVEL AT WHICH ACTUAL CONFLICTS ARE REVIEWED: THE ORGANIZATION'S CONFLICT OF INTEREST POLICY IS ADMINISTERED BY THE ORGANIZATION'S BOARD AUDIT COMMITTEE, WHICH IS AUTHORIZED TO RECEIVE NOTIFICATIONS UNDER THIS POLICY AND INTERPRET THE PROVISIONS OF THE POLICY. RESTRICTIONS IMPOSED ON PERSONS WITH A CONFLICT: IN THE CASE OF CONFLICTS INVOLVING A DIRECTOR OR OFFICER, THE DIRECTOR OR OFFICER HAVING SUCH CONFLICT LEAVES THE ROOM IN WHICH DISCUSSION IS CARRIED_ Schedule O (Form 990 or 990-EZ) 2020 An are a rest be-

esant to these all

Schedule O (Form 990 or 990-EZ) 2020

ON AND REFRAINS FROM VOTING OR OTHERWISE ATTEMPTING TO INFLUENCE THE

DECISION THEREON, AND IN SOME CASES MAY RESIGN IF REQUESTED BY THE BOARD.

VIOLATIONS OF THE ORGANIZATION'S CONFLICT OF INTEREST POLICY MAY BE GROUNDS

FOR DISMISSAL AS AN EMPLOYEE OR SEVERANCE FROM THE BOARD OF DIRECTORS,

ADVISORY COMMITTEE OR AS A VOLUNTEER. THE ORGANIZATION HAS AN AGENDA ITEM

NUMBER ONE FOR ALL BOARD OF DIRECTOR AND EXECUTIVE COMMITTEE MEETINGS THE

FOLLOWING: 1) CONFLICTS OF INTEREST - OPPORTUNITY FOR BOARD MEMBERS TO

DISCUSS POTENTIAL CONFLICTS OF INTEREST REGARDING ITEMS ON THE AGENDA. THIS

SERVES AS A REMINDER TO BOARD MEMBERS (OR STAFF) TO DISCLOSE ANY POTENTIAL

CONFLICT OF INTEREST AT THIS TIME. CONFLICTS OR POTENTIAL CONFLICTS ARE

RECORDED IN THE ORGANIZATION'S MEETING MINUTES. THE ORGANIZATION CONTINUES

ITS PROCEDURE REQUIRING AN ANNUAL CONFLICT OF INTEREST DISCLOSURE STATEMENT

TO BE FILED ANNUALLY WITH THE ORGANIZATION BY ALL BOARD MEMBERS AND STAFF.

FORM 990, PART VI, SECTION B, LINE 15:

THE ORGANIZATION'S BOARD COMPENSATION COMMITTEE CONSISTS OF FOUR MEMBERS OF
THE BOARD THAT 1) REVIEWS THE ORGANIZATION'S STAFF COMPENSATION PACKAGES;

2) ENSURES THE ORGANIZATION'S COMPENSATION PACKAGES ARE IN LINE WITH

CURRENT MARKET BY RESEARCHING COMPARABLE COMPENSATION PACKAGES THROUGH A

COMPETITIVE ANALYSIS AND COMPENSATION AND BENEFITS STUDY; 3) REVIEWS

INFORMATION GATHERED BY COMMITTEE MEMBERS, STAFF AND/OR SPECIALISTS; AND 4)

