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 Open to Public

Department of the Treasury Inspection Go to www.irs.gov/Form990 for instructions and the latest information. A For the 2022 calendar year, or tax year beginning and ending D Employer identification number C Name of organization Check if applicable Address change DUTCHESS LAND CONSERVANCY, INC. 14-1667526 Doing business as Number and street (or P.O. box if mail is not delivered to street address) Initial return Room/suite E Telephone number 3002 845 677 Final return/ PO BOX 138 12,056,943. G Gross receipts \$ City or town, state or province, country, and ZIP or foreign postal code Amended MILLBROOK, NY 12545 H(a) Is this a group return Applica-F Name and address of principal officer: NANCY HATHAWAY for subordinates? pending H(b) Are all subordinates included? Yes No 12545 PO BOX 138, MILLBROOK, NY If "No," attach a list. See instructions I Tax-exempt status: X 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or H(c) Group exemption number DUTCHESSLAND. ORG J Website: L Year of formation: 1985 M State of legal domicile: NY Form of organization: X Corporation Association Other Part I Summary Briefly describe the organization's mission or most significant activities: THE ORGANIZATION IS DEDICATED TO PRESERVING THE SCENIC, AGRICULTURAL, AND ENVIRONMENTAL RESOURCES OF Governance if the organization discontinued its operations or disposed of more than 25% of its net assets. 29 Number of voting members of the governing body (Part VI, line 1a) 29 Number of independent voting members of the governing body (Part VI, line 1b) 17 Activities & 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 124 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 0. b Net unrelated business taxable income from Form 990-T, Part I, line 11 **Current Year** 11,723,797. 3,967,143 Contributions and grants (Part VIII, line 1h) 0. Program service revenue (Part VIII, line 2g) .139,073. 565,561. 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -39,192.-44,086. 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 10,545,532. 4,488,618. 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 0. 0. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 1,197,661. 1,086,774. 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 16a Professional fundraising fees (Part IX, column (A), line 11e) b Total fundraising expenses (Part IX, column (D), line 25) 1,140,946. 2,077,676. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,338,607. 3,164,450. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 8,206,925. 1,324,168. 19 Revenue less expenses. Subtract line 18 from line 12 Beginning of Current Year End of Year 16,962,205. 23,860,218. 20 Total assets (Part X, line 16) 102,663. 143,891. 21 Total liabilities (Part X, line 26) 23,716,327. 16,859,542. Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Maroas Signature of officer Sign NANCY HATHAWAY TREASURER Here Type or print name and title PTIN Date Preparer's signature Print/Type preparer's name P00748483 06/29/23 N. THERESE WOLFE self-employed N. THERESE WOLFE Paid Firm's EIN 14-1555429 INC. UHY ADVISORS NY, Preparer Firm's name Firm's address ONE HUDSON CITY CENTRE, SUITE 204 Use Only Phone no. 518 - 828 - 1565

HUDSON, NY 12534

May the IRS discuss this return with the preparer shown above? See instructions

X Yes

	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	44
	DUTCHESS LAND CONSERVANCY (DLC) IS DEDICATED TO PRESERVING THE SCENI	С.
	AGRICULTURAL AND ENVIRONMENTAL RESOURCES OF DUTCHESS COUNTY, NEW YOR	
	AND THE SURROUNDING AREA. DLC, AS A PRIVATE NON-PROFIT LAND	,
	CONSERVATION ORGANIZATION, CARRIES OUT ITS MISSION PRIMARILY BY	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	<u> </u>	X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	X No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, a	ind
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$ 918,057. including grants of \$) (Revenue \$))
	LAND CONSERVATION: IN 2022, THE ORGANIZATION WORKED WITH NUMEROUS	
		AND
	SEVERAL CONSERVATION PLANNING PROJECTS, DEVELOPING, AND LAND	
	CONSERVATION, RESPONDING TO INQUIRIES ABOUT CONSERVATION EASEMENTS,	
	DOING RESEARCH AND ANALYSIS OF IMPORTANT RESOURCE LAND, AND VISITING	! r
	PROPERTIES. IN 2022, FOUR CONSERVATION EASEMENTS AND ONE LARGE	
	CONSERVATION PROJECT WERE COMPLETED PROTECTING 1,540 ACRES WHICH	
	BROUGHT THE ORGANIZATION'S TOTAL LAND PROTECTED TO APPROXIMATELY 46,	030
		TS
	WORK WITH SEVERAL FARMERS ON PDR PROJECTS IN MANY DUTCHESS COUNTY	
	TOWNS. MUNICIPAL CONSERVATION AREAS - THROUGH THE ORGANIZATION'S	
		WNS
4b	(Code:) (Expenses \$ 402,981. including grants of \$) (Revenue \$	<u> </u>
	STEWARDSHIP: THE ORGANIZATION HAS NOW PROTECTED 46,030 ACRES STEWARD 435 EASEMENTS. THE ORGANIZATION AERIALLY MONITORS ALL PROPERTIES	ING
	435 EASEMENTS. THE ORGANIZATION AERIALLY MONITORS ALL PROPERTIES ANNUALLY AND GROUND MONITORS ITS EASEMENTS ON A THREE TO FOUR YEAR	
	ROTATIONAL BASIS. IN 2022, THE ORGANIZATION AERIALLY MONITORED ALL	
	CONSERVATION EASEMENTS AND COMPLETED 141 ON A 3-TO-4-YEAR ROTATIONAL	•
	GROUND MONITORING SCHEDULE THROUGH STAFF. THE ORGANIZATION WORKED ON	
	NUMEROUS STEWARDSHIP MATTERS FROM PRIOR APPROVAL REQUESTS AND LAND	
	MANAGEMENT QUESTIONS TO RESOLVING EASEMENT ISSUES. IN 2022, THE	
	ORGANIZATION AGAIN REGISTERED FOR TERRAFIRMA, THE CONSERVATION EASEM	ENT
	DEFENSE INSURANCE PROGRAM TO ENHANCE ITS ABILITY TO SUCCESSFULLY	TILL
	ENFORCE ITS EASEMENTS. EACH YEAR, THE ORGANIZATION ALSO PROVIDES	
	RESEARCH AND LAND MANAGEMENT ASSISTANCE AND WORKS TO UPDATE OLD	
4c	(Code:) (Expenses \$537,416. including grants of \$) (Revenue \$	1
	EDUCATION AND OUTREACH: EDUCATING PEOPLE ABOUT CONSERVATION AND	
	RESEARCH ARE AN INTEGRAL PART OF THE ORGANIZATION'S MISSION. THE	
	ORGANIZATION'S STAFF REGULARLY TALK WITH MUNICIPALITIES, SCHOOL GROU	PS,
	COMMUNITY MEMBERS, AND PRIVATE LANDOWNERS ABOUT THE IMPORTANCE OF LA	
	PRESERVATION, SOUND PLANNING, QUALITY GROWTH THAT PROTECTS IMPORTANT	
	RESOURCES, LAND STEWARDSHIP AND MANAGEMENT, AND WAYS TO KEEP FARMERS	
	THE LAND. IN 2022, THE ORGANIZATION HOSTED AND PARTICIPATED IN 40	
	EDUCATION EVENTS, REACHING ALMOST 2300 PEOPLE. THE ORGANIZATION	
	COLLABORATED WITH 18 ORGANIZATIONS AND INTERACTED WITH 300 STUDENTS	AND
	CHILDREN. IN ADDITION, THE ORGANIZATIONS' OUTREACH AND VOLUNTEER	
	PROGRAMS ENGAGED OVER 190 VOLUNTEERS TO IMPROVE PUBLIC SPACES IN THE	IR
	COMMUNITIES AND IN COMMUNITY SERVICE INITIATIVES. STAFF AND BOARD	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
<u>4e</u>	Total program service expenses 1,858,454.	
	Form ^S	90 (2022)

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			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
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 Rev. Proc. 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>
U	•			х
9	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			_v
40	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		v	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	1.2
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,		1.	
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		**	
	Part VI	11a	_X_	<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			Ì
	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	į		
	Schedule D, Parts XI and XII	12a	X	
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		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			l
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		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	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? # "Yes."	10		
10		19		х
20~	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		-	X
20a	·	20a		
b 24	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		-
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	[v
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X

Form 990 (2022) DUTCHESS LAND CONSERVANCY, INC.

Part IV Checklist of Required Schedules (continued)

