

Form <b>CHAR500</b>  This form used for Article 7-A, EPTL and dual filers (replaces forms CHAR 497, CHAR 010 and CHAR 006)	<b>Annual Filing for Charitable Organizations</b> New York State Department of Law (Office of the Attorney General) Charities Bureau - Registration Section 120 Broadway New York, NY 10271 <a href="http://www.charitiesnys.com">http://www.charitiesnys.com</a>	<b>2 0 1 1</b>  <b>Open to Public Inspection</b>				
<b>1. General Information</b>						
a. For the fiscal year beginning (mm/dd/yyyy) <b>01/01/2011</b> and ending (mm/dd/yyyy) <b>12/31/2011</b>						
b. Check if applicable for NYS: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial filing <input type="checkbox"/> Final filing <input type="checkbox"/> Amended filing <input type="checkbox"/> NY registration pending	c. Name of organization <b>COLUMBIA LAND CONSERVANCY, INC.</b>  <table style="width: 100%;"> <tr> <td style="width: 60%;">Number and street (or P.O. box if mail not delivered to street address) <b>P.O. BOX 299</b></td> <td style="width: 40%;">Room/suite</td> </tr> <tr> <td colspan="2">City or town, state or country and ZIP + 4 <b>CHATHAM, NY 12037-0299</b></td> </tr> </table>	Number and street (or P.O. box if mail not delivered to street address) <b>P.O. BOX 299</b>	Room/suite	City or town, state or country and ZIP + 4 <b>CHATHAM, NY 12037-0299</b>		d. Fed. employer ID no. (EIN) <b>22-2757332</b> e. NY State registration no. <b>04-01-42</b> f. Telephone number <b>518 392-5252</b> g. Email
Number and street (or P.O. box if mail not delivered to street address) <b>P.O. BOX 299</b>	Room/suite					
City or town, state or country and ZIP + 4 <b>CHATHAM, NY 12037-0299</b>						

<b>2. Certification - Two Signatures Required</b>			
We certify under penalties of perjury that we reviewed this report, including all attachments, and to the best of our knowledge and belief, they are true, correct and complete in accordance with the laws of the State of New York applicable to this report.			
a. President or Authorized Officer	<b>PETER R. PADEN</b> <small>Signature</small>	<b>EXECUTIVE DIRECTOR</b> <small>Printed Name</small>	<small>Title</small>
b. Chief Financial Officer or Treas.	<b>MARK LEVY</b> <small>Signature</small>	<b>TREASURER</b> <small>Printed Name</small>	<small>Title</small>

<b>3. Annual Report Exemption Information</b>	
a.	<b>Article 7-A</b> annual report exemption (Article 7-A registrants and dual registrants) Check <input type="checkbox"/> if total contributions from NY State (including residents, foundations, corporations, government agencies, etc.) did not exceed \$25,000 <u>and</u> the organization did not engage a professional fund raiser (PFR) or fund raising counsel (FRC) to solicit contributions during this fiscal year.  <b>NOTE:</b> An organization may claim this exemption if no PFR or FRC was used <u>and</u> either: 1) it received an allocation from a federated fund, United Way or incorporated community appeal <u>and</u> contributions from other sources did not exceed \$25,000 <u>or</u> 2) it received all or substantially all of its contributions from one government agency to which it submitted an annual report similar to that required by Article 7-A.
b.	<b>EPTL</b> annual report exemption (EPTL registrants and dual registrants) Check <input type="checkbox"/> if gross receipts did not exceed \$25,000 <u>and</u> assets (market value) did not exceed \$25,000 at any time during this fiscal year.
For EPTL or Article 7-A registrants claiming the annual report exemption under the one law under which they are registered and for dual registrants claiming the annual report exemptions under both laws, simply complete part 1 (General Information), part 2 (Certification) and part 3 (Annual Report Exemption Information) above. <i>Do not submit a fee, do not complete the following schedules and do not submit any attachments to this form.</i>	

<b>4. Article 7-A Schedules</b>	
If you did <b>not</b> check the Article 7-A annual report exemption above, complete the following for this fiscal year:	
a. Did the organization use a professional fund raiser, fund raising counsel or commercial co-venturer for fund raising activity in NY State?	<input checked="" type="checkbox"/> <b>Yes*</b> <input type="checkbox"/> <b>No</b> * If "Yes", complete Schedule 4a.
b. Did the organization receive government contributions (grants)?	<input checked="" type="checkbox"/> <b>Yes*</b> <input type="checkbox"/> <b>No</b> * If "Yes", complete Schedule 4b.

<b>5. Fee Submitted:</b> See last page for <b>summary of fee requirements.</b>	
Indicate the filing fee(s) you are submitting along with this form:	
a. Article 7-A filing fee ..... \$ <u>25.</u> b. EPTL filing fee ..... \$ <u>250.</u> c. <b>Total fee</b> ..... \$ <u>275.</u>	<b>Submit only one check or money order for the total fee, payable to "NYS Department of Law"</b>

<b>6. Attachments</b> - For organizations that are not claiming annual report exemptions under both laws, see last page for required attachments
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**Schedule 4a: Professional Fund Raisers (PFR), Fund Raising Counsels (FRC), Commercial Co-Venturers (CCV)**

If you checked the box in question 4.a. on page 1, complete the following schedule for **each** PFR, FRC or CCV that the organization engaged for fund raising activity in NY State:

**1. Type of fund raising professional (FRP):**

Professional fund raiser ..... ☐  
 Fund raising counsel ..... ☒  
 Commercial co-venturer ..... ☐

**2. Name of FRP:**LINDA LONDON

Number and street (or P.O. box if mail is not delivered to street address):

198 EUCLID AVENUE

City or town, state or country and ZIP + 4:

ALBANY, NY 12208**3. FRP telephone number:**518-458-8562**4. Services provided by FRP (provide description):**SEE STATEMENT 1**5. Compensation arrangement with FRP (provide description):**CLC PAYS LINDA LONDON A MONTHLY FEE TO PROVIDE FUNDRAISING SUPPORT.

**6. Dates of contract** ..... 01/01/2011 through 12/31/2011  
(mm/dd/yyyy) (mm/dd/yyyy)

**7. Amount paid to FRP** ..... \$ 22,000.

**8. If services were provided by a CCV, did the CCV provide the charitable organization with the interim report(s) required by §§ 173-a. 3 of the Executive Law?**

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3 168471 12-22-11 **CHAR500 - 2011**

**5. Fee Instructions**

The filing fee depends on the organization's Registration Type. For details on Registration Type and filing fees, see the Instructions for Form CHAR500.

**Organization's Registration Type    Fee Instructions**

- **Article 7-A** Calculate the Article 7-A filing fee using the table in **part a** below. The EPTL filing fee is \$0.
- **EPTL** Calculate the EPTL filing fee using the table in **part b** below. The Article 7-A filing fee is \$0.
- **Dual** Calculate both the Article 7-A and EPTL filing fees using the tables in **parts a and b** below. Add the Article 7-A and EPTL filing fees together to calculate the total fee. Submit a single check or money order for the total fee.