MAKES RECOMMENDATIONS TO THE ORGANIZATION'S EXECUTIVE COMMITTEE. THE

COMMITTEE MEETS IN OCTOBER OR NOVEMBER OF EACH YEAR TO DETERMINE STAFF

COMPENSATION FOR THE FOLLOWING FISCAL YEAR. USE OF COMPARABLE COMPENSATION

DATA FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS

AT SIMILARLY SITUATED ORGANIZATIONS: THE COMPENSATION COMMITTEE REVIEWS

SALARY INFORMATION BY THE LAND TRUST ALLIANCE, STAFF BENEFIT SURVEYS OF

SIMILAR CONSERVATION ORGANIZATIONS IN NEW YORK; COMPARABLE SALARY DATA FROM

14-1667526 AVAILABLE FORM 990S AND OTHER INFORMATION FOR SIMILAR ORGANIZATIONS AND COMPARABLE POSITIONS AND TAKES INTO CONSIDERATION INFORMATION FROM THE U.S. BUREAU OF LABOR STATISTICS, NEW YORK COUNCIL OF NON PROFITS, GUIDESTAR, CHARITY NAVIGATOR, AND OTHER APPLICABLE INDEPENDENT SOURCES. THEY REVIEW ALL INFORMATION AND MAKE A RECOMMENDATION TO THE EXECUTIVE COMMITTEE, WHICH MAKES THE FINAL DECISION ON STAFF COMPENSATION PACKAGES. THE FULL BOARD OF DIRECTORS APPROVES THE PRESIDENT AND ALL KEY EMPLOYEE COMPENSATION AT A MEETING OF THE BOARD, AND APPROVES ALL OTHER STAFF COMPENSATION AS PART OF THE BUDGET APPROVAL. THE ORGANIZATION HAS A POLICY FOR BOARD APPROVAL OF COMPENSATION, WHICH SPELLS OUT THE ANNUAL PROCESS FOR DETERMINING COMPENSATION AND THE PROCESS FOR BOARD APPROVAL OF COMPENSATION FOR THE PRESIDENT AND ALL KEY EMPLOYEES ENSURING ADHERENCE TO ITS POLICY ON CONFLICTS OF INTEREST DURING ALL DELIBERATIONS AND DECISIONS. CONTEMPORANEOUS DOCUMENTATION AND RECORDKEEPING WITH THE RESPECT TO DELIBERATIONS AND DECISIONS REGARDING THE COMPENSATION ARRANGEMENT: THE COMPENSATION COMMITTEE, EXECUTIVE COMMITTEE, AND BOARD DELIBERATIONS ARE HELD IN EXECUTIVE SESSION. THE PRESIDENT PARTICIPATES IN DISCUSSION OF ALL STAFF EXCEPT HERSELF, AT WHICH TIME SHE LEAVES THE ROOM. THE PRESIDENT IS IN CHARGE OF KEEPING THE RECORDS OF STAFF COMPENSATION AND DECISIONS BY THE COMPENSATION COMMITTEE, EXECUTIVE COMMITTEE AND BOARD. THE CHAIRMAN OF THE COMPENSATION COMMITTEE IS IN CHARGE OF KEEPING THE RECORDS OF THE PRESIDENT'S AND KEY EMPLOYEE'S COMPENSATION AND DECISIONS BY THE COMPENSATION COMMITTEE, EXECUTIVE COMMITTEE, AND BOARD MEETINGS DURING EXECUTIVE SESSIONS WHEN THE PRESIDENT AND KEY EMPLOYEES ARE RECUSED FROM DELIBERATIONS AND VOTING ON HIS/HER COMPENSATION. THE RESPECTIVE MINUTES OF THESE MEETINGS ARE REVIEWED AND APPROVED BY THE COMPENSATION COMMITTEE, EXECUTIVE COMMITTEE, AND THE BOARD.

Schedule O (Form 990 or 990-EZ) 2020	Page 2
Name of the organization DUTCHESS LAND CONSERVANCY, INC.	Employer identification number 14-1667526
FORM 990, PART VI, SECTION C, LINE 18:	
SEE DISCLOSURE FOR LINE 19.	
FORM 990, PART VI, SECTION C, LINE 19:	
THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS AVAILABLE	ON ITS WEBSITE
AND ITS IRS FORM 990 AVAILABLE ON ITS WEBSITE THROUGH A DI	RECT GUIDESTAR
LINK. IT MAKES THESE AS WELL AS OTHER GOVERNING DOCUMENTS	AND CONFLICT OF
INTEREST POLICY AVAILABLE TO THE PUBLIC BY REQUEST.	

SCHEDULE R (Form 990)

Name of the organization

Related Organizations and Unrelated Partnerships Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▼ Attach to Form 990.

Open to Public Inspection 2020

CMB No. 1545-0047

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

DUTCHESS LAND CONSERVANCY, INC.