Did the organization answer "Yes" to Part VIII, Section A, Inie S. 4, or 5, about compensation of the organization's current and former offices, directors, trustees, key employees, and highest compensated employees? "If "Yes," complete Schedule I, Part IV 24a Dd 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 Docomber 31, 2002?" If "Yes," answer lines 24b through 24d and complete Schedule K, If "No." or 10 fee 25e Do that the organization maintain an escrew account other than a refunding escrew at any time during the year? 24b Dot the organization maintain an escrew account other than a refunding escrew at any time during the year? 24c Dot the organization and an escrew account other than a refunding escrew at any time during the year? 24d Dot the organization and an escrew account other than a refunding escrew at any time during the year? 24d Dot the organization and a dequalified person during the year? 24d Dot the organization and account of the success benefit transaction with a dequalified person in a prior year, and that the transaction with a dequalified person in a prior year, and that the transaction has not been reported an any of the organizations profit or any 900 E27 if "Yes," complete Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any ourrunt or former officer, director, trustee, key employee, creator or founder, substantial contributor, or abyse controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any ourrunt or former officer, director, trustee, key employee, creator or founder, creators for londer, particularly or family member of any of these persons? If "Yes," complete Schedule L, Part II Did the organization provide a grant or chiere assistance to any current or	Itine 2? If "Yes," complete Schedule I, Parts I and III n answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current i, directors, trustees, key employees, and highest compensated employees? If "Yes," complete 23 X In have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the it, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete "go to line 25a n invest any proceeds of tax-exempt bonds beyond a temporary period exception? n maintain an escrow account other than a refunding escrow at any time during the year to defease nds? n act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25d 24d 25d 24d 25d 25d X In report any amount on Part X, line 5 or 22, for receivables from or payables to any current irrector, trustee, key employee, creator or founder, substantial contributor, or 35% If amily member of any of these persons? If "Yes," complete Schedule L, Part II In provide a grant or other assistance to any current or former officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled to employee thereof or family member of any of these persons? If "Yes," complete Schedule L, Part II In provide a grant or other assistance to any current or former officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled to employee thereof or family member of any of these persons? If "Yes," complete Schedule L, Part III In provide a business transaction with one of the following parties (see the Schedule L, Part IV 27
Did the organization answer "Yes" to Fart VIII, Section A, Inis 3.4, ard 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? "If "Yes," complete Schedule J. 244 24a Did the organization have a tax-exempt bond soue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after Docember 31, 2002? "If "Yes," answer lines 246 through 244 and complete Schedule K. If "No." yo to line 25a 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defense any tax-exempt bonds of the exempt bonds beyond a temporary period exception? 24d Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 24d Did the organization and acts as an "on brahalf of Issuer for bonds outstanding at any time during the year? 24d Did the organization and acts as an "on brahalf of Issuer for bonds outstanding at any time during the year? 24d Did the organization and acts as an "on brahalf of Issuer for bonds outstanding at any time during the year? 25d Section 50 (v[4]5, 501(v[4]5, 501(v[4]4) and 50 (v[2]6) organizations. The department of the properties of the organization was the high acts of the organization and the section with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction when a disquality and the prior of the prior of the prior of the organization in the disqualitied person in a prior year, and that the transaction when an employee between the prior of the organization of th	n have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the than the was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete "go to line 25a "go to line 25a "n maintain an escrow account other than a refunding escrow at any time during the year to defease ands? In has not behalf of" issuer for bonds outstanding at any time during the year? 24d 25d 25d 25d 25d 25d 25d 25d 25d 25d 25
and former officers, directors, flustens, key employees, and highest compensated employees? If "Yes," complete Schedule J. 24a Did the organization thave 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 Docomber 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule J. "Pol." by a to line 25a. 5 bid the organization invest any proceeds of lax-exempt bonds beyond a temporary period exception? 5 bid the organization never any proceeds of lax-exempt bonds beyond a temporary period exception? 5 bid the organization never any access the period of the complete schedule J. Part I. 5 to line the organization never as an "on behalf of "issuer for bonds outstanding at any time during the year! 0 defease any tax-exempt bonds? 6 bid the organization as an "on behalf of "issuer for bonds outstanding at any time during the year? 7 bid bid principal organization and period post of the organization and access benefit transaction with a disqualified person in a prior year, and that the transaction aware that it organized on any of the organization prior Forms 990 er 90 EZ? If "Yes," complete Schedule J. Part I 8 bid the organization provides agreed on Part X. line 5 or 22, for receivables from or payables to any ourrant or formar offlice, director, fustee, key employee, creator or founder, substantial contribution, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule J. Part II 8 bid the organization provide a grant or other assistance to any current or formar offlice, director, fustee, key employee, creator or founder, substantial contribution or employee thereof, a grant selection committee member, or to a 39% controlled entity of cruder, substantial contribution or employee thereof, a grant selection committee member, or to a 39% controlled entity office, director, fustee, key employee, creator or founder, substantial contribution or employee thereof, a grant selection com	n have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the than that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete "go to line 25a no invest any proceeds of tax-exempt bonds beyond a temporary period exception? naintain an escrow account other than a refunding escrow at any time during the year to defease ands? 24d 24d 2501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit disqualified person during the year? If "Yes," complete Schedule L, Part I aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and an has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete schedule L, Part II are provide a grant or other assistance to any current or former officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled a may be persons? If "Yes," complete Schedule L, Part III. 27 X emprovide a grant or other assistance to any current or former officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled and prior of the following parties (see the Schedule L, Part III.) 28 X 29 X 29 X 29 X 29 X 29 X 29 X 20 X
Schedule J. 424 But 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 Docember 31, 2002? If "Yes," answer lines 24th through 24d and complete Schedule K. If "No." yo to line 25s. Did the organization mantain an earched schedule I have a refunding server with an outstanding at any time during the year to defease any tax-exempt bonds? I bill the organization amount and an earched schedule I have a refunding at any time during the year? I bill the organization and a sin in organizations. Did the organization anges in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule I. Part I bill to the organization are shall be organization organization organization organization o	n have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete "go to line 25a 24b In invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b In maintain an escrow account other than a refunding escrow at any time during the year to defease nds? 24c 24c 3501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit disqualified person during the year? If "Yes," complete Schedule L, Part I 25a X 25b X 2
Did the organization have a tax-exempt bond essue with an outstanding principal amount of more than \$100.000 as of the list day of the year, that was issued after December 31, 2002? If "Yes," "answer lines 2th through 24d and complete Schedule K. If "No.," go to fine 25a 2. b Did the organization invest any proceeds of tax-exempt bonds beyond a femporary period exception? 2db Cold the organization invest any proceeds of tax-exempt bonds beyond a femporary period exception; and the cold by the companization making an escrew account of their than a refunding escrow at any time during the year to defease any tax-exempt bonds? 2dc Did the organization invest as an "on behalf of" issuer for bonds outstanding at any time during the year? 2dd Old the organization amount of the companizations. Did the organization engage in an excess benefit transaction with a disqualified person in a prior year, and that the transaction was that it engaged in an access benefit transaction with a disqualified person in a prior year, and that the transaction seem to be one reported on any of the organization report any amount on Part X. line 5 or 22, for receivables from or payables to any current or former officer, director, fueles, asy employee, creator or founder, substantial contributor, or 36% controlled antity or family member of any of these persons? If "Yes," complete Schedule L. Part II and the organization provide agrant or other assistance to any current or former officer, director, fueles, agrant or other assistance to any current or former officer, director, fueles, agrant or other assistance to any current or former officer, director, fueles, agrant or other assistance to any current or former officer, director, fueles, exceptiones; or applicable filing thresholds, conditions, and exceptiones; a A current or former officer, director, fueles, expenditure, or any current or former officer, director, fueles, except, processes, and exceptiones; a A current or former officer, director, fueles, expenditure, and exceptiones;	n have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the than that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete "go to line 25a. In invest any proceeds of tax-exempt bonds beyond a temporary period exception? In maintain an escrow account other than a refunding escrow at any time during the year to defease ands? In act as an "on behalf of" issuer for bonds outstanding at any time during the year? S01(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit disqualified person during the year? If "Yes," complete Schedule L, Part I aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and in has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete schedule L, Part II are provide a grant or other assistance to any current or former officer, director, trustee, key employee, substantial contributor, or 35% and a party to a business transaction with one of the following parties (see the Schedule L, Part III. 27 X chedule L, Part IV. 28a X
lies to day of the yoar, that was issued after December 31, 2002? If "Yes," answer times 248 through 24d and complete Schedule K. If "No." go to fine 28a. b Did the organization mixest any proceeds of tex-exempt bonds beyond a temporary period exception? c Did the organization mixest any proceeds of tex-exempt bonds beyond a temporary period exception? d Did the organization maintain an escrew excount other than a refunding escrow at any time during the year 10 defease any tex-exempt bonds? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? d Bid the organization aware that it engaged is an excess benefit transaction with a disqualified person during the year? ("Yes," complete Schedule I., Part I b Is the organization aware that it engaged is an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete Schedule I., Part II D Aid the organization report any amount on Part X. line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or former off	that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete "go to line 25a In invest any proceeds of tax-exempt bonds beyond a temporary period exception? In maintain an escrow account other than a refunding escrow at any time during the year to defease ands? In act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit disqualified person during the year? If "Yes," complete Schedule L, Part I 25a 25b X 25b X 27b X 27c 27c 28c 29c 29c 29c 29c 29c 29c 29
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that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? # 'Yes,' complete Schedule L, Part I 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? # "Yes," complete Schedule L, Part II 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? # "Yes," complete Schedule L, Part III 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? # "Yes," complete Schedule L, Part IV. 28a X b A family member of any individual described in line 28a? # "Yes," complete Schedule L, Part IV. 28b X c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? # 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? # "Yes," complete Schedule M, Part II. 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? # "Yes," complete Schedule M, Part II. 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? # "Yes," complete Schedule N, Part II. 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? # "Yes," complete Schedule R, Part IV, ince 2 33	n has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete 25b X In report any amount on Part X, line 5 or 22, for receivables from or payables to any current irector, trustee, key employee, creator or founder, substantial contributor, or 35% If amily member of any of these persons? If "Yes," complete Schedule L, Part II In provide a grant or other assistance to any current or former officer, director, trustee, key employee, a substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28a X 28a X
Schedule L, Part I 26 Did the organization report any amount on Part X. line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If Yes, "complete Schedule L, Part II 28 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If Yes, "complete Schedule L, Part III 27 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? II "Yes," complete Schedule L, Part IV 28 b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b X 29b X 23% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 28b X 29b X 20b Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29b X 20b Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29b X 20b Did the organization legiculate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 Did the organization legiculate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II 31 Did the organization on 100% of an entity disregarded as separate from the organization under Regulations sections 301,77012 and 301,7701	an report any amount on Part X, line 5 or 22, for receivables from or payables to any current irector, trustee, key employee, creator or founder, substantial contributor, or 35% If amily member of any of these persons? If "Yes," complete Schedule L, Part II If a provide a grant or other assistance to any current or former officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled a employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III If a party to a business transaction with one of the following parties (see the Schedule L, Part IV, policable filling thresholds, conditions, and exceptions): If a provide a grant or other assistance to any current or former officer, director, trustee, key employee, a grant selection committee member, or to a 35% controlled and a party to a business transaction with one of the following parties (see the Schedule L, Part III) If a party to a business transaction with one of the following parties (see the Schedule L, Part IV, policable filling thresholds, conditions, and exceptions): If a provide a grant or other assistance to any current or former officer, director, trustee, key employee, a grant selection committee member, or to a 35% controlled and a party to a business transaction with one of the following parties (see the Schedule L, Part III) If a provide a grant or other assistance to any current or former officer, director, trustee, key employee, a grant selection committee member, or to a 35% controlled and a grant and a gr
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Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M 10 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 11 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II 12 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 13 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 13 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 15 Did the organization have a controlled entity within the meaning of section 512(b)(13)? 16 If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 16 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 17 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 V III and 19? 18 Note: All Form 990 filers are required to complete Schedule O 19 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 V III and 19? 19 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 10 Did the organization to conduct more than 5% of its activities th	
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	Of Forms W-2d included on line 1a. Lines -o- in not applicable
	! ९७
(gambling) winnings to prize winners?	gs to prize winners? 1c A Form 990 (2022)

DUTCHESS LAND CONSERVANCY, 14-1667526 Page 5 Form 990 (2022) Statements Regarding Other IRS Filings and Tax Compliance (continued) Part V Yes No 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return X 2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? X 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? За 3b b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a Х financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a b 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). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5b c If "Yes" to line 5a or 5b, did the organization file Form 8886-T? 5c 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit Х any contributions that were not tax deductible as charitable contributions? 6a b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts 6b were not tax deductible? Organizations that may receive deductible contributions under section 170(c). Х a 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 c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? 7¢ d If "Yes," indicate the number of Forms 8282 filed during the year 7е Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 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? Sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? 9a 9Ь Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? b Section 501(c)(7) organizations. Enter: 10 Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Section 501(c)(12) organizations. Enter: 11a Gross income from members or shareholders b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a b If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. 13a a Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand Х 14a 14a Did the organization receive any payments for indoor tanning services during the tax year? b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O 14b Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or 15 Х excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N. Х Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.

Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities

that would result in the imposition of an excise tax under section 4951, 4952 or 4953?

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If "Yes," complete Form 6069.

Form 990 (2022) 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 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sect	ion A. Governing Body and Management			<u> </u>
3601	ion A. doverning body and management		Yes	No
4	Enter the number of voting members of the governing body at the end of the tax year 29			
ia	If there are material differences in voting rights among members of the governing body, or if the governing	1	a, e e	
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 29			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1	•	
~	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
•	of officers, directors, trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		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		X
	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		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:			
	The governing body?	8a	X	
	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses 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	ļ <u> </u>	X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			İ
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	ļ
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	1. "		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
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?	1		
а	The organization's CEO, Executive Director, or top management official	15a	X	ļ
b	Other officers or key employees of the organization	15b	X	ļ
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a		1	٠,,
	taxable entity during the year?	16a	<u> </u>	X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b	<u> </u>	<u>.</u>
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)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, an	d finan	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	REBECCA THORNTON - 845-677-3002			
	4289 ROUTE 82, MILLBROOK, NY 12545			

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DUTCHESS LAND CONSERVANCY, INC.

Form 990 (2022)

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the instructions for the order in which to list the persons above.

Check this box if neither the organization (A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	not c	Posi	ition		one	Reportable	Reportable	Estimated
	hours per	box	unle: cer an	ss per	son i	s both	an	compensation	compensation	amount of
	week		T T		1	17443	<u> </u>	from the	from related organizations	other compensation
	(list any hours for	director						organization	(W-2/1099-MISC/	from the
	related	trustee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	Trust	nai tr		oyee	ompe		1099-NEC)	·	and related
	below	Individual t	nstitutional trustee	Je3	Кеу етрюуее	Highest compensated employee	Former			organizations
	line)	틷	<u> </u>	Officer	, Ke	Hig.	년	<u>-</u>		
(1) REBECCA THORNTON	40.00	-						450 045	_	42 025
PRESIDENT	1 22			Х			<u> </u>	179,815.	0.	13,837.
(2) REBECCA SEAMAN	4.00	١								
CHAIRMAN	2 00	Х		X	ļ		ļ	0.	0.	0.
(3) CHRISTOPHER L. MANN	3.00			,,						_
VICE CHAIRMAN	2 00	Х		X	_	<u> </u>	-	0.	0.	0.
(4) TIMOTHY MAYHEW	3.00	١.,							_	^
CO-VICE CHAIRMAN	2 00	X		X		├		0.	0.	0.
(5) OLIVIA VAN MELLE KAMP	3.00	.,		,,				1	0	^
SECRETARY	2 00	X		X		├	 -	0.	0.	0.
(6) NANCY N. HATHAWAY	3.00	٠,,		,,		1	ļ	_	,	^
TREASURER		Х		X	⊢			0.	0.	0.
(7) STEVEN BENARDETE	2.00	.,					İ	0.	0.	0.
DIRECTOR	1.00	X	ļ		 	.	\vdash		· · ·	U •
(8) NICK BIENSTOCK	1.00	x				ŀ		0.	0.	0.
OIRECTOR (9) TIMOTHY M. BONTECOU	2.00	^	├		┢	-	├	V •	0.	0.
(9) TIMOTHY M. BONTECOU DIRECTOR	2.00	X						0.	0.	0.
(10) CANDACE BROWNING-PLATT	1.00	^	├			 	 	· ·	0.	V •
DIRECTOR	1.00	X						0.	0.	0.
(11) HANNAH BUCHAN	1.00	1	╁		-	┼	\vdash			<u> </u>
DIRECTOR	1.00	x						0.	0.	0.
(12) SARAH LYONS CHASE	1.00	11					┢	0.		
DIRECTOR		x						0.	0.	0.
(13) PETER COON	1.00		_	 	 	_				
DIRECTOR		X	İ				1	0.	0.	0.
(14) WOLCOTT DUNHAM	1.00	1==	 	 	ļ	-				
DIRECTOR		X						0.	0.	0.
(15) LESLIE FARHANGI	2.00	† ·	1							
DIRECTOR		x			-	1	-	0.	0.	0.
(16) PATRICIA FARMAN-FARMAIAN	1.00					1	Π			
DIRECTOR		Х	}					0.	0.	0.
(17) THOMAS FLEXNER	1.00	T				Ī	Γ			
DIRECTOR		Х						0.	0.	0.