**a) Article 7-A filing fee**

Total Support & Revenue	Article 7-A Fee
more than \$250,000	\$25
up to \$250,000 *	\$10

\* Any organization that contracted with or used the services of a professional fund raiser (PFR) or fund raising counsel (FRC) during the reporting period must pay an Article 7-A filing fee of \$25, regardless of total support and revenue.

**b) EPTL filing fee**

Net Worth at End of Year	EPTL Fee
Less than \$50,000	\$25
\$50,000 or more, but less than \$250,000	\$50
\$250,000 or more, but less than \$1,000,000	\$100
\$1,000,000 or more, but less than \$10,000,000	\$250
\$10,000,000 or more, but less than \$50,000,000	\$750
\$50,000,000 or more	\$1500

**6. Attachments - Document Attachment Check-List**

Check the boxes for the documents you are attaching.

**For All Filers**Filing Fee

☒ Single check or money order payable to "NYS Department of Law"

Copies of Internal Revenue Service Forms

☒ **IRS Form 990**

☒ All required schedules (including Schedule B)

☐ IRS Form 990-T

☐ **IRS Form 990-EZ**

☐ All required schedules (including Schedule B)

☐ IRS Form 990-T

☐ **IRS Form 990-PF**

☐ All required schedules (including Schedule B)

☐ IRS Form 990-T

**Additional Article 7-A Document Attachment Requirement**Independent Accountant's Report

☒ Audit Report (total support & revenue more than \$250,000)

☐ Review Report (total support & revenue \$100,001 to \$250,000)

☐ No Accountant's Report Required (total support & revenue not more than \$100,000)

SCH 2 (PFR)

STATEMENT 1

CLC HAS RETAINED THE SERVICES OF A FUNDRAISING CONSULTANT TO SUPPORT THE PLANNING AND IMPLEMENTATION OF CLC'S FUND DEVELOPMENT, PLANNED GIVING, AND 25TH ANNIVERSARY OUTREACH EFFORTS. AREAS OF SUPPORT INCLUDE ASSISTING WITH PROSPECT IDENTIFICATION, A WRITTEN FUND DEVELOPMENT PLAN AND TIMELINE, ASSISTANCE WITH CAMPAIGN DEVELOPMENT MATERIALS AS WELL AS GENERAL MONITORING OF CLC'S OUTREACH AND DEVELOPMENT PLANNING PROCESS.

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

**2011**

Open to Public Inspection

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

**A For the 2011 calendar year, or tax year beginning and ending**

<b>B</b> Check if applicable:  <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C Name of organization</b> COLUMBIA LAND CONSERVANCY, INC. Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite P.O. BOX 299 City or town, state or country, and ZIP + 4 CHATHAM, NY 12037-0299 <b>F Name and address of principal officer:</b> PETER R. PADEN SAME AS C ABOVE	<b>D Employer identification number</b> 22-2757332 <b>E Telephone number</b> (518) 392-5252 <b>G Gross receipts \$</b> 3,601,494. <b>H(a) Is this a group return for affiliates?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b) Are all affiliates included?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) <b>H(c) Group exemption number</b> ▶ <b>I Tax-exempt status:</b> <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527 <b>J Website:</b> ▶ WWW.CLCTRUST.ORG <b>K Form of organization:</b> <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ <b>L Year of formation:</b> 1986 <b>M State of legal domicile:</b> NY
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**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <u>CLC WORKS TO CONSERVE FARMLAND, FORESTS, WILDLIFE HABITAT, AND RURAL CHARACTER OF COLUMBIA COUNTY</u> <b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets. <b>3</b> Number of voting members of the governing body (Part VI, line 1a) <span style="float:right">3 14</span> <b>4</b> Number of independent voting members of the governing body (Part VI, line 1b) <span style="float:right">4 14</span> <b>5</b> Total number of individuals employed in calendar year 2011 (Part V, line 2a) <span style="float:right">5 15</span> <b>6</b> Total number of volunteers (estimate if necessary) <span style="float:right">6 65</span> <b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12 <span style="float:right">7a 0.</span> <b>b</b> Net unrelated business taxable income from Form 990-T, line 34 <span style="float:right">7b 0.</span>																	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h) <span style="float:right">1,254,807.</span> <b>9</b> Program service revenue (Part VIII, line 2g) <span style="float:right">43,540.</span> <b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d) <span style="float:right">15,698.</span> <b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) <span style="float:right">14,144.</span> <b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) <span style="float:right">1,328,189.</span>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">Prior Year</th> <th style="width:50%;">Current Year</th> </tr> <tr> <td>1,254,807.</td> <td>1,520,837.</td> </tr> <tr> <td>43,540.</td> <td>45,012.</td> </tr> <tr> <td>15,698.</td> <td>335,194.</td> </tr> <tr> <td>14,144.</td> <td>-13,203.</td> </tr> <tr> <td>1,328,189.</td> <td>1,887,840.</td> </tr> </table>	Prior Year	Current Year	1,254,807.	1,520,837.	43,540.	45,012.	15,698.	335,194.	14,144.	-13,203.	1,328,189.	1,887,840.				
Prior Year	Current Year																	
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1,328,189.	1,887,840.																	
<b>Expenses</b>	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3) <span style="float:right">12,319.</span> <b>14</b> Benefits paid to or for members (Part IX, column (A), line 4) <span style="float:right">0.</span> <b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) <span style="float:right">923,939.</span> <b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e) <span style="float:right">22,000.</span> <b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 153,197. <b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) <span style="float:right">611,599.</span> <b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) <span style="float:right">1,569,857.</span> <b>19</b> Revenue less expenses. Subtract line 18 from line 12 <span style="float:right">-241,668.</span>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">Prior Year</th> <th style="width:50%;">Current Year</th> </tr> <tr> <td>12,319.</td> <td>12,141.</td> </tr> <tr> <td>0.</td> <td>0.</td> </tr> <tr> <td>923,939.</td> <td>1,010,279.</td> </tr> <tr> <td>22,000.</td> <td>20,614.</td> </tr> <tr> <td>611,599.</td> <td>499,711.</td> </tr> <tr> <td>1,569,857.</td> <td>1,542,745.</td> </tr> <tr> <td>-241,668.</td> <td>345,095.</td> </tr> </table>	Prior Year	Current Year	12,319.	12,141.	0.	0.	923,939.	1,010,279.	22,000.	20,614.	611,599.	499,711.	1,569,857.	1,542,745.	-241,668.	345,095.
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-241,668.	345,095.																	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16) <span style="float:right">9,252,565.</span> <b>21</b> Total liabilities (Part X, line 26) <span style="float:right">885,461.</span> <b>22</b> Net assets or fund balances. Subtract line 21 from line 20 <span style="float:right">8,367,104.</span>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:50%;">Beginning of Current Year</th> <th style="width:50%;">End of Year</th> </tr> <tr> <td>9,252,565.</td> <td>8,536,367.</td> </tr> <tr> <td>885,461.</td> <td>76,640.</td> </tr> <tr> <td>8,367,104.</td> <td>8,459,727.</td> </tr> </table>	Beginning of Current Year	End of Year	9,252,565.	8,536,367.	885,461.	76,640.	8,367,104.	8,459,727.								
Beginning of Current Year	End of Year																	
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885,461.	76,640.																	
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**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

