

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 for instructions and the latest information.

A For the **2023** calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization LANCASTER COUNTY CONSERVANCY		D Employer identification number 23-7046908
	Doing business as		E Telephone number 717-392-7891
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	117 SOUTH WEST END AVE		G Gross receipts \$ 8,581,576.
	City or town, state or province, country, and ZIP or foreign postal code LANCASTER, PA 17603-3396		
F Name and address of principal officer: FREDERICK SCHROEDER JR. SAME AS C ABOVE		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number	

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: **WWW.LANCASTERCONSERVANCY.ORG**

K Form of organization: Corporation Trust Association Other **L** Year of formation: **1969** **M** State of legal domicile: **PA**

Part I Summary		Prior Year	Current Year
Activities & Governance	1 Briefly describe the organization's mission or most significant activities: THE MISSION OF THE LANCASTER COUNTY CONSERVANCY IS "PROVIDING WILD AND FORESTED LANDS AND CLEAN		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	18
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	18
	5 Total number of individuals employed in calendar year 2023 (Part V, line 2a)	5	38
	6 Total number of volunteers (estimate if necessary)	6	933
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	7,221,415.	7,469,995.
	9 Program service revenue (Part VIII, line 2g)	195,995.	254,438.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	184,164.	535,462.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-19,970.	68,890.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	7,581,604.	8,328,785.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	42,000.	77,354.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	1,766,378.	1,993,763.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) 290,136.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,014,205.	1,280,140.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,822,583.	3,351,257.	
19 Revenue less expenses. Subtract line 18 from line 12	2,759,021.	4,977,528.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year 79,273,882.	End of Year 86,630,348.
	21 Total liabilities (Part X, line 26)	1,460,364.	2,760,479.
	22 Net assets or fund balances. Subtract line 21 from line 20	77,813,518.	83,869,869.

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.

Sign Here	Signature of officer	Date			
	KEVIN ROLFS, CHIEF FINANCIAL OFFICER Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name GARY J. DUBAS	Preparer's signature GARY J. DUBAS	Date 07/18/24	Check if self-employed <input checked="" type="checkbox"/>	PTIN P00252339
	Firm's name MCKONLY & ASBURY, LLP	Firm's EIN 23-1909723	Phone no. 717-761-7910		
Firm's address 415 FALLOWFIELD ROAD CAMP HILL, PA 17011					

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: THE MISSION OF THE LANCASTER COUNTY CONSERVANCY IS "PROVIDING WILD AND FORESTED LANDS AND CLEAN WATERWAYS FOR OUR COMMUNITY. FOREVER". THE CHARITABLE PURPOSES OF THE LANCASTER COUNTY CONSERVANCY INCLUDE PRESERVATION OF NATURAL LANDS, ECOSYSTEMS, LANDSCAPES AND WATERWAYS

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 \$ 333,170. including grants of \$) (Revenue \$) PROGRAM 1 - LAND PROTECTION AND ACQUISITION

PROTECTING NATURAL LANDS

FORESTS, MEADOWS, AND STREAMS ARE CRITICAL FOR THE HEALTH OF OUR COMMUNITY AND OUR ENVIRONMENT. IN 2023, LANCASTER CONSERVANCY CONTINUED TO PROTECT OUR WOODS AND WATER, ENSURING PEOPLE HAVE ACCESS TO NATURAL SPACES AND WILDLIFE HAS PLACES TO THRIVE. THE CONSERVANCY PROTECTED 101 NEW ACRES LAST YEAR AND ANNOUNCED PLANS TO ACQUIRE AN ADDITIONAL 470+ ACRES IN 2024.

NATURAL LANDS PROTECTED IN 2023

4b (Code:) (Expenses \$ 1,691,851. including grants of \$ 47,354.) (Revenue \$ 50,944.) PROGRAM 2 LAND STEWARDSHIP

ACCESS & RESTORATION

THE CONSERVANCY'S STEWARDSHIP TEAM AND VOLUNTEERS WORK YEAR-ROUND TO ENSURE THAT OUR COMMUNITY HAS ACCESS TO NATURAL SPACES TO ENJOY THE MENTAL, PHYSICAL, AND EMOTIONAL BENEFITS OF BEING OUTDOORS. AT THE SAME TIME, THEY UNDERTAKE RESTORATION PROJECTS TO CARE FOR OUR PRESERVES AND SUPPORT THE HEALTH OF OUR ECOSYSTEMS.

MILL CREEK FALLS NATURE PRESERVE OPENED

4c (Code:) (Expenses \$ 690,395. including grants of \$ 30,000.) (Revenue \$ 203,494.) PROGRAM 3 COMMUNITY IMPACT

CONNECTING COMMUNITY & NATURE

BY PROVIDING PEOPLE WITH OPPORTUNITIES TO EXPLORE AND LEARN ABOUT THE NATURAL ENVIRONMENT THAT SURROUNDS US, WE SUPPORT OUR COMMUNITY'S CONNECTION TO NATURE AND INTEREST IN BEING GOOD STEWARDS OF OUR WILD LANDS.

IN 2023, THE CONSERVANCY HELD 240 EDUCATIONAL AND VOLUNTEER EVENTS, HELPING 9,431 COMMUNITY MEMBERS LEARN ABOUT AND CONNECT WITH NATURE. OUR ENGAGEMENT TEAM LAUNCHED A NEW HAPPY HIKER SERIES, WHICH OFFERS

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

4e Total program service expenses 2,715,416.