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
(A)	(B)			(C	 -			(D)	(E)	Τ	(F)		
Name and title	Average	١	Position (do not check more than one					Reportable	Reportable		Estimat	ted	
	hours per	box	, unles	s per	son i	s both	ı an	compensation	compensation		amount	t of	
	week	offi	cer an	d a di	recto	r/trus	tee)	from	from related		othe	r	
	(list any	ctor						the	organizations		compens	ation	
	hours for	rdire				pa		organization	(W·2/1099-MISC/		from t	ne	
	related	stee	ruste			eusa		(W-2/1099-MISC/	1099-NEC)		organiza		
	organizations	al tru	nai t		loyee	COM Se		1099-NEC)			and rela		
	below line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former				organiza	ilons	
(18) THOMAS W. KEESEE	1.00						l		0			^	
DIRECTOR		Х					_	0.	0.	4		<u> </u>	
(19) FERNANDA KELLOGG	1.00								_			_	
DIRECTOR		Х	ļ			<u> </u>	ļ	0.	0.	4		0.	
(20) BRAD KENDALL	2.00						ļ		_				
DIRECTOR		Х						0.	0.	4		0.	
(21) THOMAS NEWBERRY	1.00			ı			İ						
DIRECTOR		Х						0.	0.		···	0.	
(22) TERRY REGAN	1.00			l									
DIRECTOR		Х						0.	0.			0.	
(23) ERIC W. ROBERTS	1.00												
DIRECTOR		Х						0.	0.	.		0.	
(24) DAVID R. STACK	1.00									Т			
DIRECTOR		X						0.	0.	.		0.	
(25) PETER TCHEREPNINE	1.00								-	t			
DIRECTOR		Х				!		0.	0.			0.	
(26) OAKLEIGH THORNE	3.00									+	-		
CO-VICE CHAIRMAN		х				1		0.	0.			0.	
Alt. O. brand	<u> </u>	<u>. </u>	L		L	L	<u></u>	179,815.	0.		13,8		
c Total from continuation sheets to Part VI								0.	0.		0.		
								179,815.	0.		13,837.		
d Total (add lines 1b and 1c) Total number of individuals (including but n								•		<u>' _</u>		· · · ·	
	ot imited to th	ose	iiste	u au	ove) WII	o re	sceived more than \$100,	ooo or reportable			1	
compensation from the organization								•			Yes	No	
O Distance in the list of the second	attua akan akan ak			اسمد			سداسا			Г	103	+	
3 Did the organization list any former officer,									oyee on	ı		х	
line 1a? If "Yes," complete Schedule J for si										\vdash	3	+^-	
4 For any individual listed on line 1a, is the su												1	
and related organizations greater than \$150										┝	4 X	+	
5 Did any person listed on line 1a receive or a					-			_				3,5	
rendered to the organization? If "Yes." com	plete Schedul	9 <i>J f</i>	or su	ich p	ers	on .				Т.	5	<u> </u>	
Section B. Independent Contractors													
Complete this table for your five highest co.										atio	on from		
the organization. Report compensation for	the calendar ye	ear e	endir	ig w	ith c	or wi	<u>thin</u>	the organization's tax y	ear.				
(A)	1.1			_				(B)		Ω-	(C)		
Name and business	address	N	INC	<u>. </u>			\dashv	Description of s	ervices	<u> </u>	mpensati	<u></u>	
	=-												
2 Total number of independent contractors (ii	ncluding but n	ot lir	nited	to t	thos	se lis	ted	above) who received me	ore than				
· · · · · · · · · · · · · · · · · · ·					-	`			1				

orm 990 DUTCHESS								NC.	14-166	/540
Part VII Section A. Officers, Directors, Tru	istees, Key En	nplo	yee	s, ar	nd H	lighe	est (Compensated Employe	es (continued)	
(A) Name and title	(B) Average hours	(cl		Pos all t			ly)	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
27) LISELOTTE VINCE TRECTOR	2.00	x						0.	0.	C
28) KATHLEEN C. WEATHERS IRECTOR	1.00	х						0.	0.	(
29) FRED WHITRIDGE JR.	2.00									
IRECTOR 30) ROSS WILLIAMS	2.00	Х						0.	0.	(
IRECTOR	2.00	х						0.	0.	(
			-				_			
		$\frac{1}{2}$								
			<u> </u>							
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									. 1281-071	
			-		_					
	<u> </u>	1	ــــــــــــــــــــــــــــــــــــــ	J		1				ļ

			Check if Schedule O c	conta	ains a i	response	or note to any lin	e in this Part VIII			
								(A)	(B)	(C)	(D)
								Total revenue	Related or exempt	Unrelated	Revenue excluded
									function revenue	business revenue	from tax under sections 512 - 514
5 5		1 2	Federated campaigns			1a					
Contributions, Gifts, Grants and Other Similar Amounts	,					1b		•			-
ច ខ្ព						10	447,794.				
£.₹			Fundraising events			1d	***,,,,,,	-			
2 3							43,639.				
Sig		e	Government grants (contri		,	1e	43,033.				
후		f	All other contributions, gifts,				11 222 264	'			
흔뒴			similar amounts not included			1f	11,232,364.				
t d		g	Noncash contributions included in I	lines 1	a-1f	1g \$	8,644,396.	11 502 505			
ပြ		h	Total. Add lines 1a-1f	<u></u>				11,723,797.			
							Business Code				
8	2	2 a									
2 9		b									
am Ser evenue		С									
ĕã		d									
Program Service Revenue		е									
<u>-</u>		f	All other program service	revei	nue						
		g	Total. Add lines 2a-2f								
	3	3	Investment income (includ	ling o	divider	nds, inter	est, and				
			other similar amounts)					184,765.			184,765.
	4	1	Income from investment of	f tax	-exem	pt bond p	oroceeds				
	5	5	Royalties	. <u></u>							
					(i)	Real	(ii) Personal				
	6	3 a	Gross rents	6a							
		ь	Less: rental expenses	6b							
		С	Rental income or (loss)	6c] .		-	
			Net rental income or (loss)								
	7		Gross amount from sales of		(i) S	ecurities	(ii) Other	-			
	-		assets other than inventory	7a	1	.00,000					
i		ь	Less: cost or other basis						4		
ē			and sales expenses	7b	1,4	23,838.	.				
Revenue		c		7c		23,838.			lagi na la la gasa		
ě			Net gain or (loss)					-1,323,838.	-1323838.		<u> </u>
her	9		Gross income from fundraisir								B 157 - 2 17
ŧ	•	,	including \$								
~			contributions reported on								
			Part IV, line 18		,		39,067.				
		h									
			• •		rainina		07,313,	-48 506.			-48,506.
	,		Net income or (loss) from Gross income from gamin		_		1	20,000.			40,500.
	ŧ	∍ a	-	-							
		4-	Part IV, line 19					1		* :	
							<u> </u>			.:	
			Net income or (loss) from	-	-					· .	
	10	Ja	Gross sales of inventory, I						*		
			and allowances								
			•				· · · · · · · · · · · · · · · · · · ·				
	_	<u>c</u>	Net income or (loss) from	sales	of inv	entory ,					
က္ည							Business Code				
Miscellaneous Revenue	1.	1 a	MISCELLANEOUS				561499	9,314.	9,314.		
lant		b									
Sell Sell		С									
ž.		d	All other revenue								, , , , , , , , , , , , , , , , , , ,
_		е	Total. Add lines 11a-11d					9,314.			
	12	2	Total revenue. See instruction	ns				10,545,532.	-1314524.	0.	136,259.

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (C) Management and (A) Total expenses (**D)** Fundraising Do not include amounts reported on lines 6b. Program service 7b, 8b, 9b, and 10b of Part VIII, expenses general expenses expenses Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 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 Benefits paid to or for members Compensation of current officers, directors, 179,815 trustees, and key employees 154,641. 12,587. 12,587. Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages 628,599. 824,155. 139.164. 56,392. 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 27,554. 22,767. 2,708. 2,079. 92,697. 84,693. 4,937. 3,067. Other employee benefits 9 73,440. 57,175. 11,126. 5,139. Payroll taxes 10 Fees for services (nonemployees): a Management 128,961. 109,617. 19,344. Legal 19,835. 19,835. Accounting Lobbying Professional fundraising services. See Part IV, line 17 33,568. 33,568. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.) 156,757. 145,384. 10,953. 420. 9,051. 9,051. Advertising and promotion 12 9,009. 16,289. 6,021. 1,259. 13 Office expenses 16,931. 24,556. 6,085. 1,540. 14 Information technology Royalties 15 62,533. 35,712. 21,575. 5,246. Occupancy 16 12,960. 7,306. 3.997. 1,657. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 9,643. 9,215. 256. 172. Conferences, conventions, and meetings 19 20 Payments to affiliates 21 16,155. 26,481. 7,944. 2,382. Depreciation, depletion, and amortization 22 17,777. 65,557. 46,589. 1,191. 23 Other expenses, Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.) PURCHASE OF DEVELOPMENT 334,715. 334,715. EDUCATION PROGRAMS 74,513. 74,263. 250. 42,875. 41,104. DUES AND PUBLICATIONS 1,401. 370. 20,942. d EQUIPMENT RENTAL, REPAI 39,128. 16,211. 1,975. 83,524. 48,368. 17,347. 17,809. e All other expenses 357,567. 2,338,607. 1,858,454. 122,586. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash · non-interest-bearing 1 1,315,776. 1,054,317. Savings and temporary cash investments 2 2 87,947. 72,35<u>4.</u> 3 Pledges and grants receivable, net 3 3,792. 5,528. Accounts receivable, net 4 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% 5 controlled entity or family member of any of these persons Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) 6 Notes and loans receivable, net 7 7 Inventories for sale or use 8 29,197. 24,046. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 8,505,236. 10a basis. Complete Part VI of Schedule D 527,592. 84,822. 7,977,644. Less: accumulated depreciation 10b 10c 15,435,217. 14,002,928. 11 11 Investments · publicly traded securities Investments - other securities. See Part IV, line 11 12 12 13 Investments - program-related. See Part IV, line 11 13 14 14 Intangible assets 10,605. 718,250. 15 Other assets. See Part IV, line 11 15 16,962,205. 23,860,218. 16 16 Total assets. Add lines 1 through 15 (must equal line 33) 88,391. 48,168. Accounts payable and accrued expenses 17 17 18 18 Grants payable _____ 51,500. 19 55,500. 19 Deferred revenue Tax-exempt bond liabilities 20 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to any current or former officer, director, 22 trustee, key employee, creator or founder, substantial contributor, or 35% 22 controlled entity or family member of any of these persons 2,995. 23 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 102,663. 26 143,891. Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 12,178,975. 13,442,461. 27 Net assets without donor restrictions 27 4,680,567. 10,273,866. Net assets with donor restrictions 28 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 30 Paid in or capital surplus, or land, building, or equipment fund 30 31 Retained earnings, endowment, accumulated income, or other funds 31 23,716,327. 16,859,542. Total net assets or fund balances 32 32 16,962,205. 23,860,218. 33 Total liabilities and net assets/fund balances

Form 990 (2022)

orm	990 (2022) DUTCHESS LAND CONSERVANCY, INC.	14-1	667526	Page	e 12
	rt XI Reconciliation of Net Assets			_	
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>		[
1	Total revenue (must equal Part VIII, column (A), line 12)	_1	10,545		
2	Total expenses (must equal Part IX, column (A), line 25)	_2	2,338		
3	Revenue less expenses. Subtract line 2 from line 1	3	8,206		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	16,859		
5	Net unrealized gains (losses) on investments	_ 5	-1,350	0,14	<u>. 0 • </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,		00 54		
	column (B))	10	23,716	, 32	<u> </u>
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		·····		<u> </u>
			<u> </u>	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			.	
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	O.		1	v
2a			2a		<u> </u>
	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			72	
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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	· · · · · · · · · · · · · · · · · · ·			х	
	review, or compilation of its financial statements and selection of an independent accountant?		2c		7.7
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	eaule O.		100	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				х
_	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi		3b		
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b Form	990 <i>«</i>	2022
			rorm	J J J J	2022)

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

DUTCHESS LAND CONSERVANCY,

Employer identification number

14-1667526 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 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 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). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. ____ Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having 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 II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) is the organization listed in your governing document? (v) Amount of monetary (vi) Amount of other (i) Name of supported (ii) EiN (iii) Type of organization (described on lines 1.10 support (see instructions) support (see instructions) organization Yes Nο above (see instructions))

Schedule A (Form 990) 2022 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 check fails to qualify under the tes						
Section A. Public Support		·				
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not		1				
include any "unusual grants.")						
2 Tax revenues levied for the organ-						
ization's benefit and either paid to					1	
or expended on its behalf						
3 The value of services or facilities						
furnished by a governmental unit to						
the organization without charge			<u> </u>			
4 Total. Add lines 1 through 3		<u> </u>		<u> </u>		
5 The portion of total contributions						
by each person (other than a					1	
governmental unit or publicly						
supported organization) included				·		
on line 1 that exceeds 2% of the						
amount shown on line 11,						
column (f)			-			
6 Public support. Subtract line 5 from line 4 Section B. Total Support		l			L	
	T	1		T	T	
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4			<u> </u>		<u> </u>	
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						
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		L	<u> </u>	<u> </u>	<u> </u>	
12 Gross receipts from related activities					12	
13 First 5 years. If the Form 990 is for			•			
organization, check this box and sta Section C. Computation of Pub						
					1	
14 Public support percentage for 2022					14	%
15 Public support percentage from 202					15	%
16a 33 1/3% support test - 2022. If the	•		-		-	
stop here. The organization qualifie		-				
b 33 1/3% support test - 2021. If the	=					
and stop here. The organization qu						
17a 10% -facts-and-circumstances te	-					
and if the organization meets the fac					vi now the organiza	ition
meets the facts-and-circumstances	•	•	,	•		DD (
b 10% -facts-and-circumstances te	_					∪‰ or
more, and if the organization meets						ſ 1
organization meets the facts-and-cir	cumstances test. Th	ie organization qu	lairies as a publicly	supported organiz	zation	

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

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.)

