Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Α	For t	he 2022 calen	dar year, or tax	year begin	ıning 7,	/01	, 202	22, aı	nd endin	i g 6	/30		, 20 202	23	
В	Check	if applicable:	С								D E	mployer i	dentification n	umber	
	А	ddress change	The Wildl	ands Co	nservai	ncv					3	33-06	76450		
	\square_{N}	ame change	39611 Oak									elephone			
		nitial return	Oak Glen,	CA 923	99							200-7	97-8507		
	\vdash		·									109-1	91-0301		
		nal return/terminated											Ċ 00	640	000
	\vdash	mended return										ross recei		<u>,643,</u>	
	Α	pplication pending		ress of principa	^{ıl officer:} Fı	azier H	aney						r subordinates?	H	X No
			Same As C	Above						H(D) Are a	all subord o." attach	inates inc a list. Se	cluded? e instructions.	Yes	No
I	Tax-	-exempt status:	X 501(c)(3)	501(c) ()	(insert no.)	4947(a)(1)	or	527						
J	We	bsite: ww	w.wildland	dsconse	rvancy.	org				H(c) Grou	ıp exempt	ion numb	er		
K	Forn	n of organization:	X Corporation	Trust	Association			L Yea	ar of format	ion: 19	95	M State	e of legal domic	ile: CA	
Pa	rt I	Summar	ν			1									
	1		ibe the organiza	tion's miss	ion or mos	t significant	activities:T1	he	Wildl	ands	Conse	ervan	cv's du	al	
-			is to pres												
Governance			s so that										<u> </u>		
na		programs		21111101	<u> </u>	<u> </u>			<u> </u>		<u> </u>				
Ver	2	Check this bo	ox lif the	organizatio	n discontir	nued its one	rations or di	snos	ed of mo	ore than	25% 0	f its ne	t assets		
පි	3		oting members										3		11
৹ধ	4		dependent votir	-			•						4		$\frac{11}{11}$
<u>ie</u>	5		r of individuals e										5		91
Activities &	6		r of volunteers (6		900
Aci	7a	Total unrelate	ed business rev	enue from	Part VIII, c	column (C),	line 12					🗀	7a		0.
	b	Net unrelated	d business taxal	ole income	from Form	990-T, Pari	t I, line 11						7b		0.
											Prior Y	'ear	Cui	rrent Ye	ar
	8	3 (, , ,								. 1	9,41	2,620	0. 4	,582,	042.
ΞĒ	9		vice revenue (Pa								•	4,694		,253,	
Revenue	10		ncome (Part VII									2,263		,322,	
æ	11		ie (Part VIII, col									1,61		,074,	
	12		e – add lines 8									1,186		,232,	
	13		imilar amounts								, , ,	_,		<u>, </u>	
	14		I to or for memb				-								
	15	•	er compensation	-							3,709,372. 4,350,03				025
es	10										3,70	9,312	2. 4	, 330,	033.
Expenses	16a	Professional	fundraising fees	s (Part IX, i	column (A)), line i le).									
ğ	b	Total fundrais	sing expenses (Part IX, co	lumn (D), l	line 25)	Į	565	,292.						
Ш	17	Other expens	ses (Part IX, col	umn (A), li	nes 11a-11	ld, 11f-24e).					5,12	2,003	3. 5	,475,	310.
	18	Total expens	es. Add lines 13	3-17 (must	equal Part	IX, column	(A), line 25)					1,37		,825,	
	19	Revenue less	s expenses. Sub	otract line 1	8 from line	e 12				. 1		9,81		,407,	
Jo S												urrent Y		d of Yea	
anc anc	20	Total assets	(Part X, line 16))								7,639		,959,	
Net Assets	21		es (Part X, line									7,086		,720,	
et.	22	Not accets o	r fund balances.	Subtract li	ino 21 fron	a lina 20									
2 <u>i</u>	22			. Subtract i	1116 21 11011	1 11116 20				· 16	00,87	0,553	3. 109	,239,	3/1.
	art II	Signatui													
Unde	er pena plete. D	Ities of perjury, I de Declaration of preparation	eclare that I have exa arer (other than office	amined this retuer) is based on	urn, including all information	accompanying s	chedules and sta rer has any know	atemei wledae	nts, and to	the best of	my know	ledge and	d belief, it is tru	e, correct,	and
				<u> </u>											
		Signature of	officer							Date					
Sig	gn	Signature of	onicei												
He	re		er Haney						E	cecut	ive	Dir.			
		71 1.	t name and title		_										
		Print/Type	oreparer's name		Preparer's s	signature			Date		Check	Х і	f PTIN		
Pa	id	James	N. Kenned	У	James	N. Kenn	edy		4/29/	/24	self-ei	nployed	P0140	0050	
	epar			dy & Ke	_	CPAs	-		-				•		
Us	e Or	ily Firm's addr		•		Suite	201				Firm's	EIN	95-6285	205	
				ernardi:							Phone			-5048	
Mar	v the	IRS discuss th	nis return with th				structions							es	No
	,	(ab								4 4		

