

# Return of Organization Exempt From Income Tax

OMB No. 1545-0047

# Form 990

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

# 2023

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

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

<b>A</b> For the <b>2023</b> calendar year, or tax year beginning		and ending	
<b>B</b> Check if applicable:  Address change Name change Initial return Final return/terminated Amended return Application pending	<b>C</b> Name of organization <b>DUTCHESS LAND CONSERVANCY, INC.</b>		<b>D</b> Employer identification number <b>14-1667526</b>
	Doing business as		<b>E</b> Telephone number <b>845 677 - 3002</b>
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>PO BOX 138</b>		<b>G</b> Gross receipts \$ <b>10,900,989.</b>
	City or town, state or province, country, and ZIP or foreign postal code <b>MILLBROOK, NY 12545</b>		<b>H(a)</b> Is this a group return for subordinates? ..... Yes <input checked="" type="checkbox"/> No
	<b>F</b> Name and address of principal officer: <b>NANCY HATHAWAY</b> <b>PO BOX 138, MILLBROOK, NY 12545</b>		<b>H(b)</b> Are all subordinates included? Yes No If "No," attach a list. See instructions
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or 527		<b>H(c)</b> Group exemption number	
<b>J</b> Website: <b>DUTCHESSLAND.ORG</b>		<b>L</b> Year of formation: <b>1985</b> <b>M</b> State of legal domicile: <b>NY</b>	
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other			

## Part I Summary

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>THE ORGANIZATION IS DEDICATED TO PRESERVING THE SCENIC, AGRICULTURAL, AND ENVIRONMENTAL RESOURCES OF</b>		
	<b>2</b> Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	28
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	28
	<b>5</b> Total number of individuals employed in calendar year 2023 (Part V, line 2a)	<b>5</b>	16
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	125
	<b>7 a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	0.
<b>b</b> Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	0.	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b> 11,723,797.	<b>Current Year</b> 3,748,061.
	<b>9</b> Program service revenue (Part VIII, line 2g)	0.	0.
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-1,139,073.	465,828.
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-39,192.	-89,754.
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	10,545,532.	4,124,135.
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	0.
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,197,661.	1,330,713.
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) <b>151,794.</b>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,140,946.	971,031.
<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	2,338,607.	2,301,744.	
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	8,206,925.	1,822,391.	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b> 23,860,218.	<b>End of Year</b> 27,924,806.
	<b>21</b> Total liabilities (Part X, line 26)	143,891.	261,976.
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	23,716,327.	27,662,830.

## 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.

<b>Sign Here</b>	Signature of officer		Date		
	<b>NANCY HATHAWAY, TREASURER</b>		7/30/24		
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
	<b>N. THERESE WOLFE</b>	<b>N. THERESE WOLFE</b>	<b>07/30/24</b>	<input type="checkbox"/>	<b>P00748483</b>
<b>Preparer Use Only</b>	Firm's name <b>UHY ADVISORS NORTHEAST, INC.</b>			Firm's EIN <b>14-1555429</b>	
	Firm's address <b>ONE HUDSON CITY CENTRE, SUITE 204 HUDSON, NY 12534</b>			Phone no. <b>518-828-1565</b>	

May the IRS discuss this return with the preparer shown above? See instructions  Yes  No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission: DUTCHESS LAND CONSERVANCY (DLC) IS DEDICATED TO PRESERVING THE SCENIC, AGRICULTURAL AND ENVIRONMENTAL RESOURCES OF DUTCHESS COUNTY, NEW YORK, 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 prior Form 990 or 990-EZ? [ ] Yes [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? [ ] Yes [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, and revenue, if any, for each program service reported.

4a (Code: ) (Expenses \$ 757,705. including grants of \$ ) (Revenue \$ ) LAND CONSERVATION: IN 2023, THE ORGANIZATION WORKED WITH NUMEROUS LANDOWNERS ON CONSERVATION PROJECTS COVERING MORE THAN 5,000 ACRES, AND SEVERAL CONSERVATION PLANNING PROJECTS, DEVELOPING RESOURCE MAPS, RESPONDING TO INQUIRIES ABOUT CONSERVATION EASEMENTS AND LAND CONSERVATION, DOING RESEARCH AND ANALYSIS OF IMPORTANT RESOURCE LAND, AND VISITING PROPERTIES. IN 2023, SEVEN CONSERVATION EASEMENTS WERE COMPLETED PROTECTING 543 ACRES WHICH BROUGHT THE ORGANIZATION'S TOTAL LAND PROTECTED TO APPROXIMATELY 46,500 ACRES. PURCHASE OF DEVELOPMENT RIGHTS - THE ORGANIZATION CONTINUED ITS WORK WITH SEVERAL FARMERS ON PDR PROJECTS IN MANY DUTCHESS COUNTY TOWNS. MUNICIPAL CONSERVATION AREAS - THROUGH THE ORGANIZATION'S MUNICIPAL CONSERVATION AREA ASSISTANCE PROGRAM, A PROGRAM TO HELP TOWNS ACQUIRE IMPORTANT RESOURCE

4b (Code: ) (Expenses \$ 412,956. including grants of \$ ) (Revenue \$ ) STEWARDSHIP: THE ORGANIZATION HAS NOW PROTECTED 46,570 ACRES STEWARDING 442 CONSERVATION EASEMENTS. THE ORGANIZATION AERIALY MONITORS ALL PROPERTIES ANNUALLY AND GROUND MONITORS ITS EASEMENTS ON A THREE TO FOUR YEAR ROTATIONAL BASIS. IN 2023, THE ORGANIZATION AERIALY MONITORED ALL CONSERVATION EASEMENTS AND COMPLETED 156 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 2023, THE ORGANIZATION AGAIN REGISTERED FOR TERRAFIRMA, THE CONSERVATION EASEMENT DEFENSE INSURANCE PROGRAM TO ENHANCE ITS ABILITY TO SUCCESSFULLY ENFORCE ITS EASEMENTS. EACH YEAR, THE ORGANIZATION ALSO PROVIDES RESEARCH AND LAND MANAGEMENT ASSISTANCE AND WORKS TO UPDATE OLD

4c (Code: ) (Expenses \$ 592,505. including grants of \$ ) (Revenue \$ ) 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 GROUPS, COMMUNITY MEMBERS, AND PRIVATE LANDOWNERS ABOUT THE IMPORTANCE OF LAND PRESERVATION, SOUND PLANNING, WELL-PLANNED GROWTH THAT PROTECTS IMPORTANT RESOURCES, LAND STEWARDSHIP AND MANAGEMENT, AND WAYS TO KEEP FARMERS ON THE LAND. IN 2023, THE ORGANIZATION HOSTED AND PARTICIPATED IN 52 EDUCATION EVENTS, REACHING MORE THAN 2,500 PEOPLE. THE ORGANIZATION COLLABORATED WITH 31 ORGANIZATIONS AND HOSTED EIGHT PROGRAMS FOR STUDENTS, CHILDREN AND FAMILIES. IN ADDITION, THE ORGANIZATIONS' OUTREACH AND VOLUNTEER PROGRAMS ENGAGED OVER 137 VOLUNTEERS ON 12 VOLUNTEER EVENTS, FIVE COMMUNITY SCIENCE EVENTS, AND

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ )

4e Total program service expenses 1,763,166.

**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	X	
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		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? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>		X
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions		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? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X

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

	Yes	No
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> .....		X
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> .....	X	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i> .....		X
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? .....		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
<b>25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> .....		X
<b>26</b> 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? <i>If "Yes," complete Schedule L, Part II</i> .....		X
<b>27</b> 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? <i>If "Yes," complete Schedule L, Part III</i> .....		X
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i> .....	X	
<b>b</b> A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> .....	X	
<b>c</b> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i> .....		X
<b>29</b> Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> .....	X	
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> .....		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> .....		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> .....		X
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> .....		X
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? .....		X
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		
<b>36 Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> .....		X
<b>37</b> 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? <i>If "Yes," complete Schedule R, Part VI</i> .....		X
<b>38</b> Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? .....	X	

**Note:** All Form 990 filers are required to complete Schedule O

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

	Yes	No
<b>1a</b> Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable .....		
<b>b</b> Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable .....		
<b>c</b> Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? .....	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with 3 main columns: Question, Yes, No. Rows include 2a-2b, 3a-3b, 4a-4b, 5a-5c, 6a-6b, 7a-7h, 8, 9a-9b, 10a-10b, 11a-11b, 12a-12b, 13a-13c, 14a-14b, 15, 16, 17.