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 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <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
22 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
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	X	
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. 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 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
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
c 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
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 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
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 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
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
34 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
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. 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
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 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
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
c 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 columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a 18		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 18		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		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
b	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.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	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	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	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
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed PA
- 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.
 Own website Another's website 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
KEVIN ROLFS, CHIEF FINANCIAL OFFICER - 717-392-7891
117 S. WEST END AVENUE, LANCASTER, PA 17603

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) KATHIE S GONICK IN-HOUSE COUNSEL/SVP LAND PROTECTION	40.00					X	149,236.	0.	5,977.	
(2) FREDERICK SCHROEDER JR. PRESIDENT & CEO	40.00			X			132,343.	0.	22,021.	
(3) BRANDON TENNIS SVP OF STEWARDSHIP	40.00					X	101,668.	0.	21,027.	
(4) KEVIN ROLFS CHIEF FINANCIAL OFFICER	40.00			X			109,260.	0.	12,038.	
(5) JENNIFER LAUVER BOARD MEMBER/TREASURER	5.00	X		X			0.	0.	0.	
(6) ALEX SNYDER, ESQUIRE BOARD MEMBER/SECRETARY	5.00	X		X			0.	0.	0.	
(7) DR. SARA LAMICHANE BOARD MEMBER/PAST BOARD CHAIR	5.00	X		X			0.	0.	0.	
(8) ERIC NORDSTROM BOARD MEMBER/BOARD CHAIR	5.00	X		X			0.	0.	0.	
(9) JOHN F PYFER JR BOARD MEMBER	5.00	X					0.	0.	0.	
(10) DAN ARDIA BOARD MEMBER	5.00	X					0.	0.	0.	
(11) SPIKE BRANT BOARD MEMBER	5.00	X					0.	0.	0.	
(12) SILAS CHAMBERLIN BOARD MEMBER	5.00	X					0.	0.	0.	
(13) CHRISTOPHER GINDER BOARD MEMBER	5.00	X					0.	0.	0.	
(14) DOUG HOKE BOARD MEMBER	5.00	X					0.	0.	0.	
(15) SALLY JEFFORDS BOARD MEMBER	5.00	X					0.	0.	0.	
(16) JULIE L. JONES, MD BOARD MEMBER	5.00	X					0.	0.	0.	
(17) BOBBY KINSLEY BOARD MEMBER	5.00	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) JAMIE ROTTMUND BOARD MEMBER	5.00	X						0.	0.	0.
(19) DAVID SHENK BOARD MEMBER	5.00	X						0.	0.	0.
(20) MARY LOUISE SHENK BOARD MEMBER	5.00	X						0.	0.	0.
(21) FOLLIN SMITH BOARD MEMBER	5.00	X						0.	0.	0.
(22) ANDRES ZORILLA BOARD MEMBER	5.00	X						0.	0.	0.
(23) LISA MARSHALL BOARD MEMBER	5.00	X						0.	0.	0.
1b Subtotal								492,507.	0.	61,063.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								492,507.	0.	61,063.

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 3

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		X
4 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	
5 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

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	1 a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c	658,017.				
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	1,997,443.				
	f	All other contributions, gifts, grants, and similar amounts not included above ...	1f	4,814,535.				
	g	Noncash contributions included in lines 1a-1f	1g	\$2,767,313.				
	h	Total. Add lines 1a-1f		7,469,995.				
Program Service Revenue	2 a	PROGRAM REVENUE	Business Code					
			900099	254,438.	254,438.			
	b							
	c							
	d							
	e							
	f	All other program service revenue						
g	Total. Add lines 2a-2f		254,438.					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		495,649.			495,649.	
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
	6 a	Gross rents	6a	(i) Real				
				(ii) Personal				
	b	Less: rental expenses ...	6b					
	c	Rental income or (loss)	6c					
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of assets other than inventory	7a	(i) Securities				
				(ii) Other				
					87,907.			
	b	Less: cost or other basis and sales expenses	7b	48,094.				
	c	Gain or (loss)	7c	39,813.				
d	Net gain or (loss)		39,813.			39,813.		
8 a	Gross income from fundraising events (not including \$ 658,017. of contributions reported on line 1c). See Part IV, line 18	8a		176,230.				
			8b	204,697.				
c	Net income or (loss) from fundraising events		-28,467.			-28,467.		
9 a	Gross income from gaming activities. See Part IV, line 19	9a						
			9b					
c	Net income or (loss) from gaming activities							
10 a	Gross sales of inventory, less returns and allowances	10a						
			10b					
c	Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a	OTHER REVENUE	Business Code					
			990099	97,357.	97,357.			
	b							
	c							
	d	All other revenue						
e	Total. Add lines 11a-11d		97,357.					
12	Total revenue. See instructions		8,328,785.	351,795.	0.	506,995.		

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 X

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
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	77,354.	77,354.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	275,663.	219,120.	24,663.	31,880.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	1,401,494.	1,114,028.	125,387.	162,079.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	316,606.	250,655.	33,210.	32,741.
10 Payroll taxes				
11 Fees for services (nonemployees):				
a Management				
b Legal	780.		780.	
c Accounting	29,068.		29,068.	
d Lobbying	31,682.			31,682.
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	375,242.	350,976.	17,796.	6,470.
12 Advertising and promotion				
13 Office expenses	205,252.	144,560.	56,910.	3,782.
14 Information technology				
15 Royalties				
16 Occupancy	140,189.	86,136.	54,053.	
17 Travel	53,277.	49,237.	2,540.	1,500.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	172,121.	166,118.	4,402.	1,601.
23 Insurance	62,080.	29,153.	32,886.	41.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a MEMBER EVENTS	84,772.	52,517.	2,994.	29,261.
b MISCELLANEOUS	43,587.	127,529.	-68,277.	-15,665.
c RENTAL MAINTENANCE	30,010.	27,468.	2,542.	
d MATERIALS AND SUPPLIES	15,626.	3,181.	12,081.	364.
e All other expenses _____	36,454.	17,384.	14,670.	4,400.
25 Total functional expenses. Add lines 1 through 24e	3,351,257.	2,715,416.	345,705.	290,136.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <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
Assets	1 Cash - non-interest-bearing	678.	1	796.
	2 Savings and temporary cash investments	6,662,451.	2	9,299,662.
	3 Pledges and grants receivable, net	9,670,488.	3	9,511,269.
	4 Accounts receivable, net	243,520.	4	322,216.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	43,534.	9	50,131.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 57,965,646.		
	b Less: accumulated depreciation	10b 903,508.	10c	57,062,138.
	11 Investments - publicly traded securities	6,804,165.	11	8,823,102.
	12 Investments - other securities. See Part IV, line 11	1,168,854.	12	1,254,861.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	236,899.	15	306,173.
16 Total assets. Add lines 1 through 15 (must equal line 33)	79,273,882.	16	86,630,348.	
Liabilities	17 Accounts payable and accrued expenses	59,216.	17	152,240.
	18 Grants payable		18	
	19 Deferred revenue	1,399,318.	19	2,605,909.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 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		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	1,830.	25	2,330.
	26 Total liabilities. Add lines 17 through 25	1,460,364.	26	2,760,479.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	57,029,226.	27	60,590,473.
	28 Net assets with donor restrictions	20,784,292.	28	23,279,396.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	77,813,518.	32	83,869,869.
33 Total liabilities and net assets/fund balances	79,273,882.	33	86,630,348.	