Employer identification number 14-1667526

Schedule R (Form 990) 2020 (g) Section 5 (20)(13) No controlled onlisy? Direct controlling Yes Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year. (f)Direct controlling entity End-of-year assets Public charity status (if section 501(c)(3)) <u>ق</u> Total income Exempt Code T section ਉ Legal domicile (state or Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Legal domicile (state or foreign country) foreign country) Primary activity Primary activity <u>@</u> For Paperwork Reduction Act Notice, see the Instructions for Form 990. Name, address, and EIN (if applicable) Name, address, and EIN of related organization of disregarded entity Part II Part

14-1667526

Page 2

Schedule R (Form 990) 2020 DUTCHESS LAND CONSERVANCY, INC.

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

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(E)	(q)	(၁)	<u>G</u>	<u>(e)</u>	Ξ	(6)	£)	£	3	3
Name, address, and EIN of related organization	Primary activity	Logal demicile (state or	Direct controlling entity	Predominant income (related, unrelated, available from tax under	Share of total income	Share of end-of-year	Orspropertionate altocations?	Code V-UBI	Seneral c managiny partner?	g o
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Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year. Part IV

(a)	(9)	(c)	(p)	(e)	Œ		(ਦ)	0	
Name, address, and ElN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling Type of entity St entity (Coops, Scorp, Corp. Scorp,	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year	Percentage \$12(b) (3) cownership controlled	Suction 5.12(b); controll controll	등문문 등
		country)		622				Yes	S S
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KEELSR CANS DEVELOPMENT CORPORATION -	Γ.							-	
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Schedule R (Form 990) 2020

Page 3

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.				Yes No
1 Curing the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts IHV?	s with one or more rel	ateci organizations listed ii	Parts IHV?	
a Receipt of (i) inferest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				Ta X
 b Gitt, grant, or capital contribution to related organization(s) 				16 X
				1c X
d Loans or loan guarantees to or for related organization(s)				×
c Loans or loan guarantees by related organization(s)				7e X
f Dividends from related organization(s)				×
g. Sale of assets to related organization(s)				1g X
h Purchase of assets from related organization(s)				
) Lease of facilities, equipment, or other assets to related organization(s)				i.
k Lease of facilities, equipment, or other assets from related organization(s)	:			× ×
l Performance of services or membership or fundraising solicitations for related organization(s)	nization(s)			1 🗙
m Performance of services or membership or fundraising solicitations by related organization(s)	rization(s)			Tm.
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	on(s)			1n X
o Sharing of paid employees with related organization(s)				
p membousement paro to related organización (s) for expenses				
q Heimbursernant paid by related organization(s) for expenses				1q ×
r (Elther transfer of each or preparty to related property attents)				>
Other transfer of cash or property from related organization(s)				×
1 I	ho must complete th	is line, including covered r	elationships and transaction thresholds.	41 6
(a)	(q)	(c)		The second secon
Name of refated organization	Transaction type (a-s)	Amount involved	Method of determining amount involved	plved
(1) KEELER LANE DEVELOPMENT CORPORATION	Z	• ()	0.N/A	
(2) KEELER LANE DEVELOPMENT CORPORATION	0	0.	N/A	
EFFLER LAND TRIVELODMENM CONTROL	υ	000	7.174.17	
DANS DEVELORIBINI CONFORM	Ω	-	LMV	
[4]		The second secon		
(5)		100		
(9)				
			Schedule F	Schedule R (Form 990) 2020

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(h) (a) (b) (a) (a)	(q)	(c)	(a) (b)	ā	(*)	(5)	14	1:3	157	179
Name, address, and EIN	Primary activity	micile	Predominant income parage (related, unrelated)	Are all	Share of	Share of	Ospropar-	Code V-UBI	Ceneral or Managino	Percentage
		(state or loreign country)	excluded from tax under sections 512-514)		rotal income	end-or-year assets	Aftersions?	Allocations of Schedule K-1 parties ownership (Yes No (Form 1065) Yes No	Yes No	ownership
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								Schedule	R (Forr	Schedule R (Form 990) 2020