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]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 28; 1b Enter the number of voting members included on line 1a... 28; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders... X; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body... X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X; b Each committee with authority to act on behalf of the governing body? X; 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... X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? X; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? X; 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done X; 13 Did the organization have a written whistleblower policy? X; 14 Did the organization have a written document retention and destruction policy? 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? a The organization's CEO, Executive Director, or top management official X; b Other officers or key employees of the organization X; 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 taxable entity during the year? X; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

- 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) available for public inspection. Indicate how you made these available. Check all that apply.
[X] Own website [X] Another's website [X] Upon request [ ] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
REBECCA THORNTON - 845-677-3002
4289 ROUTE 82, MILLBROOK, NY 12545

**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 nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) REBECCA THORNTON PRESIDENT	40.00			X			186,610.	0.	16,031.	
(2) TIMOTHY MAYHEW CHAIRMAN	4.00	X		X			0.	0.	0.	
(3) CHRISTOPHER L. MANN VICE CHAIRMAN	3.00	X		X			0.	0.	0.	
(4) OAKLEIGH THORNE CO-VICE CHAIRMAN	3.00	X		X			0.	0.	0.	
(5) OLIVIA VAN MELLE KAMP SECRETARY	3.00	X		X			0.	0.	0.	
(6) NANCY N. HATHAWAY TREASURER	3.00	X		X			0.	0.	0.	
(7) STEVEN BENARDETE DIRECTOR	2.00	X					0.	0.	0.	
(8) NICK BIENSTOCK DIRECTOR	2.00	X					0.	0.	0.	
(9) TIMOTHY M. BONTECOU DIRECTOR	2.00	X					0.	0.	0.	
(10) HANNAH BUCHAN DIRECTOR	2.00	X					0.	0.	0.	
(11) SARAH LYONS CHASE DIRECTOR	1.00	X					0.	0.	0.	
(12) PETER COON DIRECTOR	1.00	X					0.	0.	0.	
(13) WOLCOTT DUNHAM DIRECTOR	1.00	X					0.	0.	0.	
(14) LESLIE FARHANGI DIRECTOR	2.00	X					0.	0.	0.	
(15) PATRICIA FARMAN-FARMAIAN DIRECTOR	2.00	X					0.	0.	0.	
(16) THOMAS FLEXNER DIRECTOR	1.00	X					0.	0.	0.	
(17) THOMAS W. KEESEE DIRECTOR	1.00	X					0.	0.	0.	

**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) FERNANDA KELLOGG DIRECTOR	1.00	X						0.	0.	0.
(19) BRAD KENDALL DIRECTOR	2.00	X						0.	0.	0.
(20) THOMAS NEWBERRY DIRECTOR	1.00	X						0.	0.	0.
(21) TERRY REGAN DIRECTOR	1.00	X						0.	0.	0.
(22) ERIC W. ROBERTS DIRECTOR	1.00	X						0.	0.	0.
(23) REBECCA SEAMAN DIRECTOR	2.00	X						0.	0.	0.
(24) DAVID R. STACK DIRECTOR	1.00	X						0.	0.	0.
(25) PETER TCHEREPNINE DIRECTOR	1.00	X						0.	0.	0.
(26) LISELOTTE VINCE DIRECTOR	1.00	X						0.	0.	0.
<b>1b Subtotal</b>								186,610.	0.	16,031.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								186,610.	0.	16,031.

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 1

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	X	
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		X

**Section B. Independent Contractors**

**1** Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 0

SEE PART VII, SECTION A CONTINUATION SHEETS





**Part VIII Statement of Revenue**

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

				(A)	(B)	(C)	(D)	
				Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	<b>1 a</b>	Federated campaigns .....	<b>1a</b>					
	<b>b</b>	Membership dues .....	<b>1b</b>					
	<b>c</b>	Fundraising events .....	<b>1c</b>	446,412.				
	<b>d</b>	Related organizations .....	<b>1d</b>					
	<b>e</b>	Government grants (contributions) .....	<b>1e</b>					
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above ...	<b>1f</b>	3,301,649.				
	<b>g</b>	Noncash contributions included in lines 1a-1f	<b>1g</b>	\$ 35,319.				
	<b>h</b>	<b>Total.</b> Add lines 1a-1f .....		3,748,061.				
Program Service Revenue	<b>2 a</b>	_____	<b>Business Code</b>					
	<b>b</b>	_____						
	<b>c</b>	_____						
	<b>d</b>	_____						
	<b>e</b>	_____						
	<b>f</b>	All other program service revenue .....						
	<b>g</b>	<b>Total.</b> Add lines 2a-2f .....						
Other Revenue	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) .....		289,066.			289,066.	
	<b>4</b>	Income from investment of tax-exempt bond proceeds .....						
	<b>5</b>	Royalties .....						
	<b>6 a</b>	Gross rents .....	<b>6a</b>	(i) Real				
				(ii) Personal				
	<b>b</b>	Less: rental expenses ...	<b>6b</b>					
	<b>c</b>	Rental income or (loss)	<b>6c</b>					
	<b>d</b>	Net rental income or (loss) .....						
	<b>7 a</b>	Gross amount from sales of assets other than inventory .....	<b>7a</b>	(i) Securities				
				(ii) Other				
					6,055,270.	725,226.		
	<b>b</b>	Less: cost or other basis and sales expenses .....	<b>7b</b>	5,869,534.	734,200.			
	<b>c</b>	Gain or (loss) .....	<b>7c</b>	185,736.	-8,974.			
<b>d</b>	Net gain or (loss) .....		176,762.	176,762.				
<b>8 a</b>	Gross income from fundraising events (not including \$ 446,412. of contributions reported on line 1c). See Part IV, line 18 .....	<b>8a</b>		53,850.				
				173,120.				
<b>b</b>	Less: direct expenses .....	<b>8b</b>						
<b>c</b>	Net income or (loss) from fundraising events .....		-119,270.			-119,270.		
<b>9 a</b>	Gross income from gaming activities. See Part IV, line 19 .....	<b>9a</b>						
<b>b</b>	Less: direct expenses .....	<b>9b</b>						
<b>c</b>	Net income or (loss) from gaming activities .....							
<b>10 a</b>	Gross sales of inventory, less returns and allowances .....	<b>10a</b>						
<b>b</b>	Less: cost of goods sold .....	<b>10b</b>						
<b>c</b>	Net income or (loss) from sales of inventory .....							
Miscellaneous Revenue	<b>11 a</b>	MISCELLANEOUS	<b>Business Code</b>	561499	29,516.	29,516.		
	<b>b</b>	_____						
	<b>c</b>	_____						
	<b>d</b>	All other revenue .....						
	<b>e</b>	<b>Total.</b> Add lines 11a-11d .....			29,516.			
<b>12</b>	<b>Total revenue.</b> See instructions .....			4,124,135.	206,278.	0.	169,796.	

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>1</b> Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...				
<b>2</b> Grants and other assistance to domestic individuals. See Part IV, line 22 .....				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 .....				
<b>4</b> Benefits paid to or for members .....				
<b>5</b> Compensation of current officers, directors, trustees, and key employees .....	186,610.	160,484.	13,063.	13,063.
<b>6</b> Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
<b>7</b> Other salaries and wages .....	921,221.	715,493.	133,032.	72,696.
<b>8</b> Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	30,018.	23,385.	4,991.	1,642.
<b>9</b> Other employee benefits .....	112,106.	98,284.	10,948.	2,874.
<b>10</b> Payroll taxes .....	80,758.	63,989.	10,930.	5,839.
<b>11</b> Fees for services (nonemployees):				
<b>a</b> Management .....				
<b>b</b> Legal .....	114,755.	92,008.	22,747.	
<b>c</b> Accounting .....	22,838.		22,838.	
<b>d</b> Lobbying .....				
<b>e</b> Professional fundraising services. See Part IV, line 17				
<b>f</b> Investment management fees .....	36,771.		36,771.	
<b>g</b> Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	84,492.	84,492.		
<b>12</b> Advertising and promotion .....	17,701.	1,419.		16,282.
<b>13</b> Office expenses .....	11,507.	9,180.	1,000.	1,327.
<b>14</b> Information technology .....	33,208.	21,795.	8,798.	2,615.
<b>15</b> Royalties .....				
<b>16</b> Occupancy .....	62,566.	36,247.	20,933.	5,386.
<b>17</b> Travel .....	14,099.	9,822.	3,578.	699.
<b>18</b> Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
<b>19</b> Conferences, conventions, and meetings .....	13,060.	13,060.		
<b>20</b> Interest .....				
<b>21</b> Payments to affiliates .....				
<b>22</b> Depreciation, depletion, and amortization .....	53,765.	32,757.	16,169.	4,839.
<b>23</b> Insurance .....	90,951.	69,589.	16,851.	4,511.
<b>24</b> 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.)				
<b>a</b> <b>EQUIPMENT RENTAL, REPAIRS, AND MAINTENANCE</b> .....	119,973.	79,979.	37,076.	2,918.
<b>b</b> <b>PROPERTY TAXES</b> .....	93,508.	84,118.	7,291.	2,099.
<b>c</b> <b>EDUCATION PROGRAMS</b> .....	60,373.	59,978.	395.	
<b>d</b> <b>PURCHASE OF DEVELOPMENT</b> .....	44,747.	44,747.		
<b>e</b> All other expenses .....	96,717.	62,340.	19,373.	15,004.
<b>25</b> <b>Total functional expenses.</b> Add lines 1 through 24e	2,301,744.	1,763,166.	386,784.	151,794.
<b>26</b> <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> 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) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....		<b>1</b>	360,306.
	<b>2</b> Savings and temporary cash investments .....	1,054,317.	<b>2</b>	759,817.
	<b>3</b> Pledges and grants receivable, net .....	72,354.	<b>3</b>	609,078.
	<b>4</b> Accounts receivable, net .....	5,528.	<b>4</b>	1,253.
	<b>5</b> Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons .....		<b>5</b>	
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	29,197.	<b>9</b>	38,510.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 8,604,359.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 581,357.	7,977,644.	<b>10c</b> 8,023,002.
	<b>11</b> Investments - publicly traded securities .....	14,002,928.	<b>11</b>	18,129,590.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....	718,250.	<b>15</b>	3,250.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 33) .....	23,860,218.	<b>16</b>	27,924,806.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	88,391.	<b>17</b>	94,976.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	55,500.	<b>19</b>	167,000.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Loans and other 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 .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....		<b>25</b>	
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....	143,891.	<b>26</b>	261,976.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions .....	13,442,461.	<b>27</b>	15,900,434.
	<b>28</b> Net assets with donor restrictions .....	10,273,866.	<b>28</b>	11,762,396.
	<b>Organizations that do not follow FASB ASC 958, check here</b> <input type="checkbox"/> <b>and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds .....		<b>29</b>	
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>30</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>31</b>	
	<b>32</b> Total net assets or fund balances .....	23,716,327.	<b>32</b>	27,662,830.
	<b>33</b> Total liabilities and net assets/fund balances .....	23,860,218.	<b>33</b>	27,924,806.