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	8,328,785.
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,351,257.
3	Revenue less expenses. Subtract line 2 from line 1	3	4,977,528.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	77,813,518.
5	Net unrealized gains (losses) on investments	5	1,067,055.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	11,768.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	83,869,869.

Part XII Financial Statements and Reporting

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

- 1 Accounting method used to prepare the Form 990: Cash Accrual 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- 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:
 Separate basis Consolidated basis Both consolidated and separate basis
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?
- 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

	Yes	No
2a		X
2b	X	
2c	X	
3a	X	
3b	X	

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

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	7623594.	11313769.	13230586.	7221415.	7469995.	46859359.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	7623594.	11313769.	13230586.	7221415.	7469995.	46859359.
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)						8873855.
6 Public support. Subtract line 5 from line 4.						37985504.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	7623594.	11313769.	13230586.	7221415.	7469995.	46859359.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	178,038.	136,355.	160,361.	208,540.	495,649.	1178943.
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.)	44,416.	14,475.	64,245.	35,843.	97,357.	256,336.
11 Total support. Add lines 7 through 10						48294638.
12 Gross receipts from related activities, etc. (see instructions)					12	515,133.
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	78.65 %
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	79.70 %
16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

15 Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

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
1 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>		
2 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>		
3a 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 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>		
c 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>		
4a 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 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>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <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>		
5a 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 Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 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>		
8 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>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
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>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
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
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c 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>		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <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>		
1		
2		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <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>		
1		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a 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 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>			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a 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 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>			
2a			
2b			
3a			
3b			

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.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
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	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount 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	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<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 - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). 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 - <i>explain in Part VI</i>). 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 Total 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, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2024. 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			

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 for the latest information.

OMB No. 1545-0047

2023

Name of the organization

LANCASTER COUNTY CONSERVANCY

Employer identification number

23-7046908

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 LANCASTER COUNTY CONSERVANCY	Employer identification number 23-7046908
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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>1,508,888.</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>306,066.</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>78,943.</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>150,000.</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>100,000.</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>140,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LANCASTER COUNTY CONSERVANCY	Employer identification number 23-7046908
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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/>	\$ 500,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ 2,506,458.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
9	<hr/> <hr/> <hr/>	\$ 75,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization LANCASTER COUNTY CONSERVANCY	Employer identification number 23-7046908
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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
8	PUBLICLY TRADED STOCK <hr/> <hr/> <hr/>	\$ 2,506,458.	11/07/23
<hr/>	<hr/> <hr/> <hr/>	\$ _____	_____
<hr/>	<hr/> <hr/> <hr/>	\$ _____	_____
<hr/>	<hr/> <hr/> <hr/>	\$ _____	_____
<hr/>	<hr/> <hr/> <hr/>	\$ _____	_____
<hr/>	<hr/> <hr/> <hr/>	\$ _____	_____
<hr/>	<hr/> <hr/> <hr/>	\$ _____	_____

Name of organization LANCASTER COUNTY CONSERVANCY	Employer identification number 23-7046908
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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

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift	
Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

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 LANCASTER COUNTY CONSERVANCY Employer identification number 23-7046908

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?, 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?

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 (for example, recreation or education) [] Preservation of a historically important land area [X] Protection of natural habitat [] Preservation of a certified historic structure [X] Preservation of open space []
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.
a Total number of conservation easements 73
b Total acreage restricted by conservation easements 944.00
c Number of conservation easements on a certified historic structure included on line 2a 0
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register 0
3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 0
4 Number of states where property subject to conservation easement is located 1
5 Does the organization have a written policy regarding the periodic 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 608
7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 30,668.
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)? [] 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	7,714,508.	529,630.	40,050.	39,226.	35,936.
b Contributions	115,550.	9,559,490.	485,670.		
c Net investment earnings, gains, and losses	1,252,223.	-1,228,239.	5,449.	2,324.	5,075.
d Grants or scholarships	-269,010.	1,146,373.	1,539.	1,500.	1,785.
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	9,813,271.	7,714,508.	529,630.	40,050.	39,226.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 13.0000 %
 - b Permanent endowment 87.0000 %
 - 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? | | |
- 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		55,502,932.		55,502,932.
b Buildings				
c Leasehold improvements				
d Equipment		284,388.	119,922.	164,466.
e Other		2,178,326.	783,586.	1,394,740.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				57,062,138.

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)		
Total. (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)		
Total. (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)	
Total. (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) SECURITY DEPOSIT	2,330.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (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.

1	Total revenue, gains, and other support per audited financial statements	1	9,407,608.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	1,067,055.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	11,768.
e	Add lines 2a through 2d	2e	1,078,823.
3	Subtract line 2e from line 1	3	8,328,785.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	8,328,785.

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.

1	Total expenses and losses per audited financial statements	1	3,351,257.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	0.
3	Subtract line 2e from line 1	3	3,351,257.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	0.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	3,351,257.

Part XIII Supplemental Information

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

PART II, LINE 9:

THE CONSERVANCY HOLDS CONSERVATION EASEMENTS ON VARIOUS PROPERTIES IN LANCASTER COUNTY THAT ARE DESIGNED TO PROHIBIT THE DEVELOPMENT OR ALTERATION OF THE PROPERTY IN ANY WAY INCONSISTENT WITH THE EASEMENT. ALTHOUGH CONSERVATION EASEMENTS BRING SIGNIFICANT VALUE TO THE CONSERVANCY'S PURPOSE, THEY HAVE NO FINANCIAL VALUE, OTHER THAN THE DIRECT ACQUISITION COSTS. FOR THIS REASON, ONLY DIRECT COSTS INCURRED TO ACQUIRE EASEMENTS ARE CAPITALIZED, WHEREAS DONATED CONSERVATION EASEMENTS ARE NOT REFLECTED IN THE FINANCIAL STATEMENTS.