rai	Check if Schedule O contains a response or note to any line in this Part III
1	· · · · · · · · · · · · · · · · · · ·
•	The Wildlands Conservancy's dual mission is to preserve the beauty and biodiversity
	of the earth and to provide programs so that children may know the wonder and joy of
	nature.
2	Did the organization undertake any significant program services during the year which were not listed on the prior
	Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
	and revenue, if any, for each program service reported.
10	(Code:) (Expenses \$ 6,262,535. including grants of \$) (Revenue \$)
	See Schedule 0
1h	(Code:) (Expenses \$ 1,222,184. including grants of \$) (Revenue \$)
	See Schedule 0
4 c	(Code:) (Expenses \$714,054. including grants of \$) (Revenue \$)
	See Schedule 0
	bee beneatte o
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
/10	Total program service expenses 9, 198, 773

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

Form 990 (2022) The Wildlands Conservancy Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III.	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If a "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I.	25a		Х
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? If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III.	27		Х
	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," complete Schedule L, Part IV	28a	Х	
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b	Χ	
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV.	28c		Χ
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Χ	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	30		Χ
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		Χ
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI.	37		Χ
	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		Yes	. No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable		162	140
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Х	
ВΛΛ	(gambing) winnings to prize winners:		Δ 000 (0000

Form 990 (2022) The Wildlands Conservancy

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

			res	NO
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 91			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Χ
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	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)?	4a		Х
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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 as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Х
	If "Yes," indicate the number of Forms 8282 filed during the year	_		37
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899	7f		Λ
h	as required?	7g		
8	Form 1098-C?	7h		
•	organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
a	Note: See the instructions for additional information the organization must report on Schedule O.	ıJa		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			٠,
	excess parachute payment(s) during the year?	15		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would			
	result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	TEF 801051 00101100	_		

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year..... 11 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. **b** Enter the number of voting members included on line 1a, above, who are independent.... 11 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? See Schedule 0 Χ 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?..... 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... Χ X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 5 Χ Did the organization have members or stockholders?..... 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7h Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... X 8a X **b** Each committee with authority to act on behalf of the governing body?..... 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O..... 9 **Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10a Did the organization have local chapters, branches, or affiliates?..... 10a Χ 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? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. Χ 12a Did the organization have a written conflict of interest policy? If "No," go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done ... See .Schedule .0 Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ 14 Did the organization have a written document retention and destruction policy?..... Χ 14 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? X a The organization's CEO, Executive Director, or top management official. See . Schedule. . O. 15a **b** Other officers or key employees of the organization..... 15b X If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... 16a X **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?... Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Another's website X Upon request Own website Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records.