<b>Sign Here</b>	Signature of officer PETER R. PADEN, EXECUTIVE DIRECTOR Type or print name and title	Date
<b>Paid Preparer Use Only</b>	Print/Type preparer's name KATHERINE A. LIPPMAN, CPA Preparer's signature Firm's name ▶ DOWNEY, SWEENEY, FITZGERALD & CO., P.C. Firm's address ▶ 504 COTTAGE STREET SPRINGFIELD, MA 01104-3219	Date Check <input type="checkbox"/> if self-employed PTIN P00741645 Firm's EIN ▶ 04-2544008 Phone no. (413) 734-2163

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 to any question in this Part III ☒ **X****1** Briefly describe the organization's mission:

THE COLUMBIA LAND CONSERVANCY WORKS WITH THE COMMUNITY TO CONSERVE FARMLAND, FORESTS, WILDLIFE HABITAT, AND RURAL CHARACTER OF COLUMBIA COUNTY, STRENGTHENING CONNECTIONS BETWEEN PEOPLE AND THE LAND.

**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 ☒ 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 ☒ 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 and section 4947(a)(1) trusts 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 \$ 341,785. including grants of \$ ) (Revenue \$ 48,310.)  
**PUBLIC CONSERVATION AREA MANAGEMENT:** CLC OWNS OR MANAGES 10 PUBLIC CONSERVATION AREAS THAT ARE OPEN TO THE PUBLIC FOR HIKING AND OUTDOOR ENJOYMENT. THEY ARE MAINTAINED FOR WILDLIFE HABITAT, RECREATION, AND CLC'S EDUCATIONAL PROGRAMS. THE AREAS OFFER A DIVERSITY OF EXPERIENCES AND ECOSYSTEMS.

**4b** (Code: ) (Expenses \$ 424,319. including grants of \$ ) (Revenue \$ 6,187.)  
**COMMUNITY OUTREACH AND EDUCATION:** CLC WORKS TO COMMUNICATE ITS MISSION AND THE IMPORTANCE OF CONSERVATION THROUGHOUT THE COUNTY WITH AN ACTIVE AND AGGRESSIVE PROGRAM OF PUBLIC INFORMATION AND ADVOCACY FOR CONSERVATION VALUES. AMONG OTHER THINGS, CLC PROVIDES NUMEROUS INFORMATIONAL PROGRAMS TO COMMUNITY GROUPS, ISSUES FREQUENT PRESS RELEASES ABOUT OUR PROGRAMS AND PROJECTS, MAINTAINS A SUBSTANTIVE AND ACTIVE WEB SITE AND FACEBOOK PRESENCE, AND SUPPORTS A MONTHLY COLUMN ABOUT CONSERVATION MATTERS IN THE MAJOR LOCAL NEWSPAPER. CLC ALSO PROVIDES FREE, HANDS-ON, CUSTOMIZED EDUCATION PROGRAMS FOR DAYCARE CENTERS, AFTER-SCHOOL AND ENRICHMENT PROGRAMS, HOME-SCHOOL PROGRAMS, YOUTH GROUPS, SENIOR CENTERS, AND THE COUNTY'S PUBLIC AND PRIVATE SCHOOLS. CLC ALSO OFFERS REGULAR OUTDOOR EDUCATION AND RECREATION

**4c** (Code: ) (Expenses \$ 401,694. including grants of \$ ) (Revenue \$ 18,161.)  
**LAND PROTECTION ACTIVITIES:** CLC EMPLOYS A THREE-PRONGED PROGRAMMATIC APPROACH TO ITS LAND PROTECTION MISSION.

CONSERVATION EASEMENTS. CLC HELPS FAMILIES AND INDIVIDUALS PROTECT PRIVATELY OWNED LAND INCLUDING BUT NOT LIMITED TO WORKING FARMLANDS, BY CREATING, ACCEPTING AND STEWARDING CONSERVATION EASEMENTS, ENSURING THE OWNER'S CONSERVATION VISION WILL BE UPHELD FOREVER.

SUPPORT OF LAND USE PLANNING & COMMUNITY PROJECTS. WORKING WITH MUNICIPALITIES, COMMUNITIES AND CONSERVATION GROUPS, CLC ENCOURAGES LAND USE PLANNING PRACTICES AND PROCEDURES THAT SUPPORT PROTECTION OF THE COUNTY'S RICH CONSERVATION RESOURCES AND HELPS TO IMPLEMENT LOCAL

**4d** Other program services (Describe in Schedule O.)

(Expenses \$ 75,373. including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses **1,243,171.**



**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<b>1</b> X	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors?	<b>2</b> X	
<b>3</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	<b>3</b>	X
<b>4</b> <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	<b>4</b> X	
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	<b>5</b>	X
<b>6</b> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	<b>6</b>	X
<b>7</b> Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	<b>7</b> X	
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	<b>8</b>	X
<b>9</b> Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	<b>9</b>	X
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	<b>10</b> X	
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<b>11a</b> X	
<b>b</b> Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	<b>11b</b>	X
<b>c</b> Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	<b>11c</b>	X
<b>d</b> Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	<b>11d</b>	X
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<b>11e</b> X	
<b>f</b> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	<b>11f</b>	X
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	<b>12a</b> X	
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	<b>12b</b>	X
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	<b>13</b>	X
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?	<b>14a</b>	X
<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	<b>14b</b>	X
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	<b>15</b>	X
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	<b>16</b>	X
<b>17</b> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	<b>17</b> X	
<b>18</b> Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	<b>18</b> X	
<b>19</b> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	<b>19</b>	X
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	<b>20a</b>	X
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20b</b>	



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

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

**Part V Statements Regarding Other IRS Filings and Tax Compliance**Check if Schedule O contains a response to any question in this Part V ☐

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	15	
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
<b>1c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	15	
<b>2b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
<b>3b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
<b>4b</b>	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>5b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>5c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
<b>6b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7 Organizations that may receive deductible contributions under section 170(c).</b>			
<b>7a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	X	
<b>7b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
<b>7c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>7d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
<b>7e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>7f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>7g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
<b>7h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
<b>9 Sponsoring organizations maintaining donor advised funds.</b>			
<b>9a</b>	Did the organization make any taxable distributions under section 4966?		
<b>9b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
<b>10 Section 501(c)(7) organizations.</b> Enter:			
<b>10a</b>	Initiation fees and capital contributions included on Part VIII, line 12		
<b>10b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
<b>11 Section 501(c)(12) organizations.</b> Enter:			
<b>11a</b>	Gross income from members or shareholders		
<b>11b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
<b>12b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
<b>13 Section 501(c)(29) qualified nonprofit health insurance issuers.</b>			
<b>13a</b>	Is the organization licensed to issue qualified health plans in more than one state?		
<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.			
<b>13b</b>	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
<b>13c</b>	Enter the amount of reserves on hand		
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?		X
<b>14b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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