Se	etion A. Public Support	siow, please comp	lete r art II.)				
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and		AT LEST STATE OF THE STATE OF T		(4)	(0)	(1)
-	membership fees received. (Do not						
	include any "unusual grants.")	2417634.	4880168.	2091899.	3967143.	11718797.	25075641.
2	Gross receipts from admissions,			20320371			
_	merchandise sold or services per-						
	formed, or facilities furnished in						
	any activity that is related to the	97,070.	95,025.	225.	41,885.	39,067.	273,272.
2	organization's tax-exempt purpose	21,010.	73,023.		41,003.	39,007.	213,214.
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513		-				
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						ļ
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5	2514704.	4975193.	2092124.	4009028.	<u> 11757864.</u>	25348913.
7 a	Amounts included on lines 1, 2, and						
	3 received from disqualified persons	239,892.	233,459.	236,614.	371,295.	394,531.	1475791.
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						0.
C	Add lines 7a and 7b	239,892.	233,459.	236,614.	371,295.	394,531.	1475791.
	Public support. (Subtract line 7c from line 6.)						23873122.
Se	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9	Amounts from line 6	2514704.	4975193.	2092124.	4009028.	11757864.	25348913.
10a	Gross income from interest,						
	dividends, payments received on securities loans, rents, royalties,						
	and income from similar sources	146,264	166,898.	137,003.	168,741.	184,765.	803,671.
k	Unrelated business taxable income		·				
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b	146,264.	166,898.	137.003.	168,741.	184,765.	803,671.
	Net income from unrelated business						
	activities not included on line 10b,						
	whether or not the business is regularly carried on	-126,566.	-136 289				262,855.
12	Other income. Do not include gain	220,3001	130,203.				202,033.
-	or loss from the sale of capital	8,030.	9,429.	14,407.	11,262.	9,314.	52,442.
40	assets (Explain in Part VI.)	2542432.	5015231.	2243534.		11951943.	
	Total support. (Add lines 9, 10c, 11, and 12.)	······					
14	First 5 years. If the Form 990 is for the	•	, , ,			· // · ·	on, []
Sa	check this box and stop here ction C. Computation of Publi	c Support Per					
				-1 (5)		Tap T	92.02 %
	Public support percentage for 2022 (I		•			15	~ ~ ~ .
	Public support percentage from 2021 ction D. Computation of Invest					16	89.64 %
				10 (6)		T - T	3.10 %
	Investment income percentage for 20			ne 13, column (t))		17	
	Investment income percentage from					18	
19	a 33 1/3% support tests - 2022. If the	-					
_	more than 33 1/3%, check this box ar				•		
ŀ	33 1/3% support tests - 2021. If the						ind
	line 18 is not more than 33 1/3%, che					=	
20	Private foundation. If the organization	n did not check a l	box on line 14, 19a	a, or 19b, check th	is box and see ins	tructions	

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of 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.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer 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)(B) purposes.
- 5a 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?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, foan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on 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 on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 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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Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		<u> </u>
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			ĺ
_	detail in Part VI.	11c	<u> </u>	Ĺ
Sec	tion B. Type I Supporting Organizations		l	г
			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,			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			: .
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the	1		
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported	'	 	
2	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
		. !		ĺ
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		İ
Sec	tion C. Type II Supporting Organizations	<u> </u>		
		***	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			Ì
	the supported organization(s)	1 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	1		
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on 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			
Sec	supported organizations played in this regard. Ition E. Type III Functionally Integrated Supporting Organizations] 3		Ш
		1		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions The organization satisfied the Activities Test. Complete line 2 below.) -		
a b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	etruction	ne)	
2	Activities Test. Answer lines 2a and 2b below.	Struction	Yes	No
a				
-	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			ļ.
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			'
	that these activities constituted substantially all of its activities.	2a	<u> </u>	
b	Did the activities described on 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," explain in	ľ	1	
	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	ļ	↓
3	Parent of Supported Organizations. Answer lines 3a and 3b below.	[:.		
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	1		
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a	<u> </u>	├ ─
b				1
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		<u> </u>

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin	g Orgar	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	g trust on	Nov. 20, 1970 (explain in Pa	art VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	complete	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
_3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		. . .
4	Cash deemed held for exempt use. Enter 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			Current 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			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional	ly integrat	ed Type III supporting organi	zation (see
	instructions).			

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

e Excess from 2022

Schedule A

Payments from Disqualified Persons Included on Part III, Line 7a

2022

** Do Not File **

*** Not Open to Public Inspection ***

Payer's Name	2018 Amount	2019 Amount	2020 Amount	2021 Amount	2022 Amount
BOARD MEMBERS	239,892.	0.	0.	0.	0.
JACK AND IRENE					
BANNING	0.	10,600.	13,000.	10,000.	0.
STEVEN AND JUDY					
BENARDETE	0.	10,000.	15,500.	12,575.	15,150.
TIM AND FELICITY				,	
BONTECOU	0.	1,000.	1,000.	600.	600.
HANNAH F. AND DUKE					
BUCHAN	0.	10,000.	11,000.	10,000.	10,075.
ROSEMARY LYONS AND					
BARRY CHASE	0.	1,000.	1,000.	0.	0.
DARRI CHASE		1,000.	-,000.		
JOAN AND DICK DUNHAM	0.	21,829.	0.	15,000.	21,000.
ELIZA DYSON AND JOEL		<u> </u>		13,000.	21,000.
	0.	680.	1,000.	0.	0.
LEVANGIA	<u> </u>	000.	1,000.	0.	<u> </u>
LESLIE FARHANGI AND		1 200	2 25	1 500	1 250
JOHN TUKE	0.	1,300.	2,250.	1,500.	1,350.
THOMAS AND DEBAN		44 500	40 500	00 500	45 000
FLEXNER	0.	11,600.	13,500.	22,500.	15,000.
NANCY HATHAWAY	0.	28,300.	28,500.	31,000.	30,000.
ANGELA AND WOODY					
KEESEE	0.	10,000.	12,500.	12,800.	10,000.
FERNANDA KELLOGG AND					
KIRK HENCKELS	0.	11,400.	14,513.	13,100.	13,100.
BRADFORD KENDALL	0.	2,000.	2,000.	1,500.	1,500.
CHRISTOPHER AND		•			
CLAIRE MANN	0.	11,900.	12,000.	15,575.	15,913.
TIM AND ELIZABETH					
MAYHEW	0.	10,900.	12,500.	14,900.	17,500.
THOMAS AND CONNIE		20,3001	12,3001		
NEWBERRY	0.	11,600.	12,500.	12,500.	15,069.
NEWBERKI		11,000.	12,500.	12,300.	13,003.
	0.	10,000.	10,000.	12,800.	15,600.
CANDACE PLATT	<u> </u>	10,000.	10,000.	12,000.	13,000.
KATHERINE AND JOHN	0	12 250	14 000	12 000	12 500
REGAN	0.	13,250.	14,000.	13,000.	13,500.
L		10 500	10 500	11 550	40 200
ERIC ROBERTS	0.	12,500.	12,500.	11,550.	10,300.
ERIC AND DEDE			_	•	^
ROSENFELD	0.	500.	0.	0.	0.
REBECCA AND BRYANT					<u> </u>
SEAMAN, III	0.	2,850.	4,000.	5,000.	5,550.
DAVID AND SARAH					
STACK	0.	12,600.	12,575.	15,700.	15,000.
DAVE AND LOUISE					
TETOR	0.	250.	0.	0.	0.
Total to Schedule A,					
Part III, Line 7a					

Schedule A

Payments from Disqualified Persons Included on Part III, Line 7a

2022

** Do Not File **

*** Not Open to Public Inspection ***

Payer's Name	2018 Amount	2019 Amount	2020 Amount	2021 Amount	2022 Amount
OLIVIA VAN MELLE KAMP	0.	13,300.	16,000.	17,575.	15,075
KATHLEEN WEATHERS					
AND MICHELE FERRARO	0.	700.	500.	850.	1,100
FRED AND TRINA					
WHITRIDGE	0.	10,800.	11,201.	15,000.	12,950.
ROSS AND DI WILLIAMS	0.	2,100.	2,500.	3,100.	3,100
REBECCA THORNTON	0.	500.	575.	550.	550
PETER AND ANNA			_		
TCHEREPNINE	0.	0.	0.	5,040.	77,166.
OAKLEIGH AND					
JAQUELINE THORNE	0.	0.	0.	17,580.	17,580.
ROBIN AND LISELOTTE					
VINCE	0.	0.	0.	80,000.	10,400
NICHOLAS AND MOIRA					
BIENSTOCK	0.	0.	0.	0.	10,000
SARAH CHASE	0.	0.	0.	0.	103
PETER AND ALICE COON	0.	0.	0.	0.	300
ALEX AND PATRICIA		-			
FARMAN-FARMAIAN	0.	0.	0.	0.	20,000
					
Total to Schedule A, Part III, Line 7a	239,892.	233,459.	236,614.	371,295.	394,531

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization		Employer Identification number
	OUTCHESS LAND CONSERVANCY, INC.	14-1667526
Organization type (check	one):	
Filers of:	Section:	
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
General Rule X For an organizat	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions total	aling \$5,000 or more (in money or
Special Rules	ny one contributor. Complete Parts I and II. See instructions for determining a contribu	itor s total contributions.
sections 509(a)(contributor, duri	ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supply and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b ang the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount or EZ, line 1. Complete Parts I and II.	, and that received from any one
contributor, duri	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fr ng the year, total contributions of more than \$1,000 exclusively for religious, charitable ational purposes, or for the prevention of cruelty to children or animals. Complete Parts (b) instead of the contributor name and address), II, and III.	e, scientific,
year, contributio is checked, ente purpose. Don't o	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from exclusively for religious, charitable, etc., purposes, but no such contributions totaled in here the total contributions that were received during the year for an exclusively religion to the parts unless the General Rule applies to this organization becausable, etc., contributions totaling \$5,000 or more during the year	ed more than \$1,000. If this box gious, charitable, etc., se it received <i>nonexclusively</i>
answer "No" on Part IV, li	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule ne 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990 ling requirements of Schedule B (Form 990).	
LHA For Paperwork Redu	ction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.	Schedule B (Form 990) (2022)

Employer identification number

DUTCHESS LAND CONSERVANCY, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$10,300.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$5,309.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5		\$15,150.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6_		\$18,300.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

DUTCHESS LAND CONSERVANCY, INC

DOICHI	ESS LAND CONSERVANCI, INC.	14	-100/320
Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ 10,075.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$ 25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$ <u>10,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

DUTCHESS LAND CONSERVANCY, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additi	onal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13		\$41,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14		<u>10,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15		\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
17			Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18		s5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

DUTCHESS LAND CONSERVANCY, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional additional actions and the contributors of Part I if additional actions are contributors.	tional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20	Name, address, and Eli 177	\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
21		\$\$	Person X Payroli Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
22		\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
23		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
24		\$ 5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

DUTCHESS LAND CONSERVANCY, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	l space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25		\$5,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
26		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
27		\$ <u>13,400.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
28		\$ <u>10,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
29		\$ <u>13,100.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
30		\$ <u>13,100.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

DUTCHESS LAND CONSERVANCY, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if addit	ional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
32		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
33			Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
34		\$\$,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
35			Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
36			Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

DUTCHESS LAND CONSERVANCY, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37		\$ 15,600.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
38		\$5,069.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
39		\$ <u>13,500.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
40		\$10,300.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
41		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
42		\$10,600 .	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

DUTCHESS LAND CONSERVANCY, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
43		\$ 25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
44		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
45		\$15,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
46		\$10,600.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
47		\$ 17,580.	Person X Payroll Noncash (Complete Part II for noncash contributions.)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
48		\$10,000 .	Person X Payroll Noncash (Complete Part II for noncash contributions.)	

Employer identification number

DUTCHESS LAND CONSERVANCY, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
49		\$1,300.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
50		\$16,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
51		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
52		\$ <u>15,075.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
53		\$ 10,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution
54		\$\$10,400.	Person X Payroll Noncash (Complete Part If for noncash contributions.)

Employer identification number

DUTCHESS LAND CONSERVANCY, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part Lif additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
55		\$5,150.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
56		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
57		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
58		\$ <u>12,950.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
59		\$15,000 .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
60		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

DUTCHESS LAND CONSERVANCY, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
61		\$3,600.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
62		\$33,639.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
63		\$300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZłP + 4	(c) Total contributions	(d) Type of contribution
64		\$35,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
65		\$ 10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
66		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

DUTCHESS LAND CONSERVANCY, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
67		\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
68		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
69		- - - * 10,150.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
70		\$\$,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
71		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
72		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

DUTCHESS LAND CONSERVANCY, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	Il space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
73		\$ 1,080,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) <u>N</u> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
74		\$10,300.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
75		\$12,638.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
76		\$ <u>13,500</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(с) Total contributions	(d) Type of contribution
77		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
78		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

DUTCHESS LAND CONSERVANCY, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
79		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
80		\$10,400.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
81		\$2,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
82		\$10,600.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
83		\$10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
84		\$ 50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

DUTCHESS LAND CONSERVANCY, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
85		\$ 5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
86		\$\$ <u>6,225.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
87		\$ <u>25,600.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
88		\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
89		\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
90		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

DUTCHESS LAND CONSERVANCY, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additiona	ıl space is needed.	
(a) <u>N</u> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
91		\$25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
92		\$10,755.	Person X Payroll X Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
93		\$	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
94		\$7,518.	Person X Payroll X Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
95		\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
96		\$\$.	Person X Payroll Noncash (Complete Part II for noncash contributions.)