THE CONSERVANCY ALSO HOLDS A CONSERVATION INTEREST IN THE FORM OF A LEASE. THE LEASE IS BEING RENEWED ON A YEAR-TO-YEAR BASIS AND PAYMENTS ARE

Part XIII Supplemental Information (continued)

EXPENSED AS THEY ARE PAID.

THE CONSERVANCY HAS THE ONGOING COMMITMENT TO ENSURE THE PRESERVATION AND MAINTENANCE OF ITS CONSERVATION INTERESTS. ALTHOUGH THE AMOUNTS FOR LAND HELD IN FEE ARE SHOWN AS UNRESTRICTED NET ASSETS IN THE STATEMENT OF FINANCIAL POSITION, IT IS THE CONSERVANCY'S INTENTION TO HOLD THEM INDEFINITELY. IN MOST CASES, THE CONSERVANCY WOULD NEED TO OBTAIN THE PERMISSION OF THE ORIGINAL FUNDER FROM WHICH THE GRANT OR CONTRIBUTION PROCEEDS USED TO PURCHASE THE LAND HELD IN FEE WERE RECEIVED BEFORE SELLING A PARCEL OF LAND.

AS OF DECEMBER 31, 2023, THE CONSERVANCY HELD THE FOLLOWING CONSERVATION INTERESTS:

	CARRYING AMOUNT	ACREAGE
LAND HELD IN FEE	\$55,502,932	7,289
CONSERVATION EASEMENTS HELD	\$59,463	944
TOTAL	\$55,562,395	
LEASES, CONSERVATION LAND USE		67
TOTAL ACRES HELD IN FEE OR EASEMENTS		8,166

PART V, LINE 4:

ENDOWMENT FUNDS ARE USED IN STRICT ADHERENCE TO DONOR RESTRICTIONS IN FURTHERANCE OF THE CONSERVANCY'S MISSION AND MORE SPECIFICALLY IN LAND PROTECTION AND ACQUISITION AND LAND STEWARDSHIP INITIATIVES AND ACTIONS.

PART X, LINE 2:

Part XIII Supplemental Information (continued)

THE CONSERVANCY IS EXEMPT FROM FEDERAL INCOME TAX UNDER INTERNAL REVENUE CODE SECTION 501(C)(3). THE CONSERVANCY ADHERES TO THE PROVISIONS OF FINANCIAL ACCOUNTING STANDARDS BOARD (FASB) ACCOUNTING STANDARDS CODIFICATION (ASC) 740, INCOME TAXES. ASC 740 ESTABLISHES RULES FOR RECOGNIZING AND MEASURING TAX POSITIONS TAKEN IN AN INCOME TAX RETURN, INCLUDING DISCLOSURES OF UNCERTAIN TAX POSITIONS (UTPS). ASC 740 MANDATES THAT COMPANIES EVALUATE ALL MATERIAL INCOME TAX POSITIONS FOR PERIODS THAT REMAIN OPEN UNDER APPLICABLE STATUTES OF LIMITATION, AS WELL AS POSITIONS EXPECTED TO BE TAKEN IN FUTURE RETURNS. THE UTP RULES THEN IMPOSE A RECOGNITION THRESHOLD ON EACH TAX POSITION. A COMPANY CAN RECOGNIZE AN INCOME TAX BENEFIT ONLY IF THE POSITION HAS A "MORE LIKELY THAN NOT" (I.E., MORE THAN 50 PERCENT) CHANCE OF BEING SUSTAINED ON THE TECHNICAL MERITS. FOR THE YEARS ENDED DECEMBER 31, 2023 AND 2022, THE CONSERVANCY HAS TAKEN NO MATERIAL TAX POSITIONS ON ITS APPLICABLE TAX FILINGS THAT DO NOT MEET THE "MORE LIKELY THAN NOT" THRESHOLD. AS A RESULT, NO AMOUNT FOR UTPS HAS BEEN INCLUDED IN THE FINANCIAL STATEMENTS. MANAGEMENT BELIEVES IT IS NO LONGER SUBJECT TO INCOME TAX EXAMINATIONS FOR YEARS PRIOR TO 2020.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT	11,768.
---	---------

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	
		DINNER/AUCTION (event type)	EXTRAORDINARY GIVE (event type)	(total number)	(add col. (a) through col. (c))	
Revenue	1	Gross receipts	408,119.	367,325.	58,803.	834,247.
	2	Less: Contributions	231,889.	367,325.	58,803.	658,017.
	3	Gross income (line 1 minus line 2)	176,230.			176,230.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses	161,692.	40,077.	2,928.	204,697.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				204,697.
	11	Net income summary. Subtract line 10 from line 3, column (d)				-28,467.

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))	
Revenue	1	Gross revenue				
	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	<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: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____

Address _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____
- c If "Yes," enter name and address of the third party:

Name _____

Address _____

16 Gaming manager information:

Name _____

Gaming manager compensation \$ _____

Description of services provided _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: LINDSLEY DEVELOPMENT CONSULTING

(I) ADDRESS OF FUNDRAISER: 89 LEAMAN ROAD, LANCASTER, PA 17603

(II) ACTIVITY: FUNDRAISING CONSULTING SERVICES RELATED TO 50TH ANN. CAPITAL

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization **LANCASTER COUNTY CONSERVANCY** Employer identification number **23-7046908**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
LOWER SUSQUEHANNA RIVERKEEPER ASSOCIATION - 2098 LONG LEVEL ROAD - WRIGHTSVILLE, PA 17368			16,925.	0.			ENVIRONMENTAL EDUCATION CENTER - WRIGHTSVILLE, PA
LANCASTER COUNTY COMMUNITY FOUNDATION - 24 W KING STREET - LANCASTER, PA 17603			30,000.	0.			LANCASTER CLEAN WATER FUND
LANCASTER COUNTY REDEVELOPMENT AUTHORITY - 28 PENN SQUARE, SUITE 200 - LANCASTER, PA 17603			16,429.	0.			MARIETTA TRAILHEAD FACILITY

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table
- 3** Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2023

**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 for instructions and the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

LANCASTER COUNTY CONSERVANCY

Employer identification number

23-7046908

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 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
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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) KATHIE S GONICK IN-HOUSE COUNSEL/SVP LAND PROTECTION	(i)	140,597.	8,639.	0.	4,579.	1,398.	155,213.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) FREDERICK SCHROEDER JR. PRESIDENT & CEO	(i)	124,168.	8,175.	0.	4,333.	17,688.	154,364.	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)							

**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 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization: **LANCASTER COUNTY CONSERVANCY**
Employer identification number: **23-7046908**

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	34	2,767,313.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

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

	Yes	No
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.		