Check if Schedule O contains a response to any question in this Part VI

☒**Section A. Governing Body and Management**

	Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year ..... <b>1a</b> 14 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
<b>b</b> Enter the number of voting members included in line 1a, above, who are independent ..... <b>1b</b> 14		
<b>2</b> 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? ..... <b>2</b>	X	
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? ..... <b>3</b>		X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? ..... <b>4</b>		X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets? ..... <b>5</b>		X
<b>6</b> Did the organization have members or stockholders? ..... <b>6</b>		X
<b>7a</b> 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? ..... <b>7a</b>		X
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? ..... <b>7b</b>		X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b> The governing body? ..... <b>8a</b>	X	
<b>b</b> Each committee with authority to act on behalf of the governing body? ..... <b>8b</b>	X	
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O ..... <b>9</b>		X

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

	Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates? ..... <b>10a</b>		X
<b>b</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? ..... <b>10b</b>		
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? ..... <b>11a</b>	X	
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990. .... <b>11b</b>		
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13 ..... <b>12a</b>	X	
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? ..... <b>12b</b>	X	
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done ..... <b>12c</b>	X	
<b>13</b> Did the organization have a written whistleblower policy? ..... <b>13</b>	X	
<b>14</b> Did the organization have a written document retention and destruction policy? ..... <b>14</b>	X	
<b>15</b> 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?		
<b>a</b> The organization's CEO, Executive Director, or top management official ..... <b>15a</b>	X	
<b>b</b> Other officers or key employees of the organization ..... <b>15b</b>		X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? ..... <b>16a</b>		X
<b>b</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? ..... <b>16b</b>		

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed **NY**

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 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

**19** Describe in 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, physical address, and telephone number of the person who possesses the books and records of the organization: **JESSICA HOLMES - 518-392-5252**  
**49 MAIN STREET, CHATHAM, NY 12037**

**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**Check if Schedule O contains a response to any question in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."

- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ 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 (describe hours for related organizations in Schedule O)	(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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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) GALE BURY SECRETARY	2.50	X		X				0.	0.	0.
(2) SHELDON EVANS VICE CHAIR	20.00	X		X				0.	0.	0.
(3) SCOTT NEWMAN TRUSTEE	1.00	X						0.	0.	0.
(4) DEBORAH E. LANS VICE CHAIR	12.50	X		X				0.	0.	0.
(5) MARK LEVY TREASURER	2.00	X		X				0.	0.	0.
(6) JOAN SNYDER TRUSTEE	1.00	X						0.	0.	0.
(7) LEAH WILCOX TRUSTEE	1.00	X						0.	0.	0.
(8) ERIC LANE TRUSTEE	1.00	X						0.	0.	0.
(9) MARTHA MCMASTER TRUSTEE	5.00	X						0.	0.	0.
(10) HENRY TEPPER TRUSTEE	1.00	X						0.	0.	0.
(11) AMY BARR TRUSTEE	2.50	X						0.	0.	0.
(12) MELANIE BRANDSTON TRUSTEE	1.00	X						0.	0.	0.
(13) HILARY DUNNE FERRONE TRUSTEE	1.00	X						0.	0.	0.
(14) BREWSTER PETTUS TRUSTEE	1.00	X						0.	0.	0.
(15) MICHAEL POLEMIS CHAIR	10.00	X		X				0.	0.	0.
(16) JUDITH GRUNBERG TRUSTEE	1.00	X						0.	0.	0.
(17) PETER R. PADEN EXECUTIVE DIRECTOR	42.50			X				97,637.	0.	5,202.

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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) JESSICA HOLMES DIRECTOR OF FINANCE/ADMIN	40.00			X				70,601.	0.	13,039.
<b>1b Sub-total</b>								168,238.	0.	18,241.
<b>c Total from continuation sheets to Part VII, Section A</b>								0.	0.	0.
<b>d Total (add lines 1b and 1c)</b>								168,238.	0.	18,241.

**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 **0**

	Yes	No
<b>3</b> Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		X
<b>5</b> Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		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		
<b>2</b> Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	<b>0</b>	

**Part VIII Statement of Revenue**

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns .....	1a					
	b	Membership dues .....	1b					
	c	Fundraising events .....	1c	102,380.				
	d	Related organizations .....	1d					
	e	Government grants (contributions) .....	1e	140,235.				
	f	All other contributions, gifts, grants, and similar amounts not included above .....	1f	127,822.				
	g	Noncash contributions included in lines 1a-1f: \$ .....		448,813.				
	h	<b>Total.</b> Add lines 1a-1f .....		152,083.				
	Program Service Revenue	2 a	PCA MANAGEMENT	Business Code 531390	26,851.	26,851.		
b		LAND PROTECTION ACTIVI	531390	18,161.	18,161.			
c								
d								
e								
f		All other program service revenue .....						
g		<b>Total.</b> Add lines 2a-2f .....		45,012.				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) .....		61,537.			61,537.	
	4	Income from investment of tax-exempt bond proceeds .....						
	5	Royalties .....						
	6 a	Gross rents .....	(i) Real 25,961.	(ii) Personal				
		b	Less: rental expenses .....	4,502.				
		c	Rental income or (loss) .....	21,459.				
		d	Net rental income or (loss) .....		21,459.	21,459.		
	7 a	Gross amount from sales of assets other than inventory .....	(i) Securities 542,747.	(ii) Other 1,353,200.				
		b	Less: cost or other basis and sales expenses .....	464,352.	1,157,938.			
		c	Gain or (loss) .....	78,395.	195,262.			
		d	Net gain or (loss) .....		273,657.		273,657.	
	8 a	Gross income from fundraising events (not including \$ 102,380. of contributions reported on line 1c). See Part IV, line 18 .....	a	34,784.				
		b	Less: direct expenses .....	b	83,931.			
		c	Net income or (loss) from fundraising events .....		-49,147.		-49,147.	
	9 a	Gross income from gaming activities. See Part IV, line 19 .....	a					
		b	Less: direct expenses .....	b				
		c	Net income or (loss) from gaming activities .....					
	10 a	Gross sales of inventory, less returns and allowances .....	a	9,118.				
		b	Less: cost of goods sold .....	b	2,931.			
		c	Net income or (loss) from sales of inventory .....		6,187.	6,187.		
Miscellaneous Revenue			Business Code					
11 a	MISCELLANEOUS INCOME	531390	8,298.			8,298.		
b								
c								
d	All other revenue .....							
e	<b>Total.</b> Add lines 11a-11d .....		8,298.					
12	<b>Total revenue.</b> See instructions. ....		188,784.	72,658.	0.	294,345.		