Jennifer Francis 39611 Oak Glen Road, Unit 12 Oak Glen Ca 92399 909-797-8507

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any relation	ed organiz	ation	com	npen	nsate	ed any	y cu	rrent officer, direct	or, or trustee.	
_				(C))					
(A) Name and title	(B) Average hours per	Position (do not check more than one box, unless person is both an officer and a director/trustee)					on	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W- <u>2</u> /1099- MISC/1099-NEC)	(W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(1) David Myers	60									
President	0			Χ				144,723.	0.	57,168.
(2) Frazier Haney	65									
Executive Dir.	0			Χ				138,858.	0.	27,331.
(3) Jennifer Malone	50									_
Secretary	0			Χ				98,853.	0.	10,950.
(4) Jennifer Francis	50									
Controller/CFO	0			Χ				90,842.	0.	1,879.
(5) Emily Gelbaum	5									
Director	0	Χ						0.	0.	0.
(6) Daniel Gelbaum	5									
Director	0	Χ						0.	0.	0.
(7) Carl Pope	5									
Director	0	Х						0.	0.	0.
(8) April Sall	5									_
Director	0	Х						0.	0.	0.
(9) Joan Taylor	5									_
Director	0	Х						0.	0.	0.
(10) Charles Thomas	5									
Director	0	Х						0.	0.	0.
(11) Eric Helmle	5									
Director	0	Х						0.	0.	0.
(12) Chris Carillo	5									
Director	0	Х						0.	0.	0.
(13) Matt Ritter	5									
Director	0	Х						0.	0.	0.
(14)										

Form 990 (2022) The Wildlands Conservan	су								33-067645	0 Page 8
Part VII Section A. Officers, Directors, Tru		Key	Em	•		es, a	nc	l Highest Com	pensated Emp	loyees (continued)
(A) Name and title	Average hours per week	offic	, unie cer ar	nd a	sition more erson directo	than o is both or/truste	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other
	(list any hours for related organiza - tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099- MISC/1099-NEC)	related organizations (W-2/1099- MISC/1099-NEC)	compensation from the organization and related organizations
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Subtotal								473,276.	0.	<u> </u>
c Total from continuation sheets to Part VII, Section d Total (add lines 1b and 1c)									0.	
2 Total number of individuals (including but not limited										
from the organization 2										Yes No
3 Did the organization list any former officer, direction line 1a? If "Yes,"complete Schedule J for such										. 3 X
4 For any individual listed on line 1a, is the sum of the organization and related organizations greate such individual	er than \$1	50,00	00?	If "	Yes,	" com	ple	ete Schedule J for	from	. 4 X
5 Did any person listed on line 1a receive or accrue for services rendered to the organization? If "Yes	e comper s," comple	nsatio ete S	n fro	om dule	any J fo	unrel or suc	ate :h p	ed organization or person	individual	. 5 X
Section B. Independent Contractors 1 Complete this table for your five highest compensus	catod ind	onon	dont		atrac	otors :	tha	t received more th	222 \$100 000 of	
compensation from the organization. Report compen	sation for	the ca	alen	dar	year	endin	ig v	with or within the or	ganization's tax yea	r.
(A) Name and business addi	ess							(B) Description of		(C) Compensation
AEA Remodeling 13571 Grassland St. Yucaipa			2					Construction		414,953.
Rustic Built, LLC 20416 Clay Pigeon Ct. Be WRA Environmental Consultants 2169-G E. Fr	-			an	Raf	ael	C	Consulting		1,045,311. 197,495.
	WRA Environmental Consultants 2169-G E. Francisco Blvd San Rafael, C Consulting PIP Printing 4093 Market St. Riverside, CA 92501 Printing								215,138.	
Corner Bit 10700 Hearst Rd. Willits, CA 95490 Road Work								142,848.		
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 7										