**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 for the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

LANCASTER COUNTY CONSERVANCY

Employer identification number

23-7046908

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

WATERWAYS FOR OUR COMMUNITY FOREVER." THE CHARITABLE PURPOSES OF THE
LANCASTER COUNTY CONSERVANCY INCLUDE PRESERVATION OF NATURAL LANDS,
ECOSYSTEMS, LANDSCAPES, AND WATERWAYS FOR FUTURE GENERATIONS.

CONSERVANCY PRESERVES ARE OPEN TO THE PUBLIC 365 DAYS A YEAR, SUN UP TO
SUN DOWN. OUR WORK RESULTS IN PROTECTION OF CRITICAL WILDLIFE

CORRIDORS, RECREATION LANDS, WATER RESOURCES, AND PRESERVES MATURE

FORESTS THAT CLEAN OUR AIR AND WATER. WE WORK WITH NATIONAL, REGIONAL

AND LOCAL PARTNERS TO PROTECT THE SPECIAL PLACES WITHIN LANCASTER

COUNTY AND ALONG ITS STREAMS AND RIVERS. THIS EFFORT ALSO TAKES US

INTO YORK, CHESTER AND DAUPHIN COUNTIES WITH A FOCUS ON LAND, WATER AND

COMMUNITY.

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

FOR FUTURE GENERATIONS. CONSERVANCY PRESERVES ARE OPEN TO THE PUBLIC
365 DAYS A YEAR, SUN UP TO SUN DOWN. OUR WORK RESULTS IN PROTECTION OF

CRITICAL WILDLIFE CORRIDORS, RECREATION LANDS, WATER RESOURCES, AND

PRESERVES MATURE FORESTS THAT CLEAN OUR AIR AND WATER. WE WORK WITH

NATIONAL, REGIONAL AND LOCAL PARTNERS TO PROTECT THE SPECIAL PLACES

WITHIN LANCASTER COUNTY AND ALONG ITS STREAMS AND RIVERS. THIS EFFORT

ALSO TAKES US INTO YORK, CHESTER AND DAUPHIN COUNTIES WITH A FOCUS ON

LAND, WATER AND COMMUNITY.

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

DE PERROT WOODS NATURE PRESERVE ADDITION

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

Schedule O (Form 990) 2023

Name of the organization

LANCASTER COUNTY CONSERVANCY

Employer identification number

23-7046908

THE CONSERVANCY ACQUIRED 77 ACRES ADJACENT TO DE PERROT WOODS NATURE PRESERVE WITHIN THE HIGHLANDS REGION OF LANCASTER COUNTY. THESE NEWLY PROTECTED LANDS INCLUDE A SECTION OF THE CONESTOGA TRAIL AND A TRIBUTARY TO SPEEDWELL FORGE LAKE. WITH THIS ACQUISITION, DE PERROT WOODS NATURE PRESERVE, LOCATED NORTH OF LITITZ, NOW ENCOMPASSES OVER 100 ACRES. THIS ACQUISITION PROTECTS CRITICAL WATER RESOURCES AND PROVIDES ACCESS TO THE CONESTOGA TRAIL AND THE ORIGINAL DE PERROT DONATED LANDS.

FUNDERS & PARTNERS: DCNR, LANCASTER COUNTY, RESSLER MILL FOUNDATION, PRIVATE DONORS, THE WIKER FAMILY, PA FISH AND BOAT COMMISSION

HISTORIC IRONMASTER PROPERTY

THE CONSERVANCY PARTNERED WITH DCNR TO PROTECT A 21-ACRE PROPERTY IN YORK COUNTY'S HELLAM HILLS THAT INCLUDES THE 18TH CENTURY IRONMASTER HOUSE AND HISTORIC REMAINS ASSOCIATED WITH THE CODORUS FURNACE. THE PROPERTY WAS ACQUIRED BY THE CONSERVANCY AND THEN TRANSFERRED TO DCNR FOR MANAGEMENT AS AN ADDITION TO THE SUSQUEHANNA RIVERLANDS STATE PARK.

FUNDERS & PARTNERS: STATE PARKS, SRCL, PRIVATE FUNDING FOR INITIAL ACQUISITION REIMBURSED THROUGH SALE TO PA STATE PARKS

CONSERVATION IN THE SUSQUEHANNA RIVERLANDS

A VICTORY FOR NATURE

Name of the organization LANCASTER COUNTY CONSERVANCY	Employer identification number 23-7046908
--	--

IN 2023, THE CONSERVANCY ANNOUNCED PLANS TO ACQUIRE ALMOST 500 ACRES OF NATURAL LANDS ALONG THE SUSQUEHANNA RIVER IN YORK COUNTY. BY PROTECTING THIS AREA, KNOWN AS ROUNDTOP, THE CONSERVANCY IS CONSERVING OLD GROWTH FORESTS, RIPARIAN BUFFERS THAT SUPPORT THE HEALTH OF THE SUSQUEHANNA RIVER, OUTLOOKS WITH STUNNING VIEWS, AND A BEAUTIFUL FORESTED VIEWSHED FROM CHICKIES ROCK, MARIETTA, AND THE ROUTE 30 BRIDGE.

ROUNDTOP IS LOCATED IN THE HELLAM HILLS CONSERVATION AREA, WHICH SPANS FROM JUST NORTH OF WRIGHTSVILLE TO CODORUS CREEK AND IS THE LARGEST CONTIGUOUS FOREST BETWEEN THE CITIES OF YORK, LANCASTER, AND HARRISBURG. THIS CONSERVATION AREA CURRENTLY INCLUDES THE CONSERVANCY'S HELLAM HILLS AND WIZARD RANCH NATURE PRESERVES A TOTAL OF OVER 1,000 ACRES OF CONTIGUOUS FORESTS. THE HELLAM HILLS CONSERVATION AREA WILL EXPAND TO ALMOST 1,500 ACRES WITH THE ADDITION OF ROUNDTOP IN 2024. THESE PRESERVES ARE ALSO ADJACENT TO THE SUSQUEHANNA RIVERLANDS STATE PARK, WHICH THE CONSERVANCY ACQUIRED AND THEN TRANSFERRED TO DCNR FOR MANAGEMENT IN 2022.