**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) but are not required to complete columns (B), (C), and (D).

Check if Schedule O contains a response to any question in this Part IX ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	12,141.	12,141.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	168,238.	86,762.	60,482.	20,994.
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	655,000.	583,700.	13,474.	57,826.
8 Pension plan accruals and contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits	124,738.	101,320.	11,877.	11,541.
10 Payroll taxes	62,303.	50,945.	5,561.	5,797.
11 Fees for services (non-employees):				
a Management				
b Legal	16,240.	13,740.	2,500.	
c Accounting	13,468.		13,468.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	20,614.			20,614.
f Investment management fees	17,204.	14,340.	2,864.	
g Other	18,948.	14,152.	2,726.	2,070.
12 Advertising and promotion	3,771.	3,771.		
13 Office expenses	97,738.	76,184.	1,378.	20,176.
14 Information technology	36,167.	30,725.	1,977.	3,465.
15 Royalties				
16 Occupancy	70,686.	56,919.	6,136.	7,631.
17 Travel	3,421.	2,339.	954.	128.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	3,935.	2,170.	1,539.	226.
20 Interest	16,357.	15,891.	344.	122.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	76,206.	67,893.	6,141.	2,172.
23 Insurance	24,678.	19,087.	5,591.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a <b>TRADELAND EXPENSES</b>	22,929.	22,929.		
b <b>PROFESSIONAL DEVELOPMEN</b>	17,772.	11,750.	5,836.	186.
c <b>CATERING AND EVENT SERV</b>	16,918.	16,918.		
d <b>VEHICLE EXPENSE</b>	14,972.	14,972.		
e All other expenses	28,301.	24,523.	3,529.	249.
25 <b>Total functional expenses.</b> Add lines 1 through 24e	1,542,745.	1,243,171.	146,377.	153,197.
26 <b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)



**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	387,066.	<b>1</b>	575,789.
	<b>2</b> Savings and temporary cash investments .....	33,319.	<b>2</b>	233,747.
	<b>3</b> Pledges and grants receivable, net .....	152,020.	<b>3</b>	203,527.
	<b>4</b> Accounts receivable, net .....		<b>4</b>	
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>	
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....	47,218.	<b>7</b>	42,332.
	<b>8</b> Inventories for sale or use .....		<b>8</b>	8,546.
	<b>9</b> Prepaid expenses and deferred charges .....	43,941.	<b>9</b>	46,556.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 4,880,472.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 572,494.		
		5,194,532.	<b>10c</b>	4,307,978.
	<b>11</b> Investments - publicly traded securities .....	3,394,469.	<b>11</b>	3,117,892.
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
<b>15</b> Other assets. See Part IV, line 11 .....		<b>15</b>		
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	9,252,565.	<b>16</b>	8,536,367.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	56,467.	<b>17</b>	61,430.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	5,950.	<b>19</b>	4,250.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....	25,000.	<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....	715,000.	<b>23</b>	8,333.
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....	80,000.	<b>24</b>	
	<b>25</b> Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	3,044.	<b>25</b>	2,627.
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 .....	885,461.	<b>26</b>	76,640.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets .....	3,952,532.	<b>27</b>	4,152,695.
	<b>28</b> Temporarily restricted net assets .....	1,410,833.	<b>28</b>	1,300,815.
	<b>29</b> Permanently restricted net assets .....	3,003,739.	<b>29</b>	3,006,217.
	<b>Organizations that do not follow SFAS 117, check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>	
	<b>33</b> <b>Total net assets or fund balances</b> .....	8,367,104.	<b>33</b>	8,459,727.
<b>34</b> <b>Total liabilities and net assets/fund balances</b> .....	9,252,565.	<b>34</b>	8,536,367.	

**Part XI Reconciliation of Net Assets**Check if Schedule O contains a response to any question in this Part XI ☒

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	1,887,840.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	1,542,745.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	345,095.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	8,367,104.
<b>5</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>5</b>	-252,472.
<b>6</b>	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	<b>6</b>	8,459,727.

**Part XII Financial Statements and Reporting**Check if Schedule O contains a response to any question in this Part XII ☒

	Yes	No
<b>1</b> Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
<b>2a</b> Were the organization's financial statements compiled or reviewed by an independent accountant?		X
<b>2b</b> Were the organization's financial statements audited by an independent accountant?	X	
<b>2c</b> 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 in Schedule O.	X	
<b>d</b> If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
<b>3a</b> As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
<b>3b</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 in Schedule O and describe any steps taken to undergo such audits.		

Form 990 (2011)

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

**2011**

Open to Public  
Inspection

Name of the organization

COLUMBIA LAND CONSERVANCY, INC.

Employer identification number

22-2757332

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
- a ☐ Type I      b ☐ Type II      c ☐ Type III - Functionally integrated      d ☐ Type III - Other
- e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
- |                                                                                                                                                                                            | Yes | No |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? <b>11g(i)</b> |     |    |
| (ii) A family member of a person described in (i) above? <b>11g(ii)</b>                                                                                                                    |     |    |
| (iii) A 35% controlled entity of a person described in (i) or (ii) above? <b>11g(iii)</b>                                                                                                  |     |    |
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

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

Schedule A (Form 990 or 990-EZ) 2011

**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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	2,192,310.	971,997.	1,545,910.	1,254,807.	1,520,837.	7,485,861.
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>4 Total.</b> Add lines 1 through 3 .....	2,192,310.	971,997.	1,545,910.	1,254,807.	1,520,837.	7,485,861.
<b>5</b> 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) .....						979,209.
<b>6 Public support.</b> Subtract line 5 from line 4.						6,506,652.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>7</b> Amounts from line 4 .....	2,192,310.	971,997.	1,545,910.	1,254,807.	1,520,837.	7,485,861.
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....	207,115.	107,351.	75,098.	48,324.	61,537.	499,425.
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on .....						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>11 Total support.</b> Add lines 7 through 10 .....						7,985,286.
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					12	300,970.
<b>13 First five years.</b> 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 <b>stop here</b> .....						

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

<b>14</b> Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) .....	<b>14</b>	81.48 %
<b>15</b> Public support percentage from 2010 Schedule A, Part II, line 14 .....	<b>15</b>	87.59 %
<b>16a 33 1/3% support test - 2011.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....		
<b>b 33 1/3% support test - 2010.</b> 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 <b>stop here.</b> The organization qualifies as a publicly supported organization .....		
<b>17a 10% -facts-and-circumstances test - 2011.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		
<b>b 10% -facts-and-circumstances test - 2010.</b> 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 <b>stop here.</b> Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....		
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....		

Schedule A (Form 990 or 990-EZ) 2011

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

(Complete only if you checked the box on line 9 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) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose .....						
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513 .....						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge .....						
<b>6 Total.</b> Add lines 1 through 5 .....						
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons .....						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year .....						
<b>c</b> Add lines 7a and 7b .....						
<b>8 Public support</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>9</b> Amounts from line 6 .....						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 .....						
<b>c</b> Add lines 10a and 10b .....						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on .....						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>13 Total support</b> (Add lines 9, 10c, 11, and 12.)						

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

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

<b>15</b> Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f)) .....	<b>15</b>		%
<b>16</b> Public support percentage from 2010 Schedule A, Part III, line 15 .....	<b>16</b>		%

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

<b>17</b> Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)) .....	<b>17</b>		%
<b>18</b> Investment income percentage from 2010 Schedule A, Part III, line 17 .....	<b>18</b>		%

**19a 33 1/3% support tests - 2011.** 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 - 2010.** 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 ..... ☐

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Political Campaign and Lobbying Activities**

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

OMB No. 1545-0047

**2011**

**Open to Public  
Inspection**

▶ **Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.**  
▶ **See separate instructions.**

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

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

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

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

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

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

Name of organization <b>COLUMBIA LAND CONSERVANCY, INC.</b>	Employer identification number <b>22-2757332</b>
----------------------------------------------------------------	-----------------------------------------------------

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures ..... ▶ \$ 0.