**Part XI Reconciliation of Net Assets**

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,124,135.
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,301,744.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,822,391.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	23,716,327.
5	Net unrealized gains (losses) on investments	5	2,091,526.
6	Donated services and use of facilities	6	32,586.
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	27,662,830.

**Part XII Financial Statements and Reporting**

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	Were the organization's financial statements audited by an independent accountant? _____ 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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits _____		



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

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

Section A. Public Support

Table with 7 columns: (a) 2019, (b) 2020, (c) 2021, (d) 2022, (e) 2023, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total. Add lines 1 through 3; 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f); 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2019, (b) 2020, (c) 2021, (d) 2022, (e) 2023, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 9 Net income from unrelated business activities, whether or not the 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; 12 Gross receipts from related activities, etc. (see instructions); 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Line number, Description, and Percentage. Rows include: 14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)); 15 Public support percentage from 2022 Schedule A, Part II, line 14; 16a 33 1/3% support test - 2023; b 33 1/3% support test - 2022; 17a 10% -facts-and-circumstances test - 2023; b 10% -facts-and-circumstances test - 2022; 18 Private foundation.

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	4880168.	2091899.	3967143.	11718797.	3748061.	26406068.
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....	95,025.	225.	41,885.	39,067.	53,850.	230,052.
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....	4975193.	2092124.	4009028.	11757864.	3801911.	26636120.
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....	233,459.	236,614.	371,295.	394,531.	477,183.	1713082.
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						0.
<b>c</b> Add lines 7a and 7b .....	233,459.	236,614.	371,295.	394,531.	477,183.	1713082.
<b>8 Public support.</b> (Subtract line 7c from line 6.)						24923038.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>9</b> Amounts from line 6 .....	4975193.	2092124.	4009028.	11757864.	3801911.	26636120.
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources .....	166,898.	137,003.	168,741.	184,765.	289,066.	946,473.
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....	166,898.	137,003.	168,741.	184,765.	289,066.	946,473.
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on .....	-136,289.					-136,289.
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....	9,429.	14,407.	11,262.	9,314.	29,516.	73,928.
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)	5015231.	2243534.	4189031.	11951943.	4120493.	27520232.

**14 First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)) .....	<b>15</b>	90.56 %
<b>16</b> Public support percentage from 2022 Schedule A, Part III, line 15 .....	<b>16</b>	92.02 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)) .....	<b>17</b>	3.44 %
<b>18</b> Investment income percentage from 2022 Schedule A, Part III, line 17 .....	<b>18</b>	3.10 %

**19a 33 1/3% support tests - 2023.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests - 2022.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions



**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**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
<b>c</b> 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)? <i>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.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>9a</b> 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))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</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? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> 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)? <i>If "Yes," answer line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> 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?		
<b>b</b> A family member of a person described on line 11a above?		
<b>c</b> A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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? <i>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 supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
<b>2</b> Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
<b>1</b>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

	Yes	No
<b>1</b> 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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
<b>1</b>		

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
<b>2</b> 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>3</b> 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
<b>1</b>		
<b>2</b>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
<b>2</b> Activities Test. Answer lines 2a and 2b below.		
<b>a</b> Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
<b>b</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? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
<b>2a</b>		
<b>2b</b>		
<b>3a</b>		
<b>3b</b>		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( *explain in Part VI*). **See instructions.**  
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

<b>Section A - Adjusted Net Income</b>		(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	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

<b>Section B - Minimum Asset Amount</b>		(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):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
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	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

<b>Section C - Distributable Amount</b>			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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	<b>Total annual distributions.</b> Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2023 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2023		
a	From 2018		
b	From 2019		
c	From 2020		
d	From 2021		
e	From 2022		
f	<b>Total</b> of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2023 distributable amount		
i	Carryover from 2018 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2023 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2023 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	<b>Excess distributions carryover to 2024.</b> Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2019		
b	Excess from 2020		
c	Excess from 2021		
d	Excess from 2022		
e	Excess from 2023		

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

SCHEDULE A, PART III, LINE 12, EXPLANATION FOR OTHER INCOME:

MISCELLANEOUS INCOME

2019 AMOUNT: \$ 9,429.

2020 AMOUNT: \$ 14,407.

2021 AMOUNT: \$ 11,262.

2022 AMOUNT: \$ 9,314.

2023 AMOUNT: \$ 29,516.

**Schedule B**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

Attach to Form 990, 990-EZ, or 990-PF.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2023**

Name of the organization

DUTCHESS LAND CONSERVANCY, INC.

Employer identification number

14-1667526

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( 3 ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... \$ \_\_\_\_\_

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

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

Schedule B (Form 990) (2023)

Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**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
1	 <hr/> <hr/> <hr/>	\$ <u>12,200.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	 <hr/> <hr/> <hr/>	\$ <u>5,150.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	 <hr/> <hr/> <hr/>	\$ <u>10,300.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	 <hr/> <hr/> <hr/>	\$ <u>61,300.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	 <hr/> <hr/> <hr/>	\$ <u>10,300.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	 <hr/> <hr/> <hr/>	\$ <u>27,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**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	<hr/> <hr/> <hr/>	\$ <u>10,350.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ <u>10,600.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	<hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	<hr/> <hr/> <hr/>	\$ <u>12,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
12	<hr/> <hr/> <hr/>	\$ <u>5,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**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
13		\$ <u>67,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
14		\$ <u>16,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
15		\$ <u>35,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
16		\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
17		\$ <u>10,700.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
18		\$ <u>11,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**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
19	<hr/> <hr/> <hr/>	\$ 11,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
20	<hr/> <hr/> <hr/>	\$ 11,300.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
21	<hr/> <hr/> <hr/>	\$ 17,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
22	<hr/> <hr/> <hr/>	\$ 17,775.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
23	<hr/> <hr/> <hr/>	\$ 60,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
24	<hr/> <hr/> <hr/>	\$ 17,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**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
25	<hr/> <hr/> <hr/>	\$ 15,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
26	<hr/> <hr/> <hr/>	\$ 30,650.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
27	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
28	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
29	<hr/> <hr/> <hr/>	\$ 11,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
30	<hr/> <hr/> <hr/>	\$ 28,900.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**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
31	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
32	<hr/> <hr/> <hr/>	\$ 14,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
33	<hr/> <hr/> <hr/>	\$ 25,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
34	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
35	<hr/> <hr/> <hr/>	\$ 12,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
36	<hr/> <hr/> <hr/>	\$ 10,800.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**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	<hr/> <hr/> <hr/>	\$ 30,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
38	<hr/> <hr/> <hr/>	\$ 8,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
39	<hr/> <hr/> <hr/>	\$ 10,644.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
40	<hr/> <hr/> <hr/>	\$ 17,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
41	<hr/> <hr/> <hr/>	\$ 15,800.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
42	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**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	<hr/> <hr/> <hr/>	\$ 20,850.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
44	<hr/> <hr/> <hr/>	\$ 5,650.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
45	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
46	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
47	<hr/> <hr/> <hr/>	\$ 13,200.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
48	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**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
49	<hr/> <hr/> <hr/>	\$ <u>7,569.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
50	<hr/> <hr/> <hr/>	\$ <u>13,482.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
51	<hr/> <hr/> <hr/>	\$ <u>300,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
52	<hr/> <hr/> <hr/>	\$ <u>35,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
53	<hr/> <hr/> <hr/>	\$ <u>12,200.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
54	<hr/> <hr/> <hr/>	\$ <u>40,218.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**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
55	_____ _____ _____	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
56	_____ _____ _____	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
57	_____ _____ _____	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
58	_____ _____ _____	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
59	_____ _____ _____	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
60	_____ _____ _____	\$ 35,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**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
61	<hr/> <hr/> <hr/>	\$ <u>13,200.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
62	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
63	<hr/> <hr/> <hr/>	\$ <u>14,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
64	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
65	<hr/> <hr/> <hr/>	\$ <u>10,700.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
66	<hr/> <hr/> <hr/>	\$ <u>9,942.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**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
67	<hr/> <hr/> <hr/>	\$ 11,600.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
68	<hr/> <hr/> <hr/>	\$ 20,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
69	<hr/> <hr/> <hr/>	\$ 55,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
70	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
71	<hr/> <hr/> <hr/>	\$ 26,600.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
72	<hr/> <hr/> <hr/>	\$ 180,750.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**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
73	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
74	<hr/> <hr/> <hr/>	\$ 10,601.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
75	<hr/> <hr/> <hr/>	\$ 5,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
76	<hr/> <hr/> <hr/>	\$ 11,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
77	<hr/> <hr/> <hr/>	\$ 10,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
78	<hr/> <hr/> <hr/>	\$ 23,500.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**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		\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
80		\$ <u>20,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
81		\$ <u>12,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
82		\$ <u>12,491.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
83		\$ <u>5,050.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
84		\$ <u>11,678.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**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
85	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
86	<hr/> <hr/> <hr/>	\$ <u>25,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
87	<hr/> <hr/> <hr/>	\$ <u>5,200.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
88	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
89	<hr/> <hr/> <hr/>	\$ <u>5,150.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
90	<hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**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
91	<hr/> <hr/> <hr/>	\$ <u>6,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
92	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
93	<hr/> <hr/> <hr/>	\$ <u>12,800.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
94	<hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
95	<hr/> <hr/> <hr/>	\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
96	<hr/> <hr/> <hr/>	\$ <u>6,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**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
97	 <hr/> <hr/> <hr/>	\$ <u>10,300.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
98	 <hr/> <hr/> <hr/>	\$ <u>5,200.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
99	 <hr/> <hr/> <hr/>	\$ <u>7,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
100	 <hr/> <hr/> <hr/>	\$ <u>5,300.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
101	 <hr/> <hr/> <hr/>	\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
102	 <hr/> <hr/> <hr/>	\$ <u>5,138.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**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
103		\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
104		\$ <u>10,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
105		\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
106		\$ <u>20,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
107		\$ <u>7,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
108		\$ <u>5,950.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)



Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**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
109	<hr/> <hr/> <hr/>	\$ <u>5,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
110	<hr/> <hr/> <hr/>	\$ <u>21,850.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
111	<hr/> <hr/> <hr/>	\$ <u>10,294.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
112	<hr/> <hr/> <hr/>	\$ <u>9,942.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
113	<hr/> <hr/> <hr/>	\$ <u>15,083.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
111	117 SH MORGAN STANLEY _____ _____ _____	\$ 10,294.	04/17/23
112	98 SH 3M COMPANY _____ _____ _____	\$ 9,942.	12/07/23
113	25 SH ADOBE INC _____ _____ _____	\$ 15,083.	12/19/23
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

Name of organization  <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number  <b>14-1667526</b>
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<b>(e) Transfer of gift</b>			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

**SCHEDULE C**  
**(Form 990)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2023**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

**For Organizations Exempt From Income Tax Under Section 501(c) and Section 527**  
**Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.**  
**Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <b>DUTCHESS LAND CONSERVANCY, INC.</b>	Employer identification number <b>14-1667526</b>
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**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures ..... \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities ..... \_\_\_\_\_

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No
- 4a Was a correction made? .....  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... \$ \_\_\_\_\_
- 4 Did the filing organization file **Form 1120-POL** for this year? .....  Yes  No
- 5 Enter the names, addresses, and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(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-.

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

Schedule C (Form 990) 2023

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A Check  if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check  if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) .....														
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....														
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....														
<b>d</b> Other exempt purpose expenditures .....														
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....														
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 70%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000,</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000,</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000,</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000,</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000,</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	not over \$500,000,	20% of the amount on line 1e.	over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.	over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.	over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.	over \$17,000,000,	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
not over \$500,000,	20% of the amount on line 1e.													
over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.													
over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.													
over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.													
over \$17,000,000,	\$1,000,000.													
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....														
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....														
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....														
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**  
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below.  
 See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
<b>2a</b> Lobbying nontaxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					
<b>c</b> Total lobbying expenditures					
<b>d</b> Grassroots nontaxable amount					
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					
<b>f</b> Grassroots lobbying expenditures					

**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 of the lobbying activity.	(a)		(b)
	Yes	No	Amount
<b>1</b> 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:			
<b>a</b> Volunteers? .....	X		
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..		X	
<b>c</b> Media advertisements? .....		X	
<b>d</b> Mailings to members, legislators, or the public? .....		X	
<b>e</b> Publications, or published or broadcast statements? .....		X	
<b>f</b> Grants to other organizations for lobbying purposes? .....		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....		X	
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....		X	
<b>i</b> Other activities? .....	X		
<b>j</b> Total. Add lines 1c through 1i .....			0.
<b>2a</b> Did the activities in line 1 cause the organization to not be described in section 501(c)(3)? .....		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	1	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	2	
<b>3</b> Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? .....	3	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b> Dues, assessments and similar amounts from members .....	1
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
<b>a</b> Current year .....	2a
<b>b</b> Carryover from last year .....	2b
<b>c</b> Total .....	2c
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	3
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? .....	4
<b>5</b> 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 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

**PART II-B, LINE 1, LOBBYING ACTIVITIES:**

THE ORGANIZATION PARTICIPATES IN MINIMAL LOBBYING ACTIVITIES CONSISTING OF MAILINGS TO LEGISLATORS, ATTENDANCE AT LAND TRUST ALLIANCE/AMERICAN FARMLAND TRUST/FRIENDS OF NEW YORK ENVIRONMENT/ORGANIZED LOBBY DAYS, LTA ADVOCACY DAYS IN WASHINGTON DC, MEETINGS WITH REPRESENTATIVES TO EDUCATE THEM ABOUT THE ORGANIZATION'S WORK AND PARTICIPATION IN PRESS

**Part IV** Supplemental Information *(continued)*

CONFERENCES CONCERNING STATE GRANTS. OTHER EXPENSES CONSIST OF MILEAGE  
AND OTHER REIMBURSABLES TO THOSE WHO ATTEND THESE MEETINGS AND  
CONFERENCES. THE ORGANIZATION WORKS TO ENSURE COMPLIANCE WITH ALL NEW  
YORK STATE AND FEDERAL LOBBYING LIMITS.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization: DUTCHESS LAND CONSERVANCY, INC. Employer identification number: 14-1667526

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? (Yes/No), 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? (Yes/No)

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply): [X] Preservation of land for public use, [X] Protection of natural habitat, [X] Preservation of open space, [ ] Preservation of a historically important land area, [ ] Preservation of a certified historic structure. 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Table: Held at the End of the Tax Year. 2a Total number of conservation easements: 443. 2b Total acreage restricted by conservation easements: 45,067.04. 2c Number of conservation easements on a certified historic structure included on line 2a. 2d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register. 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year: 6. 4 Number of states where property subject to conservation easement is located: 1. 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? [X] Yes, [ ] No. 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year: 6620. 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year: 289,135. 8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? [X] Yes, [ ] No. 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items. (i) Revenue included on Form 990, Part VIII, line 1. (ii) Assets included in Form 990, Part X. 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1. b Assets included in Form 990, Part X.



**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange program
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

**Part V Endowment Funds** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	12,553,293.	13,981,881.	10,776,207.	5,440,362.	4,468,642.
b Contributions	1,506,896.	1,085,766.	1,139,994.	4,269,880.	50,560.
c Net investment earnings, gains, and losses	2,514,108.	-2,514,354.	2,065,680.	1,240,965.	1,086,160.
d Grants or scholarships					
e Other expenditures for facilities and programs				175,000.	165,000.
f Administrative expenses					
g End of year balance	16,574,295.	12,553,293.	13,981,881.	10,776,207.	5,440,362.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 81.0000 %
  - b Permanent endowment 19.0000 %
  - c Term endowment \_\_\_\_\_ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes | No |
|---|-----|----|
| (i) Unrelated organizations?  | X   |    |
| (ii) Related organizations?   |     | X  |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> |     |    |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment** Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		7,203,350.		7,203,350.
b Buildings		675,172.	38,621.	636,551.
c Leasehold improvements		394,888.	394,888.	0.
d Equipment		330,949.	147,848.	183,101.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				8,023,002.