FUNDERS & PARTNERS: DCNR, YORK COUNTY, PRIVATE DONORS, SRCL

THE FIGHT FOR NATURE CONTINUES

IN FEBRUARY 2023, YORK ENERGY STORAGE APPLIED FOR A PRELIMINARY PERMIT TO CONSTRUCT A PUMPED STORAGE FACILITY IN THE AREA WHERE CUFFS RUN MEETS THE SUSQUEHANNA RIVER. LANCASTER CONSERVANCY CAME TOGETHER WITH COMMUNITY PARTNERS AND NEIGHBORS TO OPPOSE THIS PROJECT, WHICH WOULD HAVE A FOOTPRINT OF OVER 1,000 ACRES AND IMPACT FOREST, A SECTION OF THE REGIONAL MASON-DIXON TRAIL, PRESERVED FARMLAND, AND AROUND 50

Name of the organization LANCASTER COUNTY CONSERVANCY	Employer identification number 23-7046908
--	--

PROPERTIES IN CHANCEFORD TOWNSHIP, YORK COUNTY ALONG THE RIVER.

IN 2024, THE CONSERVANCY AND PARTNERS, ELECTED OFFICIALS, AND COMMUNITY MEMBERS ARE CONTINUING TO FIGHT TO PROTECT CUFFS RUN AND ENCOURAGE THE FEDERAL ENERGY REGULATORY COMMISSION TO PREVENT THE PROJECT FROM MOVING FORWARD.

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

THE CONSERVANCY OPENED 1.2 MILES OF TRAILS AT MILL CREEK FALLS NATURE PRESERVE IN AIRVILLE, YORK COUNTY, IN 2023. ONE OF THESE TWO NEW TRAILS IS A UNIVERSALLY ACCESSIBLE TRAIL, OFFERING VISITORS WITH WHEELCHAIRS, STROLLERS, WALKERS, OR OTHER MOBILITY CONSIDERATIONS THE OPPORTUNITY TO HEAD OUT INTO A MIXED-HARDWOOD FOREST ON A CRUSHED STONE PATH. THE OTHER TRAIL TRAVELS ALONG A CREEK WITH SMALL STAIR-STEP WATERFALLS, CONNECTS WITH THE REGIONAL MASON-DIXON TRAIL, AND LEADS TO THE 10-FOOT-TALL MILL CREEK FALLS.

PARTNERS: CBJ SERVICES, SITE DESIGN CONCEPTS, LOWER CHANCEFORD TOWNSHIP

WIZARD RANCH NATURE PRESERVE TRAILS & RESTORATION

WIZARD RANCH NATURE PRESERVE, LOCATED IN YORK COUNTY'S HELLAM HILLS CONSERVATION AREA, IS A MODEL INTERSECTION OF THE CONSERVANCY'S EFFORTS TO PROVIDE ACCESS TO OUTDOOR SPACES WHILE ALSO CARING FOR NATURE.

ACCESS

THE CONSERVANCY OPENED THE FIRST TRAILS AND A PARKING AREA AT WIZARD

Name of the organization LANCASTER COUNTY CONSERVANCY	Employer identification number 23-7046908
--	--

RANCH NATURE PRESERVE IN MAY OF 2023. THERE ARE CURRENTLY 1.8 MILES OF LOOPING TRAILS AT THE PRESERVE, WHICH TRAVERSE MEADOWS AND FOREST, AND WE PLAN TO ADD ADDITIONAL TRAILS TO THE PRESERVE IN THE FUTURE.

RESTORATION

WHEN THE CONSERVANCY ACQUIRED WIZARD RANCH, THE UNHEALTHY FORESTS WERE SUFFERING CANOPY COLLAPSE DUE TO UNCHECKED INVASIVE PLANT AND INSECT SPECIES. RESTORATION OF THIS NATURE PRESERVE HAS BEEN A PRIORITY FOR THE CONSERVANCY. VOLUNTEERS AND OUR STEWARDSHIP TEAM MEMBERS TRIMMED AND REMOVED INVASIVE PLANTS LIKE MULTIFLORA ROSE, BITTERSWEET, AND BUSH HONEYSUCKLE AND USED FORESTRY MOWERS TO REDUCE THE IMPAIRED FOREST TO A SAVANNA-LIKE HABITAT.

IN 2023, THE CONSERVANCY CONDUCTED OUR FIRST-EVER PRESCRIBED BURN AT WIZARD RANCH TO MANAGE INVASIVE PLANTS GROWING THERE. THE 18-ACRE PRESCRIBED BURN PREPARED THE SOIL FOR PLANTING NATIVE UNDERSTORY AND CANOPY TREES WHILE KILLING OFF THE INVASIVE SPECIES SEED BANK.

ALTHOUGH INVASIVE SPECIES MANAGEMENT WILL BE ONGOING AT WIZARD RANCH, THE CONSERVANCY HAS ALSO BEGUN REFORESTATION AND WETLAND RESTORATION EFFORTS AT THE PRESERVE. IN THE FALL, WE PLANTED 2,750 TREES AND SHRUBS ON ABOUT 10 ACRES OF THE PRESERVE, WITH ADDITIONAL PLANTINGS PLANNED TO IMPROVE FORESTS, GRASSLAND MEADOWS, AND POLLINATOR HABITAT.

PARTNERS: FARM SERVICE AGENCY, NATURAL RESOURCES CONSERVATION SERVICE, DCNR, PENNVEST, PHEASANTS FOREVER, CHESPEAKE BAY FOUNDATION, OCTORARO NATIVE PLANTS, AQUATIC RESOURCES RESTORATION COMPANY, SILVIX FORESTRY &

Name of the organization

LANCASTER COUNTY CONSERVANCY

Employer identification number

23-7046908

PRESCRIBED FIRE

CARING FOR TRAILS IN THE SUSQUEHANNA RIVERLANDS

THE CONSERVANCY'S STEWARDSHIP TEAM AND VOLUNTEERS ENSURE THAT PEOPLE HAVE ACCESS TO NATURAL SPACES BY MAINTAINING THE NETWORK OF TRAILS ON OUR PRESERVES WHETHER THAT MEANS TRIMMING AWAY FALLEN TREES, RESTORING TRAILS DEGRADED BY EROSION OR OVERUSE, OR PLANNING FUTURE TRAIL IMPROVEMENTS AND ROUTES.