3 Volunteer hours ..... 0.

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ..... ☐ Yes ☐ No

4a Was a correction made? ..... ☐ Yes ☐ No

b If "Yes," describe in Part IV.

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527  
exempt function activities ..... ▶ \$

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL,  
line 17b ..... ▶ \$

4 Did the filing organization file **Form 1120-POL** for this year? ..... ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990 or 990-EZ) 2011

LHA

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

**A** Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

**B** Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying) .....		978.													
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) .....		8,803.													
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) .....		9,781.													
<b>d</b> Other exempt purpose expenditures .....		1,532,964.													
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) .....		1,542,745.													
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.		227,137.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f) .....		56,784.													
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- .....		0.													
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- .....		0.													
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....			<input type="checkbox"/> Yes <input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
<b>2a</b> Lobbying nontaxable amount			228,493.	227,137.	455,630.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					683,445.
<b>c</b> Total lobbying expenditures			1,428.	9,781.	11,209.
<b>d</b> Grassroots nontaxable amount			57,123.	56,784.	113,907.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					170,861.
<b>f</b> Grassroots lobbying expenditures			132.	978.	1,110.

Schedule C (Form 990 or 990-EZ) 2011



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

For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

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

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

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

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

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

**Part IV** Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; and Part II-B, line 1. Also, complete this part for any additional information.

CLC ENGAGES IN LOBBYING ACTIVITY THROUGH ITS PARTICIPATION IN A LAND

TRUST LOBBY DAY IN ALBANY, NY WHERE IT SEEKS SUPPORT FOR STATE BUDGET

LINES THAT IMPACT CLC'S MISSION AND CONSERVATION IN GENERAL. ON OCCASION,

CLC LOBBIES FOR STATE AND FEDERAL LEGISLATION WITH REGARD TO CONSERVATION

ACTIVITIES AND MAY SEND OUT ACTION ALERTS TO OUR SUPPORTERS NOTIFYING

THEM OF IMPORTANT LEGISLATIVE ISSUES THAT IMPACT CONSERVATION.

**SCHEDULE D**  
**(Form 990)**Department of the Treasury  
Internal Revenue Service**Supplemental Financial Statements**

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

OMB No. 1545-0047

**2011****Open to Public  
Inspection****Name of the organization**

COLUMBIA LAND CONSERVANCY, INC.

**Employer identification number**

22-2757332

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....		
2 Aggregate contributions to (during year) .....		
3 Aggregate 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? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input checked="" type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input checked="" type="checkbox"/> 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.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a 156
b Total acreage restricted by conservation easements .....	2b 21,979.00
c Number of conservation easements on a certified historic structure included in (a) .....	2c 0
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d 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? .....

☒ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ 276

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ 73,391.

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

☐ Yes ☐ No

9 In Part XIV, 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" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (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 XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (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) Revenues included in 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 SFAS 116 (ASC 958) relating to these items:

a Revenues included in 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 are a significant use of its collection items

(check all that apply):

**a** ☐ Public exhibition

**d** ☐ Loan or exchange programs

**b** ☐ Scholarly research

**e** ☐ Other \_\_\_\_\_

**c** ☐ Preservation for future generations

**4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

**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" to 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 XIV and complete the following table:

	Amount
<b>c</b> Beginning balance	<b>1c</b>
<b>d</b> Additions during the year	<b>1d</b>
<b>e</b> Distributions during the year	<b>1e</b>
<b>f</b> Ending balance	<b>1f</b>

**2a** Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☐ No

**b** If "Yes," explain the arrangement in Part XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance	1,736,650.	1,680,450.	1,301,259.	1,838,682.	
<b>b</b> Contributions			82,000.	500.	
<b>c</b> Net investment earnings, gains, and losses	-65,263.	201,791.	329,606.	-481,803.	
<b>d</b> Grants or scholarships					
<b>e</b> Other expenditures for facilities and programs	65,040.	145,591.	32,415.	56,120.	
<b>f</b> Administrative expenses					
<b>g</b> End of year balance	1,606,347.	1,736,650.	1,680,450.	1,301,259.	

**2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

**a** Board designated or quasi-endowment ☐ \_\_\_\_\_ %

**b** Permanent endowment ☒ 91.00 %

**c** Temporarily restricted endowment ☒ 9.00 %

The percentages in 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:

(i) unrelated organizations

(ii) related organizations

	Yes	No
<b>3a(i)</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>3a(ii)</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>3b</b>	<input type="checkbox"/>	<input type="checkbox"/>

**b** If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? ☐

**4** Describe in Part XIV the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.** 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
<b>1a</b> Land		3,011,508.		3,011,508.
<b>b</b> Buildings		651,862.	111,859.	540,003.
<b>c</b> Leasehold improvements				
<b>d</b> Equipment		356,703.	285,624.	71,079.
<b>e</b> Other		860,399.	175,011.	685,388.
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				4,307,978.

**Part VII Investments - Other Securities.** 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) .....		
(I) .....		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 12.) ►		

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) .....		
(2) .....		
(3) .....		
(4) .....		
(5) .....		
(6) .....		
(7) .....		
(8) .....		
(9) .....		
(10) .....		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 13.) ►		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) .....	
(2) .....	
(3) .....	
(4) .....	
(5) .....	
(6) .....	
(7) .....	
(8) .....	
(9) .....	
(10) .....	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15.) ►	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) SECURITY DEPOSITS	1,627.	
(3) AGENCY FUNDS	1,000.	
(4) .....		
(5) .....		
(6) .....		
(7) .....		
(8) .....		
(9) .....		
(10) .....		
(11) .....		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.) ►		2,627.

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

**Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements**

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	1,887,840.
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	1,542,745.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	345,095.
4	Net unrealized gains (losses) on investments	4	-243,926.
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	-8,546.
9	Total adjustments (net). Add lines 4 through 8	9	-252,472.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	92,623.

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

1	Total revenue, gains, and other support per audited financial statements	1	1,723,865.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	-243,926.
b	Donated services and use of facilities	2b	5,791.
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV.)	2d	83,931.
e	Add lines 2a through 2d	2e	-154,204.
3	Subtract line 2e from line 1	3	1,878,069.
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	17,204.
b	Other (Describe in Part XIV.)	4b	-7,433.
c	Add lines 4a and 4b	4c	9,771.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	1,887,840.

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

1	Total expenses and losses per audited financial statements	1	1,631,242.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	5,791.
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV.)	2d	99,910.
e	Add lines 2a through 2d	2e	105,701.
3	Subtract line 2e from line 1	3	1,525,541.
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	17,204.
b	Other (Describe in Part XIV.)	4b	
c	Add lines 4a and 4b	4c	17,204.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	1,542,745.