**Part VII Investments - Other Securities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives .....		
(2) Closely held equity interests .....		
(3) Other .....		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, line 12, col. (B))		

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on 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 market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
<b>Total.</b> (Col. (b) must equal Form 990, Part X, line 13, col. (B))		

**Part IX Other Assets**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, line 15, col. (B))	

**Part X Other Liabilities**

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

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

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

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements	<b>1</b>	6,211,476.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
<b>a</b>	Net unrealized gains (losses) on investments	<b>2a</b>	2,091,526.
<b>b</b>	Donated services and use of facilities	<b>2b</b>	32,586.
<b>c</b>	Recoveries of prior year grants	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	2,124,112.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	4,087,364.
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	36,771.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	36,771.
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.)	<b>5</b>	4,124,135.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total expenses and losses per audited financial statements	<b>1</b>	2,264,973.
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
<b>a</b>	Donated services and use of facilities	<b>2a</b>	
<b>b</b>	Prior year adjustments	<b>2b</b>	
<b>c</b>	Other losses	<b>2c</b>	
<b>d</b>	Other (Describe in Part XIII.)	<b>2d</b>	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b>	<b>2e</b>	0.
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b>	<b>3</b>	2,264,973.
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b	<b>4a</b>	36,771.
<b>b</b>	Other (Describe in Part XIII.)	<b>4b</b>	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b>	<b>4c</b>	36,771.
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.)	<b>5</b>	2,301,744.

**Part XIII Supplemental Information**

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

**PART II, LINE 3:**

EASEMENT: FLOURNOY 264.14-ACRE PROPERTY; LANDOWNER: DRAGONFLY FARM LLC, DEBORAH D. FLEXNER, MANAGER/SOLE MEMBER; CONSERVATION EASEMENT CORRECTIVE AMENDMENT: RECORDED AT THE OFFICE OF THE DUTCHESS COUNTY CLERK AT DOCUMENT NO. 02-2023-3207 ON 10/12/2023; ORIGINAL EASEMENT: ORIGINAL GRANTOR WAS HANNAH S. FLOURNOY. EASEMENT WAS RECORDED IN THE OFFICE OF THE DUTCHESS COUNTY CLERK ON DECEMBER 12, 2001 AT DOCUMENT NO. 02-2001-10664;

MODIFICATIONS: (1) MODIFIES SECTION 4.4 (C) TO CLARIFY THAT AN INDOOR RIDING ARENA MAY BE CONSTRUCTED AS AN AGRICULTURAL STRUCTURE, SUBJECT TO THE EASEMENT'S LOCATION REQUIREMENTS AND THE OVERALL CAP ON AGRICULTURAL STRUCTURES STATED IN SECTION 4.4(C), WHICH HAS BEEN DETERMINED TO BE

**Part XIII** Supplemental Information (continued)

57,094 SQUARE FEET.

(2) MODIFIES SECTION 4.4 (D) TO CLARIFY THAT THE 3,000 SQUARE FOOT LIMIT FOR THE FLOOR AREA OF ACCESSORY STRUCTURES AS STATED IN SECTION 4.4(D) DOES NOT APPLY TO UNENCLOSED OUTDOOR FACILITIES, INCLUDING BUT NOT LIMITED TO SWIMMING POOLS, AND TO FURTHER CLARIFY THAT ATTACHED GARAGES DO NOT COUNT TOWARD THE FLOOR AREA OF A RESIDENCE.

(3) MODIFIES SECTION 4.4 (H) TO CLARIFY THAT DETACHED GARAGES DO COUNT TOWARD THE 3,000 SQUARE FOOT AGGREGATE LIMIT ON ACCESSORY STRUCTURES.

REASONS FOR AMENDMENT: TO CLARIFY THE APPLICATION OF THE BELOW RESTRICTIONS IN ORDER TO FACILITATE THE INTERPRETATION AND ADMINISTRATION OF THE CONSERVATION EASEMENT BASED ON THE CONSERVANCY'S UNDERSTANDING OF THE INTENT OF THE ORIGINAL EASEMENT.

COMMENTS: THIS CORRECTIVE AMENDMENT COMPLIES WITH THE CONSERVANCY'S EASEMENT AMENDMENT POLICY, IS CONSISTENT WITH THE CONSERVATION PURPOSES OF THE ORIGINAL EASEMENT, DOES NOT INCREASE ANY RIGHTS HELD BY THE LANDOWNER, DOES NOT REDUCE THE AMOUNT OF LAND PROTECTED BY THE EASEMENT, CONFERS NO PRIVATE BENEFIT ON THE LANDOWNER, AND IS CONSISTENT WITH THE PURPOSES OF SECTION 170(H) OF THE INTERNAL REVENUE CODE AND APPLICABLE IRS REGULATIONS.

EASEMENT: DIAMOND TRAIL 34.23-ACRE PROPERTY; LANDOWNER: DIAMOND TRAIL LLC; CONSERVATION EASEMENT CORRECTIVE AMENDMENT: RECORDED AT THE OFFICE OF THE DUTCHESS COUNTY CLERK AT DOCUMENT NO. 02-2023-2221 ON 7/21/2023; ORIGINAL EASEMENT: ORIGINAL GRANTOR WAS DIAMOND TRAIL LLC. EASEMENT WAS RECORDED IN THE OFFICE OF THE DUTCHESS COUNTY CLERK ON DECEMBER 28, 2020 AT DOCUMENT NO. 02-2020-5402;

MODIFICATIONS: (1) PURSUANT TO IRS NOTICE 2023-30, SECTION 6.22 IS MODIFIED TO ELIMINATE THE AUTHORIZATION OF LOT LINE ADJUSTMENTS.

(2) PURSUANT TO IRS NOTICE 2023-30, A NEW SECTION 6.23 IS ADDED, STATING

**Part XIII** Supplemental Information (continued)

THAT BOUNDARY LINE ADJUSTMENTS MAY ONLY BE MADE PURSUANT TO A JUDICIAL PROCEEDING TO RESOLVE A BONA FIDE DISPUTE REGARDING A BOUNDARY LINE'S LOCATION.

(3) PURSUANT TO IRS NOTICE 2023-30, SECTIONS 13.5(A) JUDICIAL PROCEEDING AND USE OF PROCEEDS AND 13.5(B) DETERMINATION OF PROCEEDS ARE EACH DELETED, AND REPLACED BY NEW SECTIONS 13.5(A) AND 13.5(B) COMPLIANT WITH "SAFE HARBOR DEED LANGUAGE."

(4) SECTION 8.9 AND SECTION 11.5 ARE MODIFIED, AND SECTION 13.5(C) IS DELETED, IN ORDER TO ELIMINATE POSSIBLE CONFLICT WITH THE REQUIREMENTS OF IRS NOTICE 2023-30.

REASONS FOR AMENDMENT: THE SOLE PURPOSE OF THIS CORRECTIVE AMENDMENT IS TO CORRECT CERTAIN SECTIONS OF THE ORIGINAL EASEMENT PURSUANT TO THE "SAFE HARBOR DEED LANGUAGE" ISSUED BY THE INTERNAL REVENUE SERVICE IN NOTICE 2023-30, WHICH PROVIDES FOR RETROACTIVE AMENDMENTS TO A CONSERVATION EASEMENT TO ENABLE IT TO COMPLY WITH IRS REGULATIONS RELATING TO EXTINGUISHMENT AND BOUNDARY LINE ADJUSTMENT CLAUSES. THIS AMENDMENT DOES NOT CHANGE ANY OTHER PROVISIONS IN THE ORIGINAL EASEMENT. AS PROVIDED IN NOTICE 2023-30, THIS CORRECTIVE AMENDMENT IS EFFECTIVE AS OF THE DATE OF RECORDING OF THE ORIGINAL EASEMENT.

COMMENTS: THIS CORRECTIVE AMENDMENT COMPLIES WITH THE CONSERVANCY'S EASEMENT AMENDMENT POLICY, IS CONSISTENT WITH THE CONSERVATION PURPOSES OF THE ORIGINAL EASEMENT, DOES NOT INCREASE ANY RIGHTS HELD BY THE LANDOWNER, DOES NOT REDUCE THE AMOUNT OF LAND PROTECTED BY THE EASEMENT, CONFERS NO PRIVATE BENEFIT ON THE LANDOWNER, AND IS CONSISTENT WITH THE PURPOSES OF SECTION 170(H) OF THE INTERNAL REVENUE CODE AND APPLICABLE IRS REGULATIONS.