Part VII Supplemental Information
Provide additional information for responses to questions on Schedule R. See instructions.
PART IV, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS CORP OR TRUST:
NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:
KEELER LANE DEVELOPMENT CORPORATION
EIN: 30-0301951
PO BOX 138
MILLBROOK, NY 12545
PRIMARY ACTIVITY: RENTAL
DIRECT CONTROLLING ENTITY: DUTCHESS LAND

Schedule R (Form 990) 2020

CHAR500

1.General Information

NYS Annual Filing for Charitable Organizations www.CharitiesNYS.com

Send with fee and attachments to: NYS Office of the Attorney General Charities Bureau Registration Section 28 Liberty Street New York, NY 10005

TREASURER

Print Name and Title

Print Name and Title

2020

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Date

Date

01/01/2020 and Ending (mn1/dd/yyyy) 12/31/2020 For Fiscal Year Beginning (mm/dd/yyyy) Employer Identification Number (EIN): Check if Applicable: Name of Organization: 14-1667526 DUTCHESS LAND CONSERVANCY, INC. Address Change Name Change Mailing Address: NY Registration Number: 03-82-50 PO BOX 138 Initial Filing Final Filing City / State / ZIP: Telephone: MILLBROOK, NY 12545 845 677-3002 Amended Filing Email: Reg ID Pending DUTCHESSLAND.ORG Check your organization's Confirm your Registration Category in the X DUAL (7A & EPTL) EXEMPT* registration category: 7A only EPTL only Charities Registry at www.CharitiesNYS.com. 2. Certification See instructions for certification requirements. Improper certification is a violation of law that may be subject to penalties. The certification requires two signatories. We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report. NANCY HATHAWAY President or Authorized Officer:

3. Annual Reporting Exemption

Chief Financial Officer or Treasurer:

Signature

Signature

Check the exemption(s) that apply to your filing. If your organization is claiming an exemption under one category (7A or EPTL only filers) or both categories (DUAL filers) that apply to your registration, complete only parts 1, 2, and 3, and submit the certified Char500, No fee, schedules, or additional attachments are required. If you cannot claim an exemption or are a DUAL filler that claims only one exemption, you must file applicable schedules and attachments and pay applicable fees.

3a. 7A filing exemption: Total contributions from NY State including residents, foundations, government agencies, etc. did not exceed \$25,000 and the organization did not engage a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during the fiscal year.
3b. EPTL filling exemption: Gross receipts did not exceed \$25,000 and the market value of assets did not exceed \$25,000 at any time during the fiscal year.

A Schodules and Attachments

4. Ochicadica and	Attaviiii	Crito	
See the following page			
for a checklist of	Yes	X No	4a. Did your organization use a professional fund raiser, fund raising counsel or commercial co-venturer
schedules and			for fund raising activity in NY State? If yes, complete Schedule 4a.
attachments to			
complete your filing.	X Yes	No	4b. Did the organization receive government grants? If yes, complete Schedule 4b.

5. Fee

See the checklist on the	7A filing fee.	EPTL filing fee:	Total fee:	t de la casa de la cas
next page to calculate your				Make a single check or money order payable to
fee(s). Indicate fee(s) you				. ,
are submitting here.	\$ <u>25.</u>	\$ <u>750.</u>	\$ <u>775.</u>	"Department of Law"

CHAR500 Annual Filing for Charitable Organizations (Updated January 2021)

[&]quot;The "Exempt" category refers to an organization's NYS registration status. It does not refer to its IRS tax designation.

DUTCHESS LAND CONSERVANCY, INC.

CHAR500

Annual Filing Checklist

Simply submit the certified CHAR500 with no fee, schedule, or additional attachments IF:

- Your organization is registered as 7A only and you marked the 7A filing exemption in Part 3.
- · Your organization is registered as EPTL only and you marked the EPTL filing exemption in Part 3.
- Your organization is registered as DUAL and you marked both the 7A and EPTL filing exemption in Part 3.