Employer identification number

DUTCHESS LAND CONSERVANCY, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if ac	dditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
97		\$5,560.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
98		\$\$.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
99		\$5,600.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
100		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
101		\$S,069.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
102	20	\$\$,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.) Schedule B (Form 990) (2022)

Name of organization

Employer identification number

DUTCHESS LAND CONSERVANCY, INC.

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	I space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
103		\$6,800.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
104		\$\$.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

DUTCHESS LAND CONSERVANCY, INC.

(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
Part I	100 (11)(20)(21) (7)	(ese mendensis,	
92	100 SH MORGAN STANELY		
<u> </u>			
		\$ <u>10,755.</u>	02/23/22
			00/20/22
(a)		(0)	
No.	(b)	(c) FMV (or estimate)	(d)
from	Description of noncash property given	(See instructions.)	Date received
Part I	100 00 100		
93	120 SH MRK		
			
		\$10,383.	10/18/22
			10/10/44
(a)		-	
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
Part I		(ooc instructions.)	<u>,</u>
			
		_{\$}	
(a)			
No.	(b)	(c) FMV (or estimate)	(d)
from	Description of noncash property given	(See instructions.)	Date received
Part I			
		 \$	
(a)			
No.	(b)	(c) FMV (or estimate)	(d)
from	Description of noncash property given	(See instructions.)	Date received
Part I		(
		*	
(a)			
No.	(b)	(c)	(d)
from	Description of noncash property given	FMV (or estimate) (See instructions.)	Date received
Part I		(See instructions.)	
		\$.	

Name of o	organization		Employer identification number									
DUTCH	ESS LAND CONSERVANCY, IN	NC.	14-1667526									
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a)	ons to organizations described in sectifications (e) and the following line entry charitable, etc., contributions of \$1,000 or le	tion 501(c)(7), (8), or (10) that total more than \$1,000 for the year									
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held									
		(e) Transfer of gift										
-	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee									
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held									
	(e) Transfer of gift											
	Transferee's name, address, ar		Relationship of transferor to transferee									
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held									
-	(e) Transfer of gift											
	Transferee's name, address, an	nd ZIP + 4	Relationship of transferor to transferee									
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held									
	(e) Transfer of gift											
	Transferee's name, address, an	nd ZIP + 4	Relationship of transferor to transferee									

SCHEDULE C

Department of the Treasury

Internat Revenue Service

(Form 990)

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

Political Campaign and Lobbying Activities

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.

OMB No. 1545-0047

Open to Public Inspection

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

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

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

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

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

•	Section 501(c)(4), (5), or (6) organization	tions: Complete Part III.			
Nan	ne of organization			Empl	loyer identification number
	DUTCHES	S LAND CONSERVAN	CY, INC.		14-1667526
Pa	art I-A Complete if the org	janization is exempt und	er section 501(c)	or is a section 527 or	ganization.
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures		in Part IV. \$	
Pa	art I-B Complete if the org	anization is exempt und	er section 501(c)(3).	
2 3 4a	a Was a correction made?	incurred by organization manage n 4955 tax, did it file Form 4720	ers under section 4955 for this year?	\$	Yes No
	o If "Yes," describe in Part IV. art I-C Complete if the org	anization is exempt und	or coation 501/a)	event postion E01/e	\/2\
2	Enter the amount directly expended Enter the amount of the filing organ exempt function activities Total exempt function expenditures line 17b Did the filing organization file Form Enter the names, addresses and en made payments. For each organization received that were presented to the filing organization file form.	ization's funds contributed to other. Add lines 1 and 2. Enter here a 1120-POL for this year? Inployer identification number (Elftition listed, enter the amount paid	ner organizations for se 	sction 527 \$ \$	Yes No the filing organization amount of political
	political action committee (PAC). If				e segregated fund or a
	(a) Name	(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
-					
			· ·		

Schedule C (Form 990) 2022 Part II-A Complete if the org	DUTCHI anizatio	ESS LAI	ND CONSERVAN	ICY, INC. 501(c)(3) and file	14-1 d Form 5768 (ele	667526 Page 2 ction under
section 501(h)).	,			(-)(-)	•	
A Check if the filing organiza	tion belong	s to an affil	iated group (and list in	Part IV each affiliated	group member's name	, address, EIN,
expenses, and sha			•			
B Check if the filing organiza	ation check	ed box A an	d "limited control" pro	visions apply.		
Lim (The term "expen	(a) Filing organization's totals	(b) Affiliated group totals				
1a Total lobbying expenditures to infl	uence publ	ic oninion (c	rassroots lobbying)			
b Total lobbying expenditures to infl	•					
c Total lobbying expenditures (add I	-		• • • • • • • • • • • • • • • • • • • •			
d Other exempt purpose expenditur						
e Total exempt purpose expenditure						
f Lobbying nontaxable amount. Ent						
If the amount on line 1e, column (a)			bying nontaxable amo			
Not over \$500,000	. (2) 10.		he amount on line 1e.			
Over \$500,000 but not over \$1,00	0.000		0 plus 15% of the exce	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5			0 plus 10% of the exce			
Over \$1,500,000 but not over \$1.7			0 plus 5% of the exces	·		
Over \$17,000,000						
		\$1,000,				
g Grassroots nontaxable amount (er	nter 25% of	line 1f)				
h Subtract line 1g from line 1a. If ze						
i Subtract line 1f from line 1c. If zer						
j If there is an amount other than ze						
reporting section 4911 tax for this			.,,,			Yes No
(Some organizations		4-Year Ave	eraging Period Under	Section 501(h)	of the five columns be	dow.
			ate instructions for lin			
	Lobi	ying Expe	nditures During 4-Yea	r Averaging Period		<u> </u>
Calendar year (or fiscal year beginning in)	(a)	2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount						
b Lobbying ceiling amount						
(150% of line 2a, column(e))				1 4		
				· · · · · · · · · · · · · · · · · · ·		
c Total lobbying expenditures						
d Grassroots nontaxable amount						
e Grassroots celling amount						
(150% of line 2d, column (e))						
	T					
f Grassroots lobbying expenditures	<u>: </u>					

Schedule C (Form 990) 2022

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)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)		(b)	
of the lobbying activity.	Yes	No	Amount	
During the year, did the filing organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:	x			
a Volunteers?	^	X		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?c Media advertisements?		X		
d Mailings to members, legislators, or the public?		X		
e Publications, or published or broadcast statements?		X		
f Grants to other organizations for lobbying purposes?		Х		
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
i Other activities?	X	,		
j Total. Add lines 1c through 1i			0.	
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
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	. 1			
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	n 501(c)(5), or sec	tion	
501(c)(6).	•		V No	
			Yes No	
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 agree to carry over lobbying and political campaign activity expenditures from the	e prior year?	3		
Part III-B Complete if the organization is exempt under section 501(c)(4), section				
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'answered "Yes."	NO" UH	(b) Part i	II-A, IINE 3, IS	
Dues, assessments and similar amounts from members		1		
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	al			
expenses for which the section 527(f) tax was paid).				
a Current year				
b Carryover from last year		2b		
c Total	• • • • • • • • • • • • • • • • • • • •	. <u>2c</u>		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		. 3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exceeds	ess	1.		
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and pe	olitical	· ·		
expenditures next year?		4		
5 Taxable amount of lobbying and political expenditures. See instructions		5		
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 (affiliated group	list); Part II-	A, lines 1 a	nd 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 ACTI	VITIES	CONS	ISTING	
OF MAILINGS TO LEGISLATORS, ATTENDANCE AT LAND TRUST A	LLIANC	E/AME	RICAN	
EXPANDAND MORIOM/POTENDS OF NEW YORK ENGINEERS (ORGANITS	מסי חים	אירו עיפונ	ve	
FARMLAND TRUST/FRIENDS OF NEW YORK ENVIRONMENT/ORGANIZ	הט הסב	DI DA	ימו	
MERUTNOC NIMI DEDDECENONATURO NO EDUCADE MURI ADOUM DU	E ለውጣን	እየተ <i>ማ</i> አጠ	TON'S	
MEETINGS WITH REPRESENTATIVES TO EDUCATE THEM ABOUT TH	E OKGA	тит СМ.Т.	TON D	
WORK, AND PARTICIPATION IN PRESS CONFERENCES CONCERNIN	G STAT	E GRA	NTS.	
HOUSE, and Limited College and Landon College and Coll		0-1	1- O (F 000) 000	

Schedule (C (Form 99	90) 2022		DUTC	HESS	LAND	CONS	ERVA	NCY,	INC.		14-	1667526	Page 4
Part IV	Suppl	ementa	i Inform	nation	(continu	ed)					··			
OTHER	EXPE	NSES (CONSI	ST OI	MII	LEAGE	AND (OTHER	R REI	MBURSAE	BLES TO	THO	SE WHO	
ATTENI	THES	SE MEI	ETING	S ANI	COI	NFEREN	CES.	THE	ORGA	NIZATIO	N WORK	S TO	ENSURE	
COMPL	IANCE	WITH	ALL	NEW :	YORK	STATE	AND	FEDI	ERAL	LOBBYIN	NG LIMI	TS.		
					•••		····							
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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.

Open to Public

OMB No. 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

DUTCHESS LAND CONSERVANCY, INC. Employer identification number 14-1667526

Schedule D (Form 990) 2022

	organization answered "Yes" on Form 990, Part IV, line			435
		(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		<u>. </u>	
5	Did the organization inform all donors and donor advisors in v	•		
_	are the organization's property, subject to the organization's			
6	Did the organization inform all grantees, donors, and donor ac			*
	for charitable purposes and not for the benefit of the donor or	· · ·	•	
Da	impermissible private benefit? Conservation Easements. Complete if the ord			YesN
		***	990, Part IV	, line 7.
1	Purpose(s) of conservation easements held by the organization			
	X Preservation of land for public use (for example, recreat	· 💳		orically important land area
	X Protection of natural habitat	Preserva	tion of a cert	ified historic structure
_	X Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the	form of a co	
	day of the tax year.			Held at the End of the Tax Yes
a				2a 435
b				2b 44,622.00
C	Number of conservation easements on a certified historic stru			2c
đ	Number of conservation easements included in (c) acquired a			
_				2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated	by the organ	zation during the tax
	year <u>3</u>		1	
4	Number of states where property subject to conservation easi		<u> </u>	
5	Does the organization have a written policy regarding the peri		_	[v] []
	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing	g conservatio	on easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl 255,098.	ing of violations, and enforcing cor	servation ea	sements during the year
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section	n 170(h)(4)(B)	(i)
	and section 170(h)(4)(B)(ii)?			X Yes N
9	In Part XIII, describe how the organization reports conservatio			
	balance sheet, and include, if applicable, the text of the footne	ote to the organization's financial s	tatements th	at describes the
	organization's accounting for conservation easements.	-		
Par	t III Organizations Maintaining Collections of	Art, Historical Treasures,	or Other S	imilar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.		
1a	If the organization elected, as permitted under FASB ASC 958	B, not to report in its revenue stater	nent and bala	ance sheet works
	of art, historical treasures, or other similar assets held for public	lic exhibition, education, or researc	h in furtherar	nce of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that describes thes	e items.	·
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue statement	and balance	sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research	n furtherance	of public service,
	provide the following amounts relating to these items:	·		
	(i) Revenue included on Form 990, Part VIII, line 1			\$
2	If the organization received or held works of art, historical trea			
	the following amounts required to be reported under FASB AS		anour gant,	J. J. (M.)
а	Revenue included on Form 990, Part VIII, line 1			\$
a k	Assets included in Form 990 Part Y	•••••••••••••••••••••••••••••••••••••••		Ψ