**Part XIV Supplemental Information**

Complete this part to 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, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART II, LINE 9: CLC DOES NOT REPORT CONSERVATION EASEMENTS IN REVENUE**

**AND EXPENSE STATEMENTS OR AS A BALANCE SHEET ITEM. THE FOOTNOTE FROM CLC'S**

**AUDITED FINANCIAL STATEMENTS REGARDING CONSERVATION EASEMENTS READS AS**

**FOLLOWS: CONSERVATION EASEMENTS ARE VOLUNTARY LEGAL AGREEMENTS BY WHICH**

**LANDOWNERS CAN ELECT TO ENSURE PERMANENT PROTECTION OF THE CONSERVATION**

**VALUES OF THEIR PROPERTY. EASEMENT DONORS CONTINUE TO OWN THE PROPERTY IN**

**FEE, WITH THE RIGHT TO LIVE ON, RENT, MORTGAGE OR CONVEY THEIR LAND**

**SUBJECT ONLY TO THE USE RESTRICTIONS AND, SOMETIMES, SITE PLANNING**

**Part XIV** Supplemental Information (continued)

CONSTRAINTS SET OUT IN THE EASEMENT. CLC DOES NOT ATTRIBUTE VALUE TO THE EASEMENTS HELD. EASEMENTS ARE NOT MARKETABLE INTERESTS IN REAL ESTATE, AND HAVE NO SEGREGABLE ECONOMIC VALUE TO CLC. INDEED, THE EASEMENTS IMPOSE ON CLC A PERPETUAL OBLIGATION TO MONITOR AND STEWARD THE PROPERTIES, THE COSTS OF WHICH ARE AN ON-GOING EXPENSE IN ITS ANNUAL BUDGET.

PART V, LINE 4: PROCEEDS FROM PERMANENTLY RESTRICTED FUNDS ARE USED TO MANAGE PUBLIC CONSERVATION AREAS AND TO PROVIDE FUNDING FOR UPKEEP AND IMPROVEMENT OF HOUSING THAT THE ORGANIZATION OWNS WITH THE PRIMARY PURPOSE OF PROVIDING QUALITY, AFFORDABLE HOUSING FOR STAFF.

## PART XI, LINE 8 - OTHER ADJUSTMENTS:

CHANGE IN INVENTORY	-8,546.
---------------------	---------

## PART XII, LINE 2D - OTHER ADJUSTMENTS:

DIRECT FUNDRAISING EXPENSES	83,931.
-----------------------------	---------

## PART XII, LINE 4B - OTHER ADJUSTMENTS:

COGS	-2,931.
------	---------

RENTAL HOUSE EXPENSE	-4,502.
----------------------	---------

TOTAL TO SCHEDULE D, PART XII, LINE 4B	-7,433.
----------------------------------------	---------

## PART XIII, LINE 2D - OTHER ADJUSTMENTS:

RENTAL HOUSE EXPENSE	4,502.
----------------------	--------

PURCHASES	11,477.
-----------	---------

DIRECT FUNDRAISING EXPENSES	83,931.
-----------------------------	---------

TOTAL TO SCHEDULE D, PART XIII, LINE 2D	99,910.
-----------------------------------------	---------

Department of the Treasury  
Internal Revenue Service

**Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.**  
**▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.**

OMB No. 1545-0047

2011

## Open To Public Inspection

Name of the organization

COLUMBIA LAND CONSERVANCY, INC.

Employer identification number
22-2757332

## Part I

### Fundraising Activities.

**Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a ☒ Mail solicitations  
b ☒ Internet and email solicitations  
c ☐ Phone solicitations  
d ☒ In-person solicitations  
e ☒ Solicitation of non-government grants  
f ☒ Solicitation of government grants  
g ☒ Special fundraising events

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes☐ No

- b** If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
LINDA LONDON - 198 EUCLID AVENUE, ALBANY, NY 12208	FUNDRAISING CONSULTANT		X	0.	22,000.	-22,000.
<b>Total</b> .....					22,000.	-22,000.

- 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

NY, MA, NJ, PA, CT



**Part II Fundraising Events.** Complete if the organization answered "Yes" to 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
	COUNTRY BBQ		NONE	(add col. (a) through col. (c))
	(event type)	(event type)	(total number)	
<b>Revenue</b>				
<b>1</b> Gross receipts .....	128,431.			128,431.
<b>2</b> Less: Charitable contributions .....	94,441.			94,441.
<b>3</b> Gross income (line 1 minus line 2) .....	33,990.			33,990.
<b>Direct Expenses</b>				
<b>4</b> Cash prizes .....				
<b>5</b> Noncash prizes .....				
<b>6</b> Rent/facility costs .....				
<b>7</b> Food and beverages .....				
<b>8</b> Entertainment .....				
<b>9</b> Other direct expenses .....	83,931.			83,931.
<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) .....				( 83,931.)
<b>11</b> Net income summary. Combine line 3, column (d), and line 10 .....				-49,941.

**Part III Gaming.** Complete if the organization answered "Yes" to 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))
<b>Revenue</b>				
<b>1</b> Gross revenue .....				
<b>Direct Expenses</b>				
<b>2</b> Cash prizes .....				
<b>3</b> Noncash prizes .....				
<b>4</b> Rent/facility costs .....				
<b>5</b> Other direct expenses .....				
<b>6</b> 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	
<b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) .....				( )
<b>8</b> Net gaming income summary. Combine line 1, column d, and line 7 .....				

**9** Enter the state(s) in which the organization operates gaming activities: \_\_\_\_\_**a** Is the organization licensed to operate 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 operate 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 operated in:
- |                                      |            |   |
|--------------------------------------|------------|---|
| <b>a</b> The organization's facility | <b>13a</b> | % |
| <b>b</b> An outside facility         | <b>13b</b> | % |
- 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.** Complete this part to 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 complete this part to provide any additional information (see instructions).

**SCHEDULE G, PART I, LINE 2B, COLUMN (V): CLC HAS RETAINED THE SERVICES OF A FUNDRAISING CONSULTANT TO SUPPORT THE PLANNING AND IMPLEMENTATION OF CLC'S FUND DEVELOPMENT, PLANNED GIVING, AND 25TH ANNIVERSARY OUTREACH EFFORTS. AREAS OF SUPPORT INCLUDE ASSISTING WITH PROSPECT IDENTIFICATION, A WRITTEN FUND DEVELOPMENT PLAN AND TIMELINE, ASSISTANCE WITH CAMPAIGN DEVELOPMENT MATERIALS AS WELL AS GENERAL MONITORING CLC'S OUTREACH AND DEVELOPMENT PLANNING PROCESS.**

**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" to Form 990, Part IV, line 21 or 22.**

**▶ Attach to Form 990.**

OMB No. 1545-0047

**2011**

**Open to Public  
Inspection**

Name of the organization

**COLUMBIA LAND CONSERVANCY, INC.**

**Employer identification number**  
**22-2757332**

**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 Governments and Organizations in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ☐ **▶**

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
LAND TRUST ALLIANCE 112 SPRING STREET - SUITE 205 SARATOGA SPRINGS, NY 12866	04-2751357	501(C)(3)	8,500.	0.			TO SUPPORT THE NY LAND TRUST ALLIANCE PROGRAM EFFORTS IN ADVOCATING (PRIMARILY THE NY STATE

- 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 **▶** **1.**

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

**Schedule I (Form 990) (2011)**

**SEE PART IV FOR COLUMN (H) DESCRIPTIONS**

**Part III****Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

**Part IV****Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: SMALL DONATIONS ARE MADE TO ORGANIZATIONS THAT  
HAVE SIMILAR MISSIONS TO CLC.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: LAND TRUST ALLIANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: TO SUPPORT THE NY LAND TRUST  
ALLIANCE PROGRAM EFFORTS IN ADVOCATING (PRIMARILY THE NY STATE  
LEGISLATURE) FOR NY LAND TRUSTS INTERESTS

**SCHEDULE M  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Noncash Contributions**

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

OMB No. 1545-0047

**2011**

**Open to Public  
Inspection**

Name of the organization

**COLUMBIA LAND CONSERVANCY, INC.**

Employer identification number

**22-2757332**

**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	2	112,813.	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 .....	X	6	0.	NA
15 Real estate - Residential .....				
16 Real estate - Commercial .....				
17 Real estate - Other .....	X	1	336,000.	APPRAISED VALUE
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 IV, Donee Acknowledgement .....