IN 2023, THE CONSERVANCY'S SUMMER STEWARDSHIP CREW WORKED ON CONSTRUCTING, RESTORING, AND IMPROVING MILES OF TRAILS IN NATURE PRESERVES INCLUDING HELLAM HILLS, MILL CREEK FALLS, AND TUCQUAN GLEN AND PYFER. THE CREW WAS MADE UP OF EIGHT PEOPLE, MOSTLY YOUNG ADULTS IN OR JUST OUT OF COLLEGE, WHO ARE INTERESTED IN LEARNING MORE ABOUT A CAREER IN CONSERVATION. CREW MEMBERS BUILT DRAINAGE STEPS OUT OF LOGS AND ROCKS AND CLEARED AND WIDENED EXISTING TRAILS IN ADDITION TO CONDUCTING HABITAT RESTORATION WORK.

RESTORING NATIVE HABITAT

RESTORATION WORK ON LANCASTER CONSERVANCY NATURE PRESERVES INVOLVES MANAGING INVASIVE SPECIES AND SUPPORTING NATIVE ONES TO CREATE BIODIVERSE, THRIVING HABITATS. IN 2023, THE CONSERVANCY BEGAN OR CONTINUED RESTORATION WORK AT NATURE PRESERVES INCLUDING SHENKS FERRY, WIZARD RANCH, CLARK, DONEGAL HIGHLANDS, SAFE HARBOR, HOMEWOOD, WINDOLPH LANDING, AND KELLYS RUN.

Name of the organization LANCASTER COUNTY CONSERVANCY	Employer identification number 23-7046908
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CREATING POLLINATOR PARADISE AT KELLYS RUN

AT KELLYS RUN, THE CONSERVANCY STARTED PLANTINGS TO TURN 9 ACRES OF THE PRESERVE INTO A POLLINATOR PARADISE. THE GOAL AT KELLYS RUN IS TO CREATE DISTINCT POLLINATOR MEADOWS RINGED BY A TRAIL SYSTEM THAT WILL ALLOW VISITORS TO EXPLORE THE NEWLY RESTORED SITES AND NATIVE PLANTS AND WILDLIFE. THE NEWLY ESTABLISHED MEADOWS WILL CREATE CONTINUOUS HABITAT FOR POLLINATOR ANIMALS LIKE MONARCHS AND REGAL FRITILLARIES, AND IT WILL CONTAIN DIVERSE PLANT SPECIES SUCH AS BUTTERFLY MILKWEED, FROST ASTER, AND LITTLE BLUESTEM GRASS.

KELLYS RUN RESTORATION PARTNERS: NATURAL RESOURCES CONSERVATION SERVICE, PHEASANTS FOREVER, CEDAR MEADOW FARM, CHESPEAKE BAY FOUNDATION, OCTORARO NATIVE PLANTS, AQUATIC RESOURCES RESTORATION COMPANY

IN 2023, VOLUNTEERS:

- PLANTED 250 NATIVE TREES AND SHRUBS AND 600 POLLINATOR PLANTS.
- PULLED 1,600 GALLONS OF INVASIVE HERBACEOUS PLANTS LIKE GARLIC MUSTARD.
- REMOVED 790 CUBIC YARDS OF INVASIVE SHRUBS LIKE MULTIFLORA ROSE.
- DONATED 2333 HOURS TO CARING FOR OUR NATURE PRESERVES AND CONNECTING WITH COMMUNITY MEMBERS THROUGH EDUCATIONAL TABLING.

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

INFORMATION ON SAFE AND SMART HIKING BASICS. WE ALSO STARTED TRAININGS FOR A VOLUNTEER PHENOLOGY COMMUNITY SCIENCE PROJECT, CREATING THE FIRST MONITORING SITES FOR THE USGS-NATIONAL PHENOLOGY NETWORK IN LANCASTER

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LANCASTER WATER WEEK

DURING THE 7TH ANNUAL LANCASTER WATER WEEK, MORE THAN A DOZEN PARTNERS HOSTED OVER 40 EVENTS INCLUDING CONESTOGA RIVER PADDLES, LANCASTER SCIENCE FACTORY WORKSHOPS, RAIN GARDEN AND WETLAND TOURS, MUSIC AND POETRY EVENTS, VOLUNTEER OPPORTUNITIES, AND MORE. WE GAVE AWAY OVER 1,700 NATIVE TREES AND SHRUBS THAT CAN HELP CLEAN OUR WATERWAYS, AND VOLUNTEERS REMOVED LITERAL TONS OF TRASH DURING THE COMMUNITY CLEANUP. TWO WATER WEEK BEERS CREATED BY POUR MAN'S BREWING COMPANY AND OUR TOWN BREWERY ADDED AN EXTRA WAY TO CELEBRATE OUR STREAMS AND RIVERS, AND A PORTION OF PROCEEDS FROM THE BEERS AS WELL AS FUNDS FROM WATER WEEK SPONSORSHIPS WENT TOWARDS THE LANCASTER CLEAN WATER PARTNER'S CLEAN WATER FUND AT THE LANCASTER COUNTY COMMUNITY FOUNDATION.

HABITAT ADVOCATE CERTIFICATION SERIES

THE CONSERVANCY WORKS ON A LANDSCAPE SCALE TO PROTECT WILDLIFE HABITAT, BUT THERE ARE STEPS EVERYONE CAN TAKE IN THEIR COMMUNITY, THEIR BACKYARD, OR EVEN A FLOWERPOT TO CARE FOR OUR ENVIRONMENT. THE HABITAT ADVOCATE CERTIFICATION SERIES OF CLASSES TEACHES COMMUNITY MEMBERS HOW TO CREATE AND CARE FOR NATIVE WILDLIFE HABITAT. THE CONSERVANCY LAUNCHED THE PROGRAM IN 2023 AND HELD ONE SERIES OF CLASSES AT CLIMBERS RUN IN THE SPRING AND A SECOND AT WEST ART IN THE FALL. TWENTY-FIVE PEOPLE COMPLETED ALL 10 CLASSES TO EARN THEIR CERTIFICATION, AND MANY MORE ARE ON THEIR WAY TO EARNING THE ACHIEVEMENT.