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

	dule D (Form 990) 2022 DUTCHESS t III Organizations Maintaining Co	E LAND CONS				Other		14-16 r A ssets		
3	Using the organization's acquisition, accessio								CONTIN	<u>180)</u>
٠	collection items (check all that apply):	in, and other records	i, criccit arry c	i the it	ollowing that	mano si	grimearit	u36 01 113		
а	Public exhibition	d	Loan	or exch	nange prograi	m				
b	Scholarly research	e			95 509					
c	Preservation for future generations	_					•			
4	Provide a description of the organization's col	llections and explain	how they fur	ther the	e organizatior	n's exen	npt purpo	se in Part	XIII.	
5	During the year, did the organization solicit or	•	-		•					
	to be sold to raise funds rather than to be ma							.,	Yes	☐ No
Par	t IV Escrow and Custodial Arrang	jements. Comple	te if the orgar	nization	n answered "\	es" on	Form 990), Part IV,	ine 9, or	
	reported an amount on Form 990, Part									
1a	Is the organization an agent, trustee, custodia	an or other intermedi	ary for contrib	outions	or other asse	ets not i	ncluded			
	on Form 990, Part X?				,,.			,	Yes	No
þ	If "Yes," explain the arrangement in Part XIII a									
									Amount	
С	Beginning balance						. 1c			
đ	Additions during the year						. td			
е	Distributions during the year						1e			
f	Ending balance							L		
	Did the organization include an amount on Fo						ity?	L	y es ∫	No
	If "Yes," explain the arrangement in Part XIII.								.,,,.,.	
Par	t V Endowment Funds. Complete if	<u> </u>		- 1				vaana baali	4 3 Favr	
		(a) Current year	(b) Prior ye		(c) Two years			years back		years back
	Beginning of year balance	13,981,881.	10,776,		5,440		4,4	68,642.	4,	834,069.
	Contributions	1,085,766. -2,514,354.	1,139,		4,269 1,240	-	1 0	50,560.		69,431.
	Net investment earnings, gains, and losses	-2,314,334,	2,065,	000.	1,240	, 303.	1,0	86,160.	_	222,505.
	Grants or scholarships									
е	Other expenditures for facilities				175	,000.	1	.65,000.		212,353.
	and programs				173	, 000.		.05,000.		12,333.
	Administrative expenses End of year balance	12,553,293.	13,981,	881	10,776	207	5 4	40,362.	4	468,642.
9 2	Provide the estimated percentage of the curre					, = • · ·]	-, -	,	-,	100,012,
	Board designated or quasi-endowment	84.0000	%	11111 (a))	rielu as.					
	Permanent endowment 16.0000	%	_/0							
c	· · · · · · · · · · · · · · · · · · ·									
Ĭ	The percentages on lines 2a, 2b, and 2c shou	· · · ·								
3a	Are there endowment funds not in the posses	•	tion that are h	eld an	d administere	d for th	e			
	organization by:	•							[Yes No
	(i) Unrelated organizations								3a(i)	X
	(ii) Related organizations								3a(ii)	X
b	If "Yes" on line 3a(ii), are the related organizat	tions listed as require	ed on Schedu	le R?					3b	
	Describe in Part XIII the intended uses of the	organization's endov	vment funds.							
Pai	rt VI Land, Buildings, and Equipme									
	Complete if the organization answered	"Yes" on Form 990	, Part IV, line	11a. Se	ee Form 990,	Part X,	line 10.			
	Description of property	(a) Cost or of		-	or other		ccumulat		(d) Book	value
		basis (investm		basis (de	preciation			
1a	Land				2,550.		<u>_</u>			,550.
	Buildings				4,500.		7,1		567	,319.
c	Leasehold improvements				4,888.		394,8			0.
	1			31	3,298.		125,5	23.	187	,775.
	Other									
Γota	I. Add lines 1a through 1e. (Column (d) must ed	gual Form 990, Part X	K. column (B).	line 10	Oc.)				7,977	,644.

Schedule D (Form 990) 2022

Total. Add lines 1a through 1e. (Column (d) must equal Form 990. Part X. column (B). line 10c.)

Schedule D (Form 990) 2022

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year m	arket value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
_ (A)			
(B)			
(C)			•
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.		<u> </u>	
Complete if the organization answered "Yes" o	n Form 990, Part IV, line	11c. See Form 990. Part X. line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year m	arket value
(1)			
(2)			
(3)			
(4)			
(5)			
	· · · · · · · · · · · · · · · · · · ·		
(6)			
(7)			.
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.	-		· · · · · · · · · · · · · · · · · · ·
Complete if the organization answered "Yes" o	n Form 000 Dort IV line	11d Con Form 000 Part V line 15	
	escription		la ale valee
	escription	(0) 0	look value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)		7,000	
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes" o	n Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability		(b) E	ook value
(1) Federal income taxes			
(0)			
(2)			
(3)			
		, , , , , , , , , , , , , , , , , , ,	
(3)			
(3) (4) (5)			
(3) (4)			
(3) (4) (5) (6) (7)			
(3) (4) (5) (6) (7) (8)			
(3) (4) (5) (6) (7)	051		

Pa	TXI Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn.	
	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	9,161,824.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments 2a -1,350,140.		
b	Donated services and use of facilities 2b	[
С	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	-1,350,140.
3	Subtract line 2e from line 1	3	10,511,964.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 33,568.	<u> </u>	
b	Other (Describe in Part XIII.) 4b		
С	Add lines 4a and 4b	4c	33,568.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)	5	10,545,532.
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expenses per F	letur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	2,305,039.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
c	Other losses 2c	١.	
d	Other (Describe in Part XIII.)		
-		2e	0.
e	•	3	2,305,039.
3	Subtract line 2e from line 1	<u> </u>	2,303,037.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a 33,568.		
b	Other (Describe in Part XIII.)	1	22 560
С		4c	33,568.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	2,338,607.
	rt XIII Supplemental Information.		
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4	; Part	X, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.		
PAI	RT II, LINE 3:		
EA.	SEMENT: PERKINS 550.135 ACRES; LANDOWNER: ESTATE OF NANCY F	<u>. P</u>	ERKINS;
AM.	ENDED AND RESTATED CONSERVATION EASEMENT: RECORDED AT THE O	FFI	CE OF THE
ישם	TCHESS COUNTY CLERK AT DOCUMENT NO. 02-2022-4210 ON 10/7/20	22;	ORIGINAL
EA	SEMENT: ORIGINAL GRANTOR WAS GEORGE W. PERKINS JR. EASEMEN	T W	AS
<u>R</u> E	CORDED IN THE OFFICE OF THE DUTCHESS COUNTY CLERK ON SEPTEM	BER	17, 2002
ΑТ	DOCUMENT NO. 02-2002-9149;		

MODIFICATIONS: (1) APPLIES THE CONSERVATION EASEMENT TO A 25.2 ACRE PORTION OF THE 550.135-ACRE PROPERTY PROTECTED BY THE ORIGINAL EASEMENT, RESTATING ALL PROVISIONS OF THE ORIGINAL EASEMENT EXCEPT AS PROVIDED IN (2) AND (3) BELOW.

(2) CLARIFIES THAT THE PROPERTY AND EXISTING STRUCTURES MAY BE USED BY

- NOT-FOR-PROFIT ORGANIZATIONS EXEMPT FROM TAXATION UNDER SECTION 501(C)(3)

 OF THE INTERNAL REVENUE CODE FOR OFFICES, EDUCATION, AND/OR SCIENTIFIC

 RESEARCH.
- (3) INCLUDES A NEW EXHIBIT B (THE CONSERVATION EASEMENT MAP) APPLYING

 SOLELY TO THE 25.2 ACRE PARCEL THAT IS SUBJECT TO THIS AMENDED AND

 RESTATED CONSERVATION EASEMENT. THIS MAP MAKES NO SUBSTANTIVE CHANGES TO

 THE ORIGINAL EXHIBIT B.
- (4) ENHANCES THE PROTECTION THE PROPERTY'S HISTORIC CHARACTER. REASONS FOR AMENDMENT: TO ENHANCE ADMINISTRATION OF THE ORIGINAL EASEMENT BY FACILITATING GRANTEE'S ABILITY TO STEWARD THE EASEMENT UNDER DIFFERENT OWNERSHIP OF THE 25.2-ACRE PARCEL. THIS WILL HELP ADVANCE THE SCENIC PRESERVATION AND CONSERVATION PURPOSES OF THE ORIGINAL CONSERVATION EASEMENT BY CLARIFYING THE ABOVE NOTED USES, ENHANCING THE PROTECTION OF THE PROPERTY'S HISTORIC CHARACTER, AND HELPING TO ENSURE THAT THE PROPERTY REMAINS CONDUCIVE TO LONG-TERM SUSTAINABLE USE. THESE CHANGES ARE CONSISTENT WITH THE CONSERVATION PURPOSES OF THE ORIGINAL EASEMENT. COMMENTS: THIS AMENDMENT DOES NOT MAKE THE CONSERVATION EASEMENT ANY LESS PROTECTIVE OF THE EASEMENT'S CONSERVATION PURPOSES, DOES NOT INCREASE ANY RIGHTS HELD BY THE LANDOWNER, DOES NOT REDUCE THE AMOUNT OF LAND PROTECTED BY THE EASEMENT, AND AS DETERMINED BY APPRAISAL, DOES NOT CONFER AN IMPERMISSIBLE PRIVATE BENEFIT ON THE LANDOWNER. THE REMAINDER OF THE ORIGINAL PROTECTED PROPERTY IS NOW SUBJECT TO A DIFFERENT AMENDED AND RESTATED CONSERVATION EASEMENT (SEE BELOW) WHICH REMOVES A PORTION OF THE BUILDING ENVELOPE THAT HAD BEEN ATTACHED TO THIS PARCEL. EASEMENT: PERKINS 550.135-ACRE PROPERTY; LANDOWNER: PALLADIUM FOUNDATION,

ESTATE OF NANCY F. PERKINS; AMENDED AND RESTATED CONSERVATION EASEMENT:

RECORDED AT THE OFFICE OF THE DUTCHESS COUNTY CLERK AT DOCUMENT NO.

02-2022-53837 ON 10/21/2022; ORIGINAL EASEMENT:

ORIGINAL GRANTOR WAS

14-1667526 Page 5 DUTCHESS LAND CONSERVANCY, INC. Schedule D (Form 990) 2022 Part XIII Supplemental Information (continued) GEORGE W. PERKINS JR. EASEMENT WAS RECORDED IN THE OFFICE OF THE DUTCHESS COUNTY CLERK ON SEPTEMBER 17, 2002 AT DOCUMENT NO. 02-2002-9149. MODIFICATIONS: (1) APPLIES THE CONSERVATION EASEMENT TO A 528.125-ACRE PORTION OF THE 550.135-ACRE PROPERTY PROTECTED BY THE ORIGINAL EASEMENT, RESTATING ALL PROVISIONS OF THE ORIGINAL EASEMENT EXCEPT AS PROVIDED IN (2) AND (3) BELOW. (2) MODIFIES EXHIBIT B (THE CONSERVATION EASEMENT MAP) BY IMPOSING ADDITIONAL RESTRICTIONS ON THE LOCATION OF FARM STRUCTURES USING A BUILDING ENVELOPE THAT LIMITS THE CONSTRUCTION OF NEW STRUCTURES OUTSIDE OF THE PROPERTY'S EXISTING COMPLEX OF BARNS AND OTHER FARM RELATED STRUCTURES. (3) REMOVES A PORTION OF THE RESIDENTIAL BUILDING ENVELOPE THAT WAS PART OF THE ABUTTING 25.2-ACRE PARCEL, REDUCING THE SIZE OF THE PERMITTED RESIDENTIAL BUILDING AREA BY 1.3 ACRES. REASONS FOR AMENDMENT: TO ENHANCE ADMINISTRATION OF THE ORIGINAL EASEMENT BY FACILITATING GRANTEE'S ABILITY TO STEWARD THIS EASEMENT SEPARATELY FROM THE ADJOINING 25.2-ACRE PARCEL NOW UNDER A SEPARATE EASEMENT DESCRIBED ABOVE, WHILE ADVANCING THE SCENIC PRESERVATION AND CONSERVATION PURPOSES OF THE ORIGINAL CONSERVATION EASEMENT. THIS AMENDMENT FURTHER LIMITS THE FUTURE LOCATION OF AGRICULTURAL STRUCTURES ON THE PROPERTY AND ENSURES THAT THE PROPERTY WILL REMAIN A SINGLE AGRICULTURAL PROPERTY.

ORIGINAL EASEMENT.

COMMENTS: THIS AMENDMENT MAKES THE CONSERVATION EASEMENT MORE PROTECTIVE

OF THE EASEMENT'S CONSERVATION PURPOSES, DOES NOT INCREASE ANY RIGHTS

HELD BY THE LANDOWNER, DOES NOT REDUCE THE AMOUNT OF LAND PROTECTED BY

THE EASEMENT, AND, AS DETERMINED BY APPRAISAL, DOES NOT CONFER AN

IMPERMISSIBLE PRIVATE BENEFIT ON THE LANDOWNER. THIS AMENDMENT MAINTAINS

THESE CHANGES ARE CONSISTENT WITH THE CONSERVATION PURPOSES OF THE

Part XIII Supplemental Information (continued) THE ORIGINAL CONSERVATION EASEMENT'S RESTRICTION TO NO MORE THAN TWO BUILDING LOTS ON THE ORIGINAL 550.135 ACRE PROPERTY BY MAKING THIS INTO A SINGLE LARGE AGRICULTURAL BUILDING LOT. ONLY ONE LOT IS ALLOWED BY THIS AMENDMENT ON THE ENTIRE 528.125 ACRES. THE SECOND PERMITTED LOT IS ALLOWED ON THE ADJOINING 25.2-ACRE PROPERTY DESCRIBED ABOVE. REQUIRING THE ENTIRE LARGE PARCEL TO REMAIN AS ONE LOT IN PERPETUITY WILL ENSURE THAT THE BULK OF THE PROPERTY PROTECTED BY THE ORIGINAL EASEMENT WILL REMAIN IN SINGLE OWNERSHIP AS A LARGE FARM OPERATION. EASEMENT: CRJ ASSOCIATES 512-ACRE EASEMENT; LANDOWNER: RICHARD AND ANNEMARIE CONNIFF; AMENDMENT: RECORDED AT THE OFFICE OF THE DUTCHESS COUNTY CLERK AT DOCUMENT NO. 02-2022-4229 ON 10/12/2022; ORIGINAL EASEMENT: ORIGINAL GRANTOR WAS CRJ LAND ASSOCIATES. EASEMENT WAS RECORDED IN THE OFFICE OF THE DUTCHESS COUNTY CLERK ON MARCH 3, 1989 AT LIBER 1828, PAGE 390, AND SUBSEQUENTLY AMENDED BY CRJ LAND ASSOCIATES BY AN AMENDMENT TO DEED OF CONSERVATION EASEMENT RECORDED IN THE OFFICE OF THE DUTCHESS COUNTY CLERK ON JANUARY 2, 1991 AT LIBER 1882, PAGE 857. MODIFICATIONS: (1) MODIFIES SECTION 3.4(A)(III) TO CLARIFY THAT SOLAR PANELS FOR RESIDENTIAL USE ON THE PROPERTY ARE PERMITTED AS NORMAL AND CUSTOMARY ACCESSORY STRUCTURES. (2) MODIFIES EXHIBIT B (THE CONSERVATION EASEMENT MAP) BY ACCURATELY DEPICTING THE LOCATION OF EXISTING STRUCTURES AND IMPROVEMENTS ON THE PROPERTY, AND ESTABLISHES A LIMITED AREA WHERE SOLAR PANELS MAY BE LOCATED. REASONS FOR THE AMENDMENT: TO CLARIFY THAT SOLAR PANELS ARE ALLOWED AS ACCESSORY STRUCTURES AND TO IDENTIFY A SMALL AREA WHERE THEY MAY BE PERMITTED WITHOUT AFFECTING THE EASEMENT'S CONSERVATION PURPOSES. THIS WILL ADVANCE THE SCENIC PRESERVATION AND CONSERVATION PURPOSES OF THE ORIGINAL CONSERVATION EASEMENT.