EASEMENT: EAST HEARTLAND CORP 171.53 ACRE PROPERTY; LANDOWNERS: EAST HEARTLAND CORP; CONSERVATION EASEMENT CORRECTIVE AMENDMENT: RECORDED AT

**Part XIII** Supplemental Information (continued)

THE OFFICE OF THE COLUMBIA COUNTY CLERK AT BOOK 982 PAGE 1783 ON 7/7/2023  
AND RE-FILED ON 7/24/2023 AT BOOK 983 PAGE 1194 TO CORRECT A SCRIVENER'S  
ERROR; ORIGINAL EASEMENT: ORIGINAL GRANTOR WAS EAST HEARTLAND CORP.

EASEMENT WAS RECORDED IN THE OFFICE OF THE COLUMBIA COUNTY CLERK ON  
DECEMBER 24, 2019 AT BOOK 896 PAGE 2269;

MODIFICATIONS: (1) PURSUANT TO IRS NOTICE 2023-30, SECTION 6.21 IS  
MODIFIED TO ELIMINATE THE AUTHORIZATION OF LOT LINE ADJUSTMENTS.

(2) PURSUANT TO IRS NOTICE 2023-30, A NEW SECTION 6.22 IS ADDED, STATING  
THAT BOUNDARY LINE ADJUSTMENTS MAY ONLY BE MADE PURSUANT TO A JUDICIAL  
PROCEEDING TO RESOLVE A BONA FIDE DISPUTE REGARDING A BOUNDARY LINE'S  
LOCATION.

(3) PURSUANT TO IRS NOTICE 2023-30, SECTIONS 13.5(A) JUDICIAL PROCEEDING  
AND USE OF PROCEEDS AND 13.5(B) DETERMINATION OF PROCEEDS ARE EACH  
DELETED, AND REPLACED BY NEW SECTIONS 13.5(A) AND 13.5(B) COMPLIANT WITH  
"SAFE HARBOR DEED LANGUAGE."

(4) SECTION 8.9 AND SECTION 11.5 ARE MODIFIED, AND SECTION 13.5(C) IS  
DELETED, IN ORDER TO ELIMINATE POSSIBLE CONFLICT WITH THE REQUIREMENTS OF  
IRS NOTICE 2023-30.

REASONS FOR AMENDMENT: THE SOLE PURPOSE OF THIS CORRECTIVE AMENDMENT IS  
TO CORRECT CERTAIN SECTIONS OF THE ORIGINAL EASEMENT PURSUANT TO THE  
"SAFE HARBOR DEED LANGUAGE" ISSUED BY THE INTERNAL REVENUE SERVICE IN  
NOTICE 2023-30, WHICH PROVIDES FOR RETROACTIVE AMENDMENTS TO A  
CONSERVATION EASEMENT TO ENABLE IT TO COMPLY WITH IRS REGULATIONS  
RELATING TO EXTINGUISHMENT AND BOUNDARY LINE ADJUSTMENT CLAUSES. THIS  
AMENDMENT DOES NOT CHANGE ANY OTHER PROVISIONS IN THE ORIGINAL EASEMENT.  
AS PROVIDED IN NOTICE 2023-30, THIS CORRECTIVE AMENDMENT IS EFFECTIVE AS  
OF THE DATE OF RECORDING OF THE ORIGINAL EASEMENT.

COMMENTS: THIS CORRECTIVE AMENDMENT COMPLIES WITH THE CONSERVANCY'S

**Part XIII** Supplemental Information (continued)

EASEMENT AMENDMENT POLICY, IS CONSISTENT WITH THE CONSERVATION PURPOSES OF THE ORIGINAL EASEMENT, DOES NOT INCREASE ANY RIGHTS HELD BY THE LANDOWNER, DOES NOT REDUCE THE AMOUNT OF LAND PROTECTED BY THE EASEMENT, CONFERS NO PRIVATE BENEFIT ON THE LANDOWNER, AND IS CONSISTENT WITH THE PURPOSES OF SECTION 170(H) OF THE INTERNAL REVENUE CODE AND APPLICABLE IRS REGULATIONS.

EASEMENT: JACOFF 43.07-ACRE PROPERTY; LANDOWNER: MICHAEL JACOFF; CONSERVATION EASEMENT CORRECTIVE AMENDMENT: RECORDED AT THE OFFICE OF THE DUTCHESS COUNTY CLERK AT DOCUMENT NO. 02-2023-2134 ON 7/14/2023 AND RE-FILED ON 7/24/2023 AT DOCUMENT NUMBER 02-2023-2228 TO CORRECT A SCRIVENER'S ERROR; ORIGINAL EASEMENT: ORIGINAL GRANTOR WAS MICHAEL JACOFF. EASEMENT WAS RECORDED IN THE OFFICE OF THE DUTCHESS COUNTY CLERK ON DECEMBER 10, 2015 AT DOCUMENT NO. 02-2015-8207;

MODIFICATIONS: (1) PURSUANT TO IRS NOTICE 2023-30, SECTION 6.21 IS MODIFIED TO ELIMINATE THE AUTHORIZATION OF LOT LINE ADJUSTMENTS.

(2) PURSUANT TO IRS NOTICE 2023-30, A NEW SECTION 6.22 IS ADDED, STATING THAT BOUNDARY LINE ADJUSTMENTS MAY ONLY BE MADE PURSUANT TO A JUDICIAL PROCEEDING TO RESOLVE A BONA FIDE DISPUTE REGARDING A BOUNDARY LINE'S LOCATION.

(3) PURSUANT TO IRS NOTICE 2023-30, SECTIONS 13.5(A) JUDICIAL PROCEEDING AND USE OF PROCEEDS AND 13.5(B) DETERMINATION OF PROCEEDS ARE EACH DELETED, AND REPLACED BY NEW SECTIONS 13.5(A) AND 13.5(B) COMPLIANT WITH "SAFE HARBOR DEED LANGUAGE."

(4) SECTION 8.9 AND SECTION 11.5 ARE MODIFIED, AND SECTION 13.5(C) IS DELETED, IN ORDER TO ELIMINATE POSSIBLE CONFLICT WITH THE REQUIREMENTS OF IRS NOTICE 2023-30.

REASONS FOR AMENDMENT: THE SOLE PURPOSE OF THIS CORRECTIVE AMENDMENT IS TO CORRECT CERTAIN SECTIONS OF THE ORIGINAL EASEMENT PURSUANT TO THE

**Part XIII** Supplemental Information *(continued)*

"SAFE HARBOR DEED LANGUAGE" ISSUED BY THE INTERNAL REVENUE SERVICE IN NOTICE 2023-30, WHICH PROVIDES FOR RETROACTIVE AMENDMENTS TO A CONSERVATION EASEMENT TO ENABLE IT TO COMPLY WITH IRS REGULATIONS RELATING TO EXTINGUISHMENT AND BOUNDARY LINE ADJUSTMENT CLAUSES. THIS AMENDMENT DOES NOT CHANGE ANY OTHER PROVISIONS IN THE ORIGINAL EASEMENT. AS PROVIDED IN NOTICE 2023-30, THIS CORRECTIVE AMENDMENT IS EFFECTIVE AS OF THE DATE OF RECORDING OF THE ORIGINAL EASEMENT.

COMMENTS: THIS CORRECTIVE AMENDMENT COMPLIES WITH THE CONSERVANCY'S EASEMENT AMENDMENT POLICY, IS CONSISTENT WITH THE CONSERVATION PURPOSES OF THE ORIGINAL EASEMENT, DOES NOT INCREASE ANY RIGHTS HELD BY THE LANDOWNER, DOES NOT REDUCE THE AMOUNT OF LAND PROTECTED BY THE EASEMENT, CONFERS NO PRIVATE BENEFIT ON THE LANDOWNER, AND IS CONSISTENT WITH THE PURPOSES OF SECTION 170(H) OF THE INTERNAL REVENUE CODE AND APPLICABLE IRS REGULATIONS.

SEE CONTINUED EXPLANATIONS ON SCHEDULE O.

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.



**Part XIII** Supplemental Information (continued)

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, 2023 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 \$3,098,596 AT DECEMBER 31, 2023. THE DONOR RESTRICTED LAND PROTECTION FUND CONSISTS OF FUNDS FOR EASEMENT STEWARDSHIP, ENFORCEMENT, PRO-ACTIVE PROJECTS AND OTHER USES. NET ASSETS

**Part XIII** Supplemental Information (continued)

WITHOUT DONOR RESTRICTIONS AS OF DECEMBER 31, 2023 CONSIST OF SIX BOARD DESIGNATED CATEGORIES. THE BOARD DESIGNATED AMOUNTS ARE FOR THE FOLLOWING PURPOSES: STEWARDSHIP FUND \$3,845,558; LAND PROTECTION FUND \$6,571,501; LAND EASEMENT ACQUISITION FUND \$437,095; RESERVE FUND \$725,980; PERKINS FUND \$1,040,739; AND BONTECOU PRESERVE FUND \$729,827 FOR TOTAL BOARD DESIGNATED NET ASSETS OF \$13,350,700.