		Check if Schedule O contains a	response or note to an	y line in this Part V	III		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants, and Other Similar Amounts	1a b c d e f	Membership dues Fundraising events Related organizations Government grants (contributions) All other contributions, gifts, grants, and	1a				
Contributi and Othe	g h	Noncash contributions included in	1f 4,147,355. 1g 334,521.	4,582,042.			
		Totally last lines its initial lines.	Business Code	4,302,042.			
Program Service Revenue	2a b	Land Lease		1,253,506.	1,253,506.		
m Servik	d e						
Jra	f	All other program service revenue.					
Š.	q	Total. Add lines 2a-2f		1,253,506.			
	3	Investment income (including dividen other similar amounts)		213,646.	213,646.		
	4		·				
	5	Royalties		1,076,595.	1,076,595.		
	_	(i) Real	(ii) Personal				
		Gross rents 6a					
		Less: rental expenses 6b					
		Rental income or (loss) 6c					
	d	Net rental income or (loss)					
	7a Gross amount from (i) Securities (ii) Other						
		sales of assets					
		Less: cost or other basis and sales expenses 7b 25,8	320. 10385580.				
	С	Gain or (loss) $7c$ -2	25. 4,109,127.				
	d	Net gain or (loss)	<u> </u>	4,108,902.	4,108,902.		
Other Revenue	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	- 8a				
er	b	Less: direct expenses	8b				
Ή		Net income or (loss) from fundrais					
)		Gross income from gaming activities. See Part IV, line 19	9a				
	b	Less: direct expenses	9b				
	С	Net income or (loss) from gaming	activities				
	1 0 a	Gross sales of inventory, less returns and allowances	10a				
	b	Less: cost of goods sold	1 0b				
	С	Net income or (loss) from sales of	inventory				
<u>s</u>			Business Code				
e SC	11a	Sale of Livestock	900099	368,908.	368,908.		
cellaneous Revenue	b	Sale of Livestock Other Income Extension Pmt Income All other revenue	900099	238,298.	238,298.		
še e	С	Extension Pmt Income	900099	233,333.	233,333.		
Re	d	All other revenue		157,307.	157,307.		
Σ		Total. Add lines 11a-11d		997,846.			
		Total revenue. See instructions		12.232.537.	7.650.495.	0.	0.

Form 990 (2022) The Wildlands Conservancy 33
Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a re	sponse or note to any			
Do i 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21		·		·
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	473,276.	0.	473,276.	0.
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	3,143,728.	2,803,302.	105,445.	234,981.
8	Pension plan accruals and contributions	3,143,720.	2,003,302.	103,443.	234, 901.
8	(include section 401(k) and 403(b) employer contributions)	70,711.	54,447.	11,314.	4,950.
9	Other employee benefits	372,601.	286,903.	59,616.	26,082.
10	Payroll taxes	289,719.	211,443.	57,996.	20,280.
11	Fees for services (nonemployees):		,	.,	
а	Management				
	Legal	86,523.	86,523.		
С	Accounting	38,524.	55,525	38,524.	
d	Lobbying	96,000.	96,000.		
е	Professional fundraising services. See Part IV, line 17	,			
f	Investment management fees				
_	Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule 0.)	361,391.	361,391.		
13	Office expenses	571,409.	300,271.	85,167.	185,971.
14	Information technology	371,403.	300,271.	03,107.	100,011.
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest	436,043.	436,043.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	1,063,162.	820,240.	172,951.	69,971.
23	Insurance	509,533.	509,533.		
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
а	Repairs/Maintenance/Utilities	954,530.	954,530.		
b	Property Tax	780,712.	780,712.		
С		350,334.	270,286.	56,991.	23,057.
d		169,694.	169,694.		
e	All other expenses	57,455.	57,455.		
25	Total functional expenses. Add lines 1 through 24e	9,825,345.	8,198,773.	1,061,280.	565,292.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)				