COMMENTS: THIS AMENDMENT IS CONSISTENT WITH THE CONSERVATION PURPOSES OF THE ORIGINAL EASEMENT, DOES NOT MAKE THE CONSERVATION EASEMENT ANY LESS

PROTECTIVE OF THE EASEMENT'S CONSERVATION PURPOSES, DOES NOT INCREASE ANY

RIGHTS HELD BY THE LANDOWNER, DOES NOT REDUCE THE AMOUNT OF LAND

PROTECTED BY THE EASEMENT, AND AS DETERMINED BY APPRAISAL, DOES NOT

CONFER AN IMPERMISSIBLE PRIVATE BENEFIT ON THE LANDOWNER.

PART II, LINE 5:

THE ORGANIZATION HAS THE FOLLOWING POLICIES/PROCEDURES IN PLACE AND APPROVED BY THE ORGANIZATION'S BOARD: THE ORGANIZATION'S CONSERVATION EASEMENT ENFORCEMENT PROCEDURE: 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 THE ORGANIZATION TAKES ON TO UPHOLD THE TERMS OF THE CONSERVATION EASEMENTS AND TO MONITOR, OVERSEE AND ENFORCE THEM. IT SPELLS OUT THE ORGANIZATION'S STEWARDSHIP ENDOWMENT REQUEST TO LANDOWNERS. THE ORGANIZATION'S STEWARDSHIP RECORDS MANAGEMENT PROCEDURE: THIS PROCEDURE SPELLS OUT ANNUAL MONITORING PROCEDURES AS WELL AS BASELINE DOCUMENTATION AND RECORD KEEPING. THESE POLICIES ARE NOT REFLECTED IN THE ORGANIZATION'S CURRENT CONSERVATION EASEMENTS.

PART II, LINE 9:

EXPENSES RELATED TO PURCHASED CONSERVATION EASEMENTS ARE RECORDED AS PURCHASE OF DEVELOPMENT RIGHTS. ANY OFFSETTING REVENUES ARE RECORDED AS PURCHASE OF DEVELOPMENT RIGHTS CONTRIBUTIONS OR LAND PROTECTION

CONTRIBUTIONS. THE ORGANIZATION DOES NOT HOLD ANY CONSERVATION EASEMENTS

ON ITS STATEMENT OF FINANCIAL CONDITION. CONSERVATION EASEMENTS DONATED TO

THE ORGANIZATION HAVE NO MARKET VALUE IN THE HANDS OF THE ORGANIZATION AND

THEREFORE ARE NOT CONSIDERED AS SUPPORT. DONATED EASEMENTS ARE CARRIED AT

ZERO BOOK VALUE PRIMARILY BECAUSE A TYPICAL CONSERVATION EASEMENT PROVIDES

THE ORGANIZATION WITH NO AFFIRMATIVE RIGHTS EXCEPT TO MONITOR AND ENFORCE

THE EASEMENT AND THIS CONSTITUTES A BURDEN. COSTS INCURRED BY THE

ORGANIZATION TO PURCHASE DEVELOPMENT RIGHTS ARE EXPENSED IN THE PERIOD

INCURRED.

PART V, LINE 4:

DONOR RESTRICTED STEWARDSHIP ENDOWMENT AS OF DECEMBER 31, 2022 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

STEWARDSHIP ENDOWMENT TOTALED \$1,893,330 AT DECEMBER 31, 2022. THE DONOR
RESTRICTED LAND PROTECTION FUND CONSISTS OF FUNDS FOR EASEMENT
STEWARDSHIP, ENFORCEMENT, PRO-ACTIVE PROJECTS AND OTHER USES. NET ASSETS
WITHOUT DONOR RESTRICTIONS AS OF DECEMBER 31, 2022 CONSIST OF FOUR BOARD
DESIGNATED CATEGORIES. THE BOARD DESIGNATED AMOUNTS ARE FOR THE FOLLOWING
PURPOSES: STEWARDSHIP FUND \$3,191,693; LAND PROTECTION FUND \$5,535,522;
LAND EASEMENT ACQUISITION FUND \$351,966 AND RESERVE FUND \$1,580,782 FOR
TOTAL BOARD DESIGNATED NET ASSETS OF \$10,659,963.

PART X, LINE 2:

THE ORGANIZATION HAS EVALUATED ANY UNCERTAIN TAX POSITIONS AND RELATED

INCOME TAX CONTINGENCIES AND DETERMINED UNCERTAIN POSITIONS, IF ANY, ARE

Schedule D (Form 990) 2022 DUTCHESS LAND CONSERVANCY, INC. Part XIII Supplemental Information (continued)	14-1667526 Page 5
NOT MATERIAL TO THE FINANCIAL STATEMENTS, ACCORDING TO F	'ASB ASC 740-10.
PENALTIES AND INTEREST ASSESSED BY INCOME TAXING AUTHORI	TIES ARE INCLUDED
IN OPERATING EXPENSES, IF INCURRED. NONE OF THE ORGANIZA	
CURRENTLY UNDER EXAMINATION.	
	,

SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization	•				· ·	Employer ide	entification number
DUTCHES	S LAND CONSERVANCY	, II	NC.			14-1667	
	Complete if the organization answer			n Form 990, Part IV,			
1 Indicate whether the organization rais		g activ	rities.	Check all that apply.			
a Mail solicitations				overnment grants			
b Internet and email solicitations			_	nment grants			
c Phone solicitations	g 🔙 Special	fundra	aising	events			
d In-person solicitations							
2 a Did the organization have a written of					tees,	or	
	art VII) or entity in connection with pa					Yes	
b If "Yes," list the 10 highest paid indiv		ant to	agree	ments under which tl	he fun	draiser is to be	e
compensated at least \$5,000 by the	organization.						
		//iii	Did		(1)	Amount paid	<u>-</u>
(i) Name and address of individual	(ii) Activity	(iii) fundr have c	aiser	(iv) Gross receipts	to (or	r retained by)	(vi) Amount paid to (or retained by)
or entity (fundraiser)	(.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	or con	itrol of	from activity		undraiser ed in col. (i)	organization
		<u> </u>			1100		
		Yes	No	-			
		 					
		ļ					
							
Total							<u> </u>
3 List all states in which the organizatio			itions	or has been potified	it is ex	remot from red	nistration
or licensing.	3 3			o, nao poort notino	10 0	rompt nom rog	gioriation
					•		
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			•				

DUTCHESS LAND CONSERVANCY, INC. 14-1667526 Page 2 Schedule G (Form 990) 2022 Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 (b) Event #2 (c) Other events (d) Total events NONE (add col. (a) through SPRING EVENTFALL EVENT col. (c)) (event type) (total number) (event type) 207,007. 279,854. 486,861. Gross receipts 447,794. 190,257. <u>257,537.</u> 2 Less: Contributions 39,067. 16,750. 22,317. Gross income (line 1 minus line 2) 4 Cash prizes Noncash prizes Expenses 11,711. 24,718. 36,429. 6 Rent/facility costs 42,136. 18,949. 23,187. 7 Food and beverages Direct 8 Entertainment 9,008. 9,008. 9 Other direct expenses 87,573. 10 Direct expense summary. Add lines 4 through 9 in column (d) -48,506.11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes % 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net garning income summary. Subtract line 7 from line 1, column (d) 9 Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states? b if "No," explain:

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?

b If "Yes," explain:

Sch	edule G (Form 990) 2022 DUTCHESS LAND CONSERVANCY, INC. 14-	-100/52 <u>6</u>	Page 3
11	Does the organization conduct gaming activities with nonmembers?	. 🔲 Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
	to administer charitable gaming?	Yes	No
13	Indicate the percentage of gaming activity conducted in:		
	The organization's facility	13a	%
	An outside facility		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
1-4	Effect the finallic and address of the periods the propared the organization organization of guilling operation as some and records.		
	Name		
	Trustice		
	Address		
	Addiess		
15.	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	No
10a	Does the organization have a contract with a third party from whom the organization receives garning revenue:	100	
	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount		
K			
	of gaming revenue retained by the third party \$		
C	: If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of services provided		
			
	Director/officer Employee Independent contractor		
17	Mandatory distributions:		
ā	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	Yes	☐ No
ŀ	no Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
	organization's own exempt activities during the tax year \$		
Pε	art IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and I	art III, lines 9, 9	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
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Schedule G	i (Form 990)	DUTCHESS LAN	D CONSERVANCY,	INC.	14-1667526 Page 4
Part IV	Supplemental Inf	DUTCHESS LAN ormation (continued)			
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	- "			, , , , , , , , , , , , , , , , , , , ,	

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SCHEDULE J (Form 990)

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.

OMB No. 1545-0047

2022

Open to Public

Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization

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

DUTCHESS LAND CONSERVANCY, INC.

Part I | Questions Regarding Compensation

Employer identification number 14-1667526

			Yes	No
1a	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	1 :		
	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 20		
b	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	L	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract	1 1		
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
	organization or a related organization:		· ·	
а	Receive a severance payment or change-of-control payment?	4 a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	ļ	Х
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	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.		L	
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	1 : 12:		r. T.
	contingent on the revenues of:	, v.	[· · ·	
а	The organization?	<u>5a</u>	ļ	X
þ	Any related organization?	5b	 	Х
	If "Yes" on line 5a or 5b, describe in Part III.			
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	-	X
b	Any related organization?	6b	ļ <u>.</u>	Х
	If "Yes" on line 6a or 6b, describe in Part III.		ļ ·	
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	1_		! 37
_	not described on lines 5 and 6? If "Yes," describe in Part III	7	<u> </u>	X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			- T
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	ļ	X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	_ '		. :
	Regulations section 53.4958-6(c)?	9	i	I

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

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)-(ii) 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.

					╝	Yes Takel of anhome	in Commonation
	(B) breakdown of v	(b) breakgown of w-z alloyor toss-wiso alloyor toss-wiso		other deferred	benefits	(B)()-(D)	in column (B)
(A) Name and Title	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) REBECCA THORNTON (i)	179,815.	0.	0.	5,568.	8,269.	193,652.	0.
SIDENT		0.	0.	0.	0.	0.	0.
(0)							
(B)							
(0)							
(ii)							
(0)							
(ii)							
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SCHEDULE L

Department of the Treasury

Internal Revenue Service

(Form 990)

Transactions With Interested Persons

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.

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

OM8 No. 1545-0047

2022

Open To Public Inspection

Name of the organizat	ion								Emp	oloyer	identi	ificatio	on nu	mber
			LAND CON					<u></u>			675	26		
Part I Excess	Benefit T	ransactio	ons (section 50	01(c)(3	3), sect	ion 501(c)(4), and se	ction	1 501(c)(29) orgai	nizatio	ns on	ly).			
Complete	e if the organi	zation answ	ered "Yes" on f	orm 9	990, Pa	art IV, line 25a or 25b), or	Form 990-EZ, Pa	ırt V, li	ne 40	b.			
1 (a) Name of disqu	alified person	(b) F	Relationship betv			ified	el Dr	escription of tran	sactio	n		(d)	Corre	cted?
- (a) Name or disqu	annea person	<u>' </u>	person and or	ganız	ation					''		Yı	es	No
														
												+	-	
												+	\dashv	
 -												+-	+	
2 Enter the amount	of tax incurre	ed by the or	rganization man	agers	or disc	ualified persons dur	ina t	he vear under					1	
section 4958		•	_	_			_	_		\$				
3 Enter the amount														
	, ,		•	•	•									
Part II Loans	to and/or	From Inte	erested Pers	sons.										
Complete	e if the organi	zation answ	vered "Yes" on f	orm 9	990-EZ	, Part V, line 38a or F	-orm	990, Part IV, line	e 26; c	or if th	e orga	nizatio	n	
			Part X, line 5, 6			r					10.1.4			
(a) Name of		Relationship			oan to or m the	(e) Original	(f) Balance due	(g)		(h) App by boa	proved ard or		/ritten
interested perso	on with	organization	of loan	· · · · · · · · · · · · · · · · · · ·	ization?	principal amount			defa	uit?	comm	ittee?		ment?
				То	From		⊢		Yes	No	Yes	No.	Yes	No
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Total						\$								
Part III Grants	or Assista	ance Ben	efiting Inter	este	d Per	sons.								
	-		vered "Yes" on I					<u> </u>						
(a) Name of inte	rested persor	<u> </u>	(b) Relationship			(c) Amount of assistance		(d) Type assistan) Purp assista		f
			interested pers the organiza		ю	assistance		assisiain	- C		•	2001010	ar ice	
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LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990) 2022

Schedule L	(Form 990) 2022	DUTCHESS	LAND	CONSERV
Part IV	Business Transact	tions Involvina I	ntereste	ed Persons.