THIS PROJECT WAS MADE POSSIBLE BY LANCASTER CLEAN WATER PARTNERS AND

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LANCASTER COUNTY COMMUNITY FOUNDATION THROUGH THE LANCASTER CLEAN WATER FUND. THANK YOU TO OUR PARTNERS WAXWING ECOWORKS CO. AND THE NATIONAL WILDLIFE FEDERATION.

LEAVE NO TRACE

TIME IN NATURE IS VITAL FOR OUR GOOD PHYSICAL, MENTAL, AND EMOTIONAL HEALTH. WHEN WE'RE SPENDING TIME OUTSIDE, IT'S CRITICAL THAT WE RESPECT OUR OUTDOORS AND HELP CARE FOR THE NATURAL PLACES WE LOVE. LEAVE NO TRACE PRINCIPLES PROVIDE A FRAMEWORK FOR EXPLORING THE OUTDOORS SAFELY AND RESPONSIBLY. IN 2023, CONSERVANCY VOLUNTEERS TABLING AT PRESERVES OFFERED 2,575 VISITORS EDUCATION ABOUT LEAVE NO TRACE ETHICS.

LANCASTER CONSERVANCY'S EFFORTS TO PROVIDE LEAVE NO TRACE EDUCATION TO THE COMMUNITY ARE MADE POSSIBLE THANKS TO THE GENEROUS SUPPORT OF THE LANCASTER COUNTY SOLID WASTE MANAGEMENT AUTHORITY.

PARTNERSHIPS

THE CONSERVANCY IS HONORED TO PARTNER WITH OTHER ORGANIZATIONS TO PROVIDE EDUCATIONAL AND ENGAGING EVENTS ABOUT NATURE. IN 2023, SOME OF THOSE PARTNERS INCLUDED:

- LANCASTER PUBLIC LIBRARY THE CONSERVANCY PARTNERED WITH THE LIBRARY FOR CONSERVANCY PRESENTATIONS WHICH WE THINK WILL MAKE OUR WORK MORE VISIBLE AND ACCESSIBLE TO A WIDER SEGMENT OF OUR COMMUNITY. THIS PARTNERSHIP ALSO INVOLVES WORKING WITH THE LIBRARY TO ESTABLISH A STORYBOOK TRAIL AT CLIMBERS RUN WHICH WILL ENGAGE YOUNG FAMILIES.

- THE CHESAPEAKE BAY FOUNDATION THIS PARTNERSHIP INVOLVES MAKING

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CLIMBERS RUN AVAILABLE FOR WEEKLONG RESIDENTIAL PROGRAMMING LED BY CBF STAFF WITH CONSERVANCY STAFF DOING INSTRUCTION ON THE IMPORTANCE OF LAND PROTECTION AND BIODIVERSITY CONSERVATION. PRELIMINARY CONVERSATIONS ABOUT WHAT EDUCATION AND OUTREACH WILL LOOK LIKE AT SUNNYSIDE BETWEEN CBF AND THE CONSERVANCY HAVE BEGUN.

- THE SCIENCE FACTORY THIS PARTNERSHIP INVOLVED THE CONSERVANCY RUNNING THE SCIENCE CAF PROGRAM TWICE A MONTH THROUGH THE SUMMER AT THE SCIENCE FACTORY. THIS ENGAGED A NEW SEGMENT OF OUR COMMUNITY, ESPECIALLY YOUNG FAMILIES, AND LED TO A PARTNERSHIP ON A GRANT TO FUND THE PARTICIPATION OF SCHOOL DISTRICT OF LANCASTER STUDENTS IN SCIENCE EDUCATION, WHICH WILL INCLUDE VISITS TO THE SCIENCE FACTORY AND CLIMBERS RUN NATURE CENTER.

- MILLERSVILLE UNIVERSITY WE HOSTED MANY UNDERGRADUATE AND GRADUATE STUDENTS FROM THE MILLERSVILLE BIOLOGY AND PSYCHOLOGY DEPARTMENTS AT CLIMBERS RUN AS PART OF THEIR COURSE CURRICULUM IN BIOLOGY, EARTH SCIENCES, AND PSYCHOLOGY. THIS WORK WILL CONTINUE AND EXPAND INTO 2024.

- THE COMMUNITY ACTION PARTNERSHIP THIS PROGRAM INVOLVED HOSTING YOUNG AT-RISK FAMILIES ON CONSERVANCY PRESERVES TO INTRODUCE THEM TO OUR PROTECTED LAND AS PLACES WHERE THEY CAN TAKE THEIR FAMILIES AND TO DO SOME BASIC NATURAL HISTORY EDUCATION GEARED TOWARD PRESCHOOL- AND ELEMENTARY SCHOOL-AGED CHILDREN AND THEIR PARENTS.

- LANCASTER LGBTQ+ COALITION WE CREATED A SERIES OF HIKES OPEN ONLY TO THE LGBTQ+ COALITION AND USED OUR NEWLY DECORATED MINIBUS TO PROVIDE TRANSPORTATION FOR THOSE HIKES.

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

A COPY OF THE FORM 990 AND RELATED SCHEDULES IS REVIEWED BY THE FINANCE AND AUDIT COMMITTEE, THE BOARD AND PRESIDENT & CEO BEFORE IT IS FILED.

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FORM 990, PART VI, SECTION B, LINE 12C:

BOARD MEMBERS MUST MAKE ANY CONFLICT KNOWN AND REFRAIN FROM DISCUSSIONS AND VOTING.

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

AVAILABLE PUBLIC DATA WAS RESEARCHED, A HUMAN RESOURCE PROFESSIONAL WAS CONSULTED AND COMPENSATION WAS REVIEWED WITH AND APPROVED BY THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION C, LINE 19:

UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

OTHER CONSULTING AND CONTRACTING:

PROGRAM SERVICE EXPENSES	350,976.
MANAGEMENT AND GENERAL EXPENSES	17,796.
FUNDRAISING EXPENSES	6,470.
TOTAL EXPENSES	375,242.
TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	375,242.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN VALUE OF SPLIT INTEREST AGREEMENT	11,768.
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PART XII, LINE 2C

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.