Checklist of Schedules and Attachments

Check the schedules you must submit with your CHAR500 as described in Part 4: If you answered "yes" in Part 4a, submit Schedule 4a: Professional Fund Raiser If you answered "yes" in Part 4b, submit Schedule 4b: Government Grants	's (PFR), Fund Raising Counsel (FRC), Commercial Co-Venturers (CCV)
Check the financial attachments you must submit with your CHAR500: X IRS Form 990, 990-EZ, or 990-PF, and 990-T if applicable X All additional IRS Form 990 Schedules, including Schedule B (Schedule of Codisclosure and will not be available for public review. Our organization was eligible for and filed an IRS 990-N e-postcard. Our reven filing year. We have included an IRS Form 990-EZ for state purposes only.	
If you are a 7A only or DUAL filer, submit the applicable independent Certified Publi Review Report if you received total revenue and support greater than \$250,00 X Audit Report if you received total revenue and support greater than \$750,000 No Review Report or Audit Report is required because total revenue and support We are a DUAL filer and checked box 3a, no Review Report or Audit Report is Calculate Your Fee	00 and up to \$750,000. Doort is less than \$250,000
For 7A and DUAL filers, calculate the 7A fee: \$0, if you checked the 7A exemption in Part 3a \$\tilde{X}\$ \$25, if you did not check the 7A exemption in Part 3a	Is my Registration Category 7A. EPTL DUAL or EXEMPT? Organizations are assigned a Registration Category upon registration with the NY Charities Bureau: 7A filers are registered to solicit contributions in New York under Article 7-A of the Executive Law ("7A")
For EPTL and DUAL filers, calculate the EPTL fee: \$0, if you checked the EPTL exemption in Part 3b	EPTL filers are registered under the Estates, Powers & Trusts Law ("EPTL") because they hold assets and/or conduct activities for charitable purposes in NY.
\$25, if the NET WORTH is less than \$50,000 \$50, if the NET WORTH is \$50,000 or more but less than \$250,000 \$100, if the NET WORTH is \$250,000 or more but less than \$1,000,000 \$250, if the NET WORTH is \$1,000,000 or more but less than \$10,000,000 \$750, if the NET WORTH is \$10,000,000 or more but less than \$50,000,000 \$1500, if the NET WORTH is \$50,000,000 or more	DUAL filers are registered under both 7A and EPTL. EXEMPT filers have registered with the NY Charities Bureau and meet conditions in <u>Schedule E - Registration</u> <u>Exemption for Charitable Organizations</u> . These organizations are not required to file annual financial reports but may do so voluntarily.
Send Your Filing	Confirm your Registration Category and learn more about NY law at www.CharitiesNYS.com .
Send your CHAR500, all schedules and attachments, and total fee to: NYS Office of the Attorney General Consister Purery Registration Sentials	Whete do Llind my organization's NET WORTH? NET WORTH for fee purposes is calculated on: IRS Form 990 Part I, line 22 IRS Form 990 EZ Part I, line 21
Charities Bureau Registration Section 28 Liberty Street New York, NY 10005	- IRS Form 990 PF, calculate the difference between Total Assets at Fait Market Value (Part II. line 16(c)) and Total Liabilities (Part II, I'ne 23(b)).

Need Assistance?

Visit www.CharitiesNYS.com

Cali (212) 416-8401

Email Charities.Bureau@ag ny gov

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Schedule 4b: Government Grants www.CharitiesNYS.com

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If you checked the box in question 4b in Part 4, complete this schedule and list EACH government grant award by a domestic (federal, state or local) agency; interstate or intergovernmental agency (for example Port Authority of New York and New Jersey); and state or local authorities.

Use additional pages if necessary. Include this schedule with your certified CHAR500 NYS Annual Filing for Charitable Organizations.

1. Organization Information

Name of Organization:	NY Registration Number:
DUTCHESS LAND CONSERVANCY, INC.	03-82-50

2. Government Grants

Name of Government Agency	Amount of Grant	
1. NYS DEPT. OF AGRICULTURE AND MARKETS	1,	20,065.
2 NYS DEPT. OF ENVIRONMENTAL CONSERVATION	2.	245,572.
3. U.S. SMALL BUSINESS ADMINISTRATION	3.	161,910.
4.	4.	
5.	5.	
6.	6.	
7.	7.	
8.	8,	
9.	9.	
10.	10.	
11.	11.	
12.	12.	
13.	13.	
14,	14.	
15.	15	
Total Government Grants	Total	427,547.