Complete if the organization answered (a) Name of interested person	"Yes" on Form 990, Part IV, line 28a, 28 (b) Relationship between interested	3b, or 28c. (c) Amount of	(d) Description of	(e) Sharing of	
(a) Name of interested person	person and the organization	transaction	(d) Description of transaction	organization's revenues?	
OAKLEIGH THORNE AS CO-EXEC	DIRECTOR	0.	LEASES OFFI	Yes	No X
JENNIFER SPEERS AS CO-EXEC			EASEMENT AM		X
DAVID STACK AS CO-EXECUTOR	DIRECTOR		EASEMENT AM		X
GAYLE BONTECOU	FORMER DIRECTOR	0.	DONATED PRE		Х
	-				
Part V Supplemental Information. Provide additional information for respo	nses to questions on Schedule L (see in	structions)			
SCH L, PART IV, BUSINESS TE	RANSACTIONS INVOLVING	INTERESTE	D PERSONS:		
(A) NAME OF INTERESTED PERS	SON:				
OAKLEIGH THORNE AS CO-EXECU	JTOR OF THE ESTATE OF	OAKLETCH	B. THORNE		
(D) DESCRIPTION OF TRANSACT	PION: LEASES OFFICE I	FOR \$1 PER	YEAR		
(A) NAME OF INTERESTED PERS	SON:				
JENNIFER SPEERS AS CO-EXECU	TOR OF THE ESTATE OF	NANCY PER	KINS		
(D) DESCRIPTION OF TRANSACT	TON: EASEMENT AMENDE	IENT AND PR	OPERTY DONA	LTON	
(A) NAME OF INTERESTED PERS	SON:				
DAVID STACK AS CO-EXECUTOR	OF THE ESTATE OF NAM	ICY PERKINS		· · · · · ·	
(D) DESCRIPTION OF TRANSACT	CION: EASEMENT AMENDM	IENT AND PR	OPERTY DONAT	NOI	
(A) NAME OF PERSON: GAYLE E	ONTECOLI	<u> </u>			
(D) DESCRIPTION OF TRANSACT	ION: DONATED PRESERV	E AND DONA	TED HOUSE		
					
				-	

SCHEDULE M (Form 990)

Noncash Contributions

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

Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

Inspection

DUTCHESS LAND CONSERVANCY, INC. Part | Types of Property

Employer identification number 14-1667526

	ti Types of Freperty		,					
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution are			3
1	Art - Works of art	X	2	3,250.	FMV			
2	Art - Historical treasures			-,	, , , , ,			
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property					-		
9	Securities - Publicly traded	X	3	28,656.	F M V			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -			i				
	Historic structures							
14	Qualified conservation contribution - Other							
15	Real estate · Residential	X	1	574,500.	FMV			
16	Real estate · Commercial							
17	Real estate - Other	X	3	7,918,350.	FMV			
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other (FURNITURE AND E)	X	1	119,640.	FMV			
26	Other ()							
27	Other ()							
28	Other ()	<u> </u>						
29	Number of Forms 8283 received by the organization			i i				
	for which the organization completed Form 82	83, Part V, D	Oonee Acknowledg	ement 29				
					_	Y	es	No
30a	During the year, did the organization receive by	y contributio	n any property rep	orted in Part I, lines 1 throug	h 28, that it			
	must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for							
	exempt purposes for the entire holding period?	?				30a	_	<u> </u>
b								•-
31						31	_	<u> </u>
32a		or related or	ganizations to solid	cit, process, or sell noncash				
	contributions?				<u></u>	32a		<u> </u>
p	If "Yes," describe in Part II.				İ	ľ		
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of property	for which column (a) is che	cked,			
	describe in Part II.							

Schedule M	l (Form 990) 2022	DUTCHESS	LAND CO	NSERVANCY,	INC.	14-1667526	Page 2
Part II	Supplementa	Information. t I, column (b), the	Provide the info	ormation required by	/ Part I. lines 30b. 32	b, and 33, and whether the organiza or a combination of both. Also com	tion
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SCHEDULE O (Form 990)

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service 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. THE
ORGANIZATION 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) ACQUIRE IMPORTANT RESOURCE LAND FOR PASSIVE PUBLIC
USE, THE ORGANIZATION, WORKING WITH THE TOWN OF DOVER, COMPLETED THE
PURCHASE AND PROTECTION OF THE SEVEN WELLS PROPERTY TO ADD TO THE DOVER
STONE CHURCH PRESERVE. IN 2022 THE ORGANIZATION ACCEPTED THE FEE GIFT
OF 1,258 ACRES OF LAND TO BE OWNED AND MANAGED BY THE ORGANIZATION AS A
WILDLIFE CONSERVATION AREA AND PASSIVE PUBLIC PRESERVE.
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:

(STEWARDSHIP) BASELINE DOCUMENTATION FILES. STAFF STRIVE TO KEEP UP TO

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

Employer identification number 14-1667526

DATE ON INTERNET SERVICES SUCH AS STEWARDSHIP MICROSOFT'S MAPSLIVE.COM, GOOGLE EARTH, AND BING, WHICH PROVIDE VERY USEFUL ADDITIONAL SOURCES OF AERIAL PHOTOGRAPHY AND IMPLEMENTED THE USE OF SATELLITE IMAGERY AS A MONITORING TOOL. THE ORGANIZATION'S STEWARDSHIP RESPONSIBILITIES CONTINUE TO INCREASE EACH YEAR AS MORE AND MORE EASEMENTS ARE ACCEPTED. THE 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) MEMBERS ALSO PARTICIPATED IN AND ATTENDED NUMEROUS VIRTUAL

EVENTS EDUCATION THROUGHOUT THE YEAR. STAFF ATTENDED THE NATIONAL LAND

TRUST RALLY (CONFERENCE), ATTENDED THE NEW YORK LAND TRUST CONSERVATION

CONFERENCE, 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 THE ORGANIZATION'S WORK. THE

ORGANIZATION'S PRESIDENT CONTINUES TO SERVE ON THE LAND TRUST ALLIANCE

NY ADVISORY COUNCIL AND WAS ELECTED TO SERVE ON THE NATIONAL LAND TRUST

ACCREDITATION COMMISSION.

Employer identification number 14-1667526

FORM 990, PART VI, SECTION A, LINE 1A: COMPOSITION OF THE EXECUTIVE COMMITTEE: THE EXECUTIVE COMMITTEE IS COMPOSED OF TEN 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 APPROPRIATE. NOT LESS THAN FOUR MEMBERS CONSTITUTE A QUORUM. SCOPE OF EXECUTIVE COMMITTEE AUTHORITY: OUTLINED UNDER THE ORGANIZATION'S BY LAWS UPDATED AND ADOPTED IN OCTOBER 2022. THE ORGANIZATION'S BOARD DELEGATED AUTHORITY TO THE EXECUTIVE COMMITTEE, BY A DELEGATION OF TRANSACTION APPROVAL POLICY ADOPTED AND APPROVED BY THE BOARD IN OCTOBER 2022. EXECUTIVE COMMITTEE HAS ALL OF THE AUTHORITY OF THE BOARD, EXCEPT FOR: (A) THE ELECTION OR REMOVAL OF OFFICERS, DIRECTORS, DIRECTORS EMERITI, AND THE ADVISORY COUNCIL (INCLUDING THE FILLING OF VACANCIES); (B) THE APPOINTMENT AND/OR REMOVAL OF MEMBERS OF COMMITTEES OF THE BOARD (INCLUDING THE FILLING OF VACANCIES); (C) THE FIXING OF COMPENSATION OF THE DIRECTORS FOR SERVING ON THE BOARD OR ANY COMMITTEE THEREOF; (D) THE AMENDMENT OR REPEAL OF THE BY-LAWS OR THE ADOPTION OF NEW BY-LAWS; (E) THE AMENDMENT OR REPEAL OF ANY RESOLUTION OF THE BOARD WHICH BY ITS TERMS SHALL NOT BE SO AMENDABLE OR REPEALABLE; (F) THE APPROVAL OF A MERGER OR PLAN OF DISSOLUTION; (G) THE AUTHORIZATION OF A SALE, LEASE, EXCHANGE OR OTHER DISPOSITION OF ASSETS CONSTITUTING ALL OR SUBSTANTIALLY ALL OF THE ASSETS OF THE CORPORATION OR THE PURCHASE OF REAL PROPERTY THAT WOULD, UPON PURCHASE, CONSTITUTE ALL OR SUBSTANTIALLY ALL OF THE ASSETS OF THE CORPORATION ; (H) THE APPROVAL OF AMENDMENTS TO THE CERTIFICATE OF INCORPORATION; (I) THE APPROVAL OF CONSERVATION EASEMENT AMENDMENTS; (J) THE SETTING OF POLICY; (K) THE APPROVAL OF THE CORPORATION'S STRATEGIC PLAN AND STRATEGIC GOALS; AND (L)

Employer identification number 14-1667526

ANY OTHER MATTER THAT BY LAW MAY NOT BE DELEGATED TO A COMMITTEE OF THE BOARD. PURSUANT TO THE ORGANIZATION'S DELEGATION OF TRANSACTION APPROVAL POLICY UPDATED AND APPROVED IN OCTOBER 2022, THE BOARD HAS DELEGATED TO THE EXECUTIVE COMMITTEE THE FOLLOWING POWERS: (A) THE APPROVAL OF CONSERVATION EASEMENTS WHEN TIME IS OF THE ESSENCE; (B) THE APPROVAL OF THE ANNUAL BUDGET UNTIL THE NEXT MEETING OF THE BOARD. AND AS SPECIFICALLY DELEGATED BY THE BOARD ON A CASE BY CASE BASIS THE: (C) APPROVAL OF LARGE EXPENDITURES OR CAPITAL PROJECTS; (D) PURCHASE OF ANY REAL PROPERTY OR THE SALE, MORTGAGE, LEASE, EXCHANGE OR OTHER DISPOSITION OF ANY REAL PROPERTY; AND (E) INITIATION OF MAJOR NEW PROJECTS. IN ADDITION, SO DELEGATED IS ALSO AUTHORITY TO: F) ACT ON MINOR ITEMS BETWEEN REGULAR MEETINGS OF THE BOARD, AND G) 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 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

Employer identification number 14-1667526

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 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

ACCOUNTING/BUSINESS DIRECTOR 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 AND APPROVED BY THE

BOARD PRIOR TO FILING WITH THE IRS. ONCE FORM 990 IS FILED, IT IS INCLUDED

ON THE ORGANIZATION'S WEBSITE VIA A DIRECT GUIDESTAR CANDID CONNECTION AS

WELL AS IN THE ORGANIZATION'S BOARD MANUAL WHICH THE BOARD CAN REVIEW, AND

APPROVED THE BOARD, 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 2022. PERSONS COVERED UNDER THE CONFLICT

OF INTEREST POLICY:

COVERED PERSONS INCLUDE ANY INSIDER OF THE ORGANIZATION WHO IS A BOARD

MEMBER, OFFICER, AND KEY PERSON (AS DEFINED IN THE POLICY), AS WELL AS

RELATED PERSONS AND SUBSTANTIAL CONTRIBUTORS (AS DEFINED IN THE POLICY).

Employer identification number 14-1667526

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 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.

Name of the organization

DUTCHESS LAND CONSERVANCY, INC.

Employer identification number 14-1667526

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 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/CANDID, 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

Name of the organization DUTCHESS LAND CONSERVANCY, INC.	Employer identification number 14-1667526				
DELIBERATIONS AND DECISIONS REGARDING THE COMPENSATION ARR	ANGEMENT: THE				
COMPENSATION COMMITTEE, EXECUTIVE COMMITTEE, AND BOARD DEL	IBERATIONS ARE				
HELD IN EXECUTIVE SESSION. THE PRESIDENT PARTICIPATES IN D	ISCUSSION OF ALL				
STAFF EXCEPT HERSELF, AT WHICH TIME SHE LEAVES THE ROOM. T	HE 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 MEE	TINGS DURING				
EXECUTIVE SESSIONS WHEN THE PRESIDENT AND KEY EMPLOYEES AR	E RECUSED FROM				
DELIBERATIONS AND VOTING ON HIS/HER COMPENSATION. THE RESP	ECTIVE MINUTES OF				
THESE MEETINGS ARE REVIEWED AND APPROVED BY THE COMPENSATI	ON COMMITTEE,				
EXECUTIVE COMMITTEE, AND THE BOARD.					
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/CANDID LINK. IT MAKES THESE AS WELL AS OTHER GOV	ERNING DOCUMENTS				
AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC BY	REQUEST.				