29

3

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? .....

	Yes	No
30a		X
31	X	
32a		X
33		

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

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? .....

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

b If "Yes," describe in Part II.

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

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

Schedule M (Form 990) (2011)

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 33: THE EASEMENTS THAT WERE DONATED HOLD NO VALUE  
FOR THE ORGANIZATION, AND ARE THEREFORE NOT RECORDED AS AN ASSET, NOR  
IS THE CONTRIBUTION RECORDED AS REVENUE.

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

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

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.  
▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

**2011**

Open to Public  
Inspection

Name of the organization

COLUMBIA LAND CONSERVANCY, INC.

Employer identification number  
22-2757332

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

STRENGTHENING CONNECTIONS BETWEEN PEOPLE AND THE LAND.

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

OPPORTUNITIES FOR THE GENERAL PUBLIC TO PROMOTE AN APPRECIATION FOR THE  
NATURAL RESOURCES AND LANDSCAPES WITHIN COLUMBIA COUNTY. CLC PROVIDED  
193 FREE EDUCATIONAL AND RECREATIONAL PROGRAMS, REACHING 3,667 PEOPLE  
DURING 2011.

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

CONSERVATION EFFORTS, INCLUDING FUNDRAISING, ACQUISITION, SITE  
PLANNING, AND THE LIKE FOR CREATION OF PUBLIC OPEN SPACES, TRAIL  
BUILDING, TRAINING OF LOCAL OFFICIALS AND VOLUNTEERS AND STEWARDSHIP OF  
LAND FOR HABITAT, RECREATION, AND EDUCATION.

SUPPORT FOR AGRICULTURE. CLC BELIEVES THAT A STRONG AND VIBRANT FARM  
SECTOR IS, AMONG OTHER THINGS, AN IMPORTANT CONSERVATION ASSET TO THIS  
AREA, WHERE CENTURIES OF FARMING HAVE LEFT AN INDELIBLE MARK ON THE  
COUNTY'S LANDS, CONSERVATION RESOURCES AND SCENIC ATTRIBUTES. CLC  
WORKS TO FIND WAYS TO SUPPORT AN ACTIVE AND RESURGENT AGRICULTURAL  
COMMUNITY, INCLUDING THE DEVELOPMENT AND IMPLEMENTATION OF INNOVATIVE  
STRATEGIES TO PROVIDE NEW FARMERS AND FARMERS WHO WANT TO EXPAND THEIR  
OPERATION TO FARM LAND THAT MIGHT OTHERWISE BE UNAFFORDABLE TO THEM.

CLC HAS 21,979 ACRES UNDER EASEMENT AS OF DECEMBER 31, 2011.



Name of the organization

COLUMBIA LAND CONSERVANCY, INC.

Employer identification number

22-2757332

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

EASEMENT STEWARDSHIP AND MANAGEMENT: CLC IS RESPONSIBLE TO ENSURE THAT THE GOALS OF EVERY EACH CONSERVATION EASEMENT CLC HOLDS ARE RESPECTED IN PERPETUITY. CLC MONITORS ITS EASEMENT PROPERTIES (21,979 ACRES AT THE END OF 2011) ANNUALLY (ALL SITES ARE AERIALY MONITORED AND/OR VISITED IN PERSON BY A STAFF PERSON IN ALTERNATING YEARS) TO ENSURE THE TERMS OF THE EASEMENT ARE BEING UPHELD AND APPROPRIATE ACTION IS TAKEN IN ACCORDANCE WITH BEST PROFESSIONAL STANDARDS AND PRACTICES IF AND WHEN NECESSARY.

EXPENSES \$ 75,373. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 2: TWO TRUSTEES ARE HUSBAND AND WIFE.

FORM 990, PART VI, SECTION B, LINE 11: MANAGEMENT, WITH ASSISTANCE FROM THE AUDITORS, PRESENTS THE FORM 990 TO THE BOARD OF TRUSTEES, AT ONE OF THEIR REGULARLY SCHEDULED MEETINGS, FOR THEIR REVIEW AND APPROVAL BEFORE IT IS FILED WITH THE IRS. THE TRUSTEES RECEIVE A REVIEW COPY OF THE COMPLETE FORM ABOUT A WEEK PRIOR TO THE MEETING.

FORM 990, PART VI, SECTION B, LINE 12C: CLC'S GOVERNANCE COMMITTEE, COMMITTEE CHAIRS, AND EXECUTIVE DIRECTOR ARE RESPONSIBLE FOR MONITORING AND ENFORCING COMPLIANCE WITH CONFLICT OF INTEREST DISCLOSURES.

FORM 990, PART VI, SECTION B, LINE 15A: THE EXECUTIVE DIRECTOR REVIEW COMMITTEE MEETS ANNUALLY, SURVEYS THE BOARD AND STAFF REGARDING PERFORMANCE, AND MEETS WITH THE EXECUTIVE DIRECTOR TO PERFORM A PERFORMANCE REVIEW. THE FULL BOARD IS GIVEN A SUMMARY OF THE REVIEW.

Name of the organization

COLUMBIA LAND CONSERVANCY, INC.

Employer identification number

22-2757332

FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS AND THE  
CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC UPON REQUEST.  
FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE AND UPON  
REQUEST.

FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:

NET UNREALIZED LOSSES ON INVESTMENTS:	-243,926.
CHANGE IN INVENTORY	-8,546.
TOTAL TO FORM 990, PART XI, LINE 5	-252,472.

FORM 990, PART XII, LINE 2C

AUDIT COMMITTEE PROCEDURE

CLC HAS AN AUDIT/INVESTMENT COMMITTEE WHO IS RESPONSIBLE FOR THE  
AUDITOR HIRE PROCESS AND FOR REVIEWING AND APPROVING THE AUDITED  
FINANCIAL STATEMENTS AND THE FORM 990 BEFORE THEY ARE PRESENTED TO THE  
BOARD OF TRUSTEES. MANAGEMENT AND/OR THE AUDIT FIRM PROVIDES THE  
COMMITTEE WITH REGULAR UPDATES THROUGHOUT THE ANNUAL AUDIT PROCESS AND  
THE COMMITTEE IS ENCOURAGED TO CONTACT THE AUDIT FIRM DIRECTLY WITH ANY  
QUESTIONS OR CONCERNS.