PART X, LINE 2:

THE ORGANIZATION HAS EVALUATED ANY UNCERTAIN TAX POSITIONS AND RELATED INCOME TAX CONTINGENCIES AND DETERMINED UNCERTAIN POSITIONS, IF ANY, ARE NOT MATERIAL TO THE FINANCIAL STATEMENTS, ACCORDING TO FASB ASC 740-10. PENALTIES AND INTEREST ASSESSED BY INCOME TAXING AUTHORITIES ARE INCLUDED IN OPERATING EXPENSES, IF INCURRED. NONE OF THE ORGANIZATION'S RETURNS ARE CURRENTLY UNDER EXAMINATION.



**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 (add col. (a) through col. (c))
		SPRING EVENT (event type)	FALL EVENT (event type)	NONE (total number)	
Revenue	1	244,787.	255,475.		500,262.
	2	206,637.	239,775.		446,412.
	3	38,150.	15,700.		53,850.
Direct Expenses	4				
	5				
	6	33,123.	17,835.		50,958.
	7	51,417.	27,686.		79,103.
	8	4,904.			4,904.
	9	22,727.	15,428.		38,155.
	10	Direct expense summary. Add lines 4 through 9 in column (d)			
11	Net income summary. Subtract line 10 from line 3, column (d)				-119,270.

**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.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1			
Direct Expenses	2				
	3				
	4				
	5				
	6	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
7	Direct expense summary. Add lines 2 through 5 in column (d)				
8	Net gaming income summary. Subtract line 7 from line 1, column (d)				

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?  Yes  No

b If "No," explain: \_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year?  Yes  No

b If "Yes," explain: \_\_\_\_\_





**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees  
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.  
Attach to Form 990.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2023**

Open to Public  
Inspection

Name of the organization

**DUTCHESS LAND CONSERVANCY, INC.**

Employer identification number

**14-1667526**

**Part I Questions Regarding Compensation**

**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.

- |  |  |
|--|--|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use   |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence   |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees     |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

**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 .....

**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? .....

**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.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee          | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant        | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> 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:

- a** Receive a severance payment or change-of-control payment? .....
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? .....
- c** Participate in or receive payment from an equity-based compensation arrangement? .....
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? .....
- b** Any related organization? .....
- 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:

- a** The organization? .....
- b** Any related organization? .....
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III .....

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III .....

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? .....

	Yes	No
<b>1a</b>		
<b>1b</b>		
<b>2</b>		
<b>3</b>		
<b>4a</b>		<b>X</b>
<b>4b</b>		<b>X</b>
<b>4c</b>		<b>X</b>
<b>5a</b>		<b>X</b>
<b>5b</b>		<b>X</b>
<b>6a</b>		<b>X</b>
<b>6b</b>		<b>X</b>
<b>7</b>		<b>X</b>
<b>8</b>		<b>X</b>
<b>9</b>		

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

Schedule J (Form 990) 2023

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) REBECCA THORNTON PRESIDENT	(i)	186,610.	0.	0.	5,790.	10,241.	202,641.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							





**SCHEDULE L**  
**(Form 990)**

**Transactions With Interested Persons**

OMB No. 1545-0047

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.

**2023**

Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization **DUTCHESS LAND CONSERVANCY, INC.** Employer identification number **14-1667526**

**Part I Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ..... \$ \_\_\_\_\_

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ..... \$ \_\_\_\_\_

**Part II Loans to and/or From Interested Persons**

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
			(1)									
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
<b>Total</b> .....						\$						

**Part III Grants or Assistance Benefiting Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

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

Schedule L (Form 990) 2023

**Part IV Business Transactions Involving Interested Persons**

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) OAKLEIGH THORNE AS CO-EX	DIRECTOR	0.	LEASES OFFI		X
(2) DEBORAH FLEXNER	SPOUSE OF DIRECTOR	0.	CONSERVATIO		X
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

**Part V Supplemental Information**

Provide additional information for responses to questions on Schedule L. See instructions.

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:

(A) NAME OF PERSON: OAKLEIGH THORNE AS CO-EXECUTOR

(D) DESCRIPTION OF TRANSACTION: LEASES OFFICE FOR \$1 PER YEAR

(A) NAME OF PERSON: DEBORAH FLEXNER

(D) DESCRIPTION OF TRANSACTION: CONSERVATION EASEMENT CORRECTIVE

AMENDMENT

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2023**

Open to Public Inspection

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

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Department of the Treasury  
Internal Revenue Service

Name of the organization **DUTCHESS LAND CONSERVANCY, INC.** Employer identification number **14-1667526**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	3	35,319.	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other	X	8	0.	FMV
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ( )				
26 Other ( )				
27 Other ( )				
28 Other ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 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? **X**

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? **X**

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? **X**

b If "Yes," describe in Part II.

33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

	Yes	No
30a		X
31		X
32a		X

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

Schedule M (Form 990) 2023



**SCHEDULE O  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
Attach to Form 990 or Form 990-EZ.  
Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2023**

Open to Public  
Inspection

Name of the organization

DUTCHESS LAND CONSERVANCY, INC.

Employer identification number

14-1667526

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

(CONTINUED) DUTCHESS COUNTY, NEW YORK, AND THE SURROUNDING AREA.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

OBTAINING CONSERVATION EASEMENTS ON PRIVATELY HELD LAND AND MONITORING THESE EASEMENTS IN PERPETUITY. CONSERVATION EASEMENTS, ACQUIRED THROUGH EITHER DONATION OR PURCHASE, ARE LEGAL AGREEMENTS LIMITING FUTURE DEVELOPMENT IN ORDER TO PROTECT LAND FOR CONSERVATION PURPOSES. 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 ACCREDITATION 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) LAND FOR PASSIVE PUBLIC USE. THE DLC CONTINUES ITS WORK WITH THE TOWN OF DOVER ON THE DOVER STONE CHURCH AND SEVEN WELLS PROPERTIES.

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

(STEWARDSHIP) BASELINE DOCUMENTATION FILES. STAFF STRIVE TO KEEP UP TO DATE ON INTERNET SERVICES SUCH AS MICROSOFT'S MAPSLIVE.COM, GOOGLE EARTH, AND BING, WHICH PROVIDE VERY USEFUL ADDITIONAL SOURCES OF AERIAL PHOTOGRAPHY AND USE SATELLITE IMAGERY AS A MONITORING TOOL. THE

Name of the organization DUTCHESS LAND CONSERVANCY, INC.	Employer identification number 14-1667526
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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 THE COLUMBIA LAND CONSERVANCY (CLC) AND THE AMERICAN FARMLAND TRUST'S FARMLAND FOR NEW GENERATION PROGRAM ON A 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) SEVEN COMMUNITY OUTREACH EVENTS TO IMPROVE PUBLIC SPACES IN THEIR COMMUNITIES AND IN COMMUNITY SERVICE INITIATIVES. STAFF AND BOARD MEMBERS ALSO PARTICIPATED IN AND ATTENDED NUMEROUS VIRTUAL EDUCATION EVENTS 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 AND BOARDS (NATIONAL, 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 THE NATIONAL LAND TRUST ACCREDITATION COMMISSION.

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

COMPOSITION OF THE EXECUTIVE COMMITTEE: THE EXECUTIVE COMMITTEE IS COMPOSED OF ELEVEN MEMBERS OF THE ORGANIZATION'S BOARD OF DIRECTORS (CAN BE ANYWHERE FROM 4 TO 12 MEMBERS AND MUST BE BOARD MEMBERS PER THE ORGANIZATION'S BY LAWS). THIS COMMITTEE MEETS MONTHLY AND OVERSEES THE DAY TO DAY OPERATIONS OF THE ORGANIZATION AND MANAGES BOARD ISSUES BETWEEN BOARD MEETINGS AS 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. THE 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)



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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

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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 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).

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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 THE FOLLOWING AGENDA ITEM NUMBER ONE FOR ALL BOARD OF DIRECTOR AND EXECUTIVE COMMITTEE MEETINGS: 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.

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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

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DELIBERATIONS AND DECISIONS REGARDING THE COMPENSATION ARRANGEMENT: THE COMPENSATION COMMITTEE, EXECUTIVE COMMITTEE, AND BOARD DELIBERATIONS ARE HELD IN EXECUTIVE SESSION. THE PRESIDENT PARTICIPATES IN DISCUSSION OF ALL STAFF EXCEPT HERSELF, AT WHICH TIME SHE LEAVES THE ROOM. THE PRESIDENT IS IN CHARGE OF KEEPING THE RECORDS OF STAFF COMPENSATION AND DECISIONS BY THE COMPENSATION COMMITTEE, EXECUTIVE COMMITTEE AND BOARD. THE CHAIRMAN OF THE COMPENSATION COMMITTEE IS IN CHARGE OF KEEPING THE RECORDS OF THE PRESIDENT'S AND KEY EMPLOYEE'S COMPENSATION AND DECISIONS BY THE COMPENSATION COMMITTEE, EXECUTIVE COMMITTEE, AND BOARD MEETINGS DURING EXECUTIVE SESSIONS WHEN THE PRESIDENT AND KEY EMPLOYEES ARE RECUSED FROM DELIBERATIONS AND VOTING ON HIS/HER COMPENSATION. THE RESPECTIVE MINUTES OF THESE MEETINGS ARE REVIEWED AND APPROVED BY THE COMPENSATION COMMITTEE, EXECUTIVE COMMITTEE, AND THE BOARD.

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 DIRECT GUIDESTAR/CANDID LINK. IT MAKES THESE AS WELL AS OTHER GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC BY REQUEST.

SCHEDULE D PART II LINE 3 (CONTINUED):

EASEMENT: REESE 41.997-ACRE PROPERTY; LANDOWNER: ALEXANDER S. REESE AND OBERCREEK DEVELOPMENT LLC; CONSERVATION EASEMENT CORRECTIVE AMENDMENT: RECORDED AT THE OFFICE OF THE DUTCHESS COUNTY CLERK AT DOCUMENT NO. 02-2023-2222 ON 7/21/2023; ORIGINAL EASEMENT: ORIGINAL GRANTORS WERE

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ALEXANDER S. REESE AND OBERCREEK DEVELOPMENT LLC. EASEMENT WAS  
RECORDED IN THE OFFICE OF THE DUTCHESS COUNTY CLERK ON DECEMBER 13,  
2021 AT DOCUMENT NO. 02-2021-5647;

MODIFICATIONS: (1) PURSUANT TO IRS NOTICE 2023-30, SECTION 6.19 IS  
MODIFIED TO ELIMINATE THE AUTHORIZATION OF LOT LINE ADJUSTMENTS.

(2) PURSUANT TO IRS NOTICE 2023-30, A NEW SECTION 6.20 IS ADDED,  
STATING THAT BOUNDARY LINE ADJUSTMENTS MAY ONLY BE MADE PURSUANT TO A  
JUDICIAL PROCEEDING TO RESOLVE A BONA FIDE DISPUTE REGARDING A BOUNDARY  
LINE'S LOCATION.

(3) PURSUANT TO IRS NOTICE 2023-30, SECTIONS 13.5(A) JUDICIAL  
PROCEEDING AND USE OF PROCEEDS AND 13.5(B) DETERMINATION OF PROCEEDS  
ARE EACH DELETED, AND REPLACED BY NEW SECTIONS 13.5(A) AND 13.5(B)  
COMPLIANT WITH "SAFE HARBOR DEED LANGUAGE."

(4) SECTION 8.9 AND SECTION 11.5 ARE MODIFIED, AND SECTION 13.5(C) IS  
DELETED, IN ORDER TO ELIMINATE POSSIBLE CONFLICT WITH THE REQUIREMENTS  
OF IRS NOTICE 2023-30.

REASONS FOR AMENDMENT: THE SOLE PURPOSE OF THIS CORRECTIVE AMENDMENT IS  
TO CORRECT CERTAIN SECTIONS OF THE ORIGINAL EASEMENT PURSUANT TO THE  
"SAFE HARBOR DEED LANGUAGE" ISSUED BY THE INTERNAL REVENUE SERVICE IN  
NOTICE 2023-30, WHICH PROVIDES FOR RETROACTIVE AMENDMENTS TO A  
CONSERVATION EASEMENT TO ENABLE IT TO COMPLY WITH IRS REGULATIONS  
RELATING TO EXTINGUISHMENT AND BOUNDARY LINE ADJUSTMENT CLAUSES. THIS  
AMENDMENT DOES NOT CHANGE ANY OTHER PROVISIONS IN THE ORIGINAL  
EASEMENT. AS PROVIDED IN NOTICE 2023-30, THIS CORRECTIVE AMENDMENT IS  
EFFECTIVE AS OF THE DATE OF RECORDING OF THE ORIGINAL EASEMENT.

COMMENTS: THIS CORRECTIVE AMENDMENT COMPLIES WITH THE CONSERVANCY'S  
EASEMENT AMENDMENT POLICY, IS CONSISTENT WITH THE CONSERVATION PURPOSES  
OF THE ORIGINAL EASEMENT, DOES NOT INCREASE ANY RIGHTS HELD BY THE

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LANDOWNER, DOES NOT REDUCE THE AMOUNT OF LAND PROTECTED BY THE EASEMENT, CONFERS NO PRIVATE BENEFIT ON THE LANDOWNER, AND IS CONSISTENT WITH THE PURPOSES OF SECTION 170(H) OF THE INTERNAL REVENUE CODE AND APPLICABLE IRS REGULATIONS.

EASEMENT: LEAHY 47.803-ACRE PROPERTY; LANDOWNERS: THOMAS J. LEAHY AND DEVON D. LEAHY; CONSERVATION EASEMENT CORRECTIVE AMENDMENT: RECORDED AT THE OFFICE OF THE DUTCHESS COUNTY CLERK AT DOCUMENT NO. 02-2023-2229 ON 7/24/2023; ORIGINAL EASEMENT: ORIGINAL GRANTORS WERE THOMAS J. LEAHY AND DEVON D. LEAHY. EASEMENT WAS RECORDED IN THE OFFICE OF THE DUTCHESS COUNTY CLERK ON DECEMBER 22, 2021 AT DOCUMENT NO. 02-2021-5799;

MODIFICATIONS: (1) PURSUANT TO IRS NOTICE 2023-30, SECTION 6.21 IS MODIFIED TO ELIMINATE THE AUTHORIZATION OF LOT LINE ADJUSTMENTS.

(2) PURSUANT TO IRS NOTICE 2023-30, A NEW SECTION 6.22 IS ADDED, STATING THAT BOUNDARY LINE ADJUSTMENTS MAY ONLY BE MADE PURSUANT TO A JUDICIAL PROCEEDING TO RESOLVE A BONA FIDE DISPUTE REGARDING A BOUNDARY LINE'S LOCATION.

(3) PURSUANT TO IRS NOTICE 2023-30, SECTIONS 13.5(A) JUDICIAL PROCEEDING AND USE OF PROCEEDS AND 13.5(B) DETERMINATION OF PROCEEDS ARE EACH DELETED, AND REPLACED BY NEW SECTIONS 13.5(A) AND 13.5(B) COMPLIANT WITH "SAFE HARBOR DEED LANGUAGE."

(4) SECTION 8.9 AND SECTION 11.5 ARE MODIFIED, AND SECTION 13.5(C) IS DELETED, IN ORDER TO ELIMINATE POSSIBLE CONFLICT WITH THE REQUIREMENTS OF IRS NOTICE 2023-30.

REASONS FOR AMENDMENT: THE SOLE PURPOSE OF THIS CORRECTIVE AMENDMENT IS TO CORRECT CERTAIN SECTIONS OF THE ORIGINAL EASEMENT PURSUANT TO THE "SAFE HARBOR DEED LANGUAGE" ISSUED BY THE INTERNAL REVENUE SERVICE IN

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NOTICE 2023-30, WHICH PROVIDES FOR RETROACTIVE AMENDMENTS TO A CONSERVATION EASEMENT TO ENABLE IT TO COMPLY WITH IRS REGULATIONS RELATING TO EXTINGUISHMENT AND BOUNDARY LINE ADJUSTMENT CLAUSES. THIS AMENDMENT DOES NOT CHANGE ANY OTHER PROVISIONS IN THE ORIGINAL EASEMENT. AS PROVIDED IN NOTICE 2023-30, THIS CORRECTIVE AMENDMENT IS EFFECTIVE AS OF THE DATE OF RECORDING OF THE ORIGINAL EASEMENT.

COMMENTS: THIS CORRECTIVE AMENDMENT COMPLIES WITH THE CONSERVANCY'S EASEMENT AMENDMENT POLICY, IS CONSISTENT WITH THE CONSERVATION PURPOSES OF THE ORIGINAL EASEMENT, DOES NOT INCREASE ANY RIGHTS HELD BY THE LANDOWNER, DOES NOT REDUCE THE AMOUNT OF LAND PROTECTED BY THE EASEMENT, CONFERS NO PRIVATE BENEFIT ON THE LANDOWNER, AND IS CONSISTENT WITH THE PURPOSES OF SECTION 170(H) OF THE INTERNAL REVENUE CODE AND APPLICABLE IRS REGULATIONS.