Form 990 (2022) The Wildlands Conservancy Part X Balance Sheet

		Check if Schedule O contains a response or note to an	y line in this Part X			
				(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing		4,247,223.	1	222,406.
	2	Savings and temporary cash investments	L	246,434.	2	256,290.
	3	Pledges and grants receivable, net	-	163,027.	3	247,449.
	4	Accounts receivable, net		2,690,202.	4	861,437.
	5	Loans and other receivables from any current or former of trustee, key employee, creator or founder, substantial concontrolled entity or family member of any of these person	officer, director, ntributor, or 35% as		5	
	6	Loans and other receivables from other disqualified person section 4958(f)(1)), and persons described in section 495		6		
	7	Notes and loans receivable, net		1,479,756.	7	1,470,244.
ts	8	Inventories for sale or use		1/1/3//001	8	1,1,0,211.
Assets	9	Prepaid expenses and deferred charges	<u>-</u>	35,970.	9	60,734.
As	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	la 180,774,817.			
	b	Less: accumulated depreciation		170,500,338.	10c	166,006,456.
	11	Investments – publicly traded securities		879,024.	11	816,559.
	12	Investments – other securities. See Part IV, line 11		•	12	
	13	Investments – program-related. See Part IV, line 11		13		
	14	Intangible assets		14		
	15	Other assets. See Part IV, line 11		3,955,665.	15	11,017,989.
	16	Total assets. Add lines 1 through 15 (must equal line 33)		184,197,639.	16	180,959,564.
	17	Accounts payable and accrued expenses	812,632.	17	851,143.	
	18	Grants payable	L	•	18	
	19	Deferred revenue	-	15,270.	19	19,050.
	20	Tax-exempt bond liabilities	<u> </u>		20	
ies	21	Escrow or custodial account liability. Complete Part IV o	L		21	
Liabilities	22	Loans and other payables to any current or former officer key employee, creator or founder, substantial contributor, controlled entity or family member of any of these persor	or 35%		22	
	23	Secured mortgages and notes payable to unrelated third	parties	16,499,184.	23	10,850,000.
	24	Unsecured notes and loans payable to unrelated third part		·	24	·
	25	Other liabilities (including federal income tax, payables to and other liabilities not included on lines 17-24). Complet			25	
	26	Total liabilities. Add lines 17 through 25		17,327,086.	26	11,720,193.
nces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.	X			
ala	27	Net assets without donor restrictions	F	165,668,900.	27	165,601,912.
18	28	Net assets with donor restrictions	b	1,201,653.	28	3,637,459.
Net Assets or Fund Balance		Organizations that do not follow FASB ASC 958, check I and complete lines 29 through 33.	nere			
ō	29	Capital stock or trust principal, or current funds			29	
ets	30	Paid-in or capital surplus, or land, building, or equipment	fund		30	
155	31	Retained earnings, endowment, accumulated income, or	L		31	
et./	32	Total net assets or fund balances		166,870,553.	32	169,239,371.
ž	33	Total liabilities and net assets/fund balances		184,197,639.	33	180,959,564.

BAA TEEA0111L 09/01/22 Form **990** (2022)

	(, 1110 1121414141 0011001 141101	00.010	•		<u> </u>		
Par	t XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI.						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	12,2				
2	Total expenses (must equal Part IX, column (A), line 25)	2			<u>345.</u>		
3	Revenue less expenses. Subtract line 2 from line 1	3	2,4	07,3	192.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))		166,8	70,5	<u> 553.</u>		
5	Net unrealized gains (losses) on investments.	5	_	38,3	374.		
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain on Schedule O)	9		0.			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10	169,2	39,	<u> 371.</u>		
Par	t XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII				. 🗍		
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked "Other," explain		_				
•	on Schedule O.				V		
Za	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review separate basis, consolidated basis, or both:	ed on a					
	Separate basis, Consolidated basis, of both. Separate basis Consolidated basis Both consolidated and separate basis						
			01	Х			
b	Were the organization's financial statements audited by an independent accountant?		. 2b	Λ			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separabasis, consolidated basis, or both:	ate					
	X Separate basis Consolidated basis Both consolidated and separate basis						
_	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit						
·	review, or compilation of its financial statements and selection of an independent accountant?	, 	. 2c	Х			
	If the organization changed either its oversight process or selection process during the tax year, explain						
	on Schedule O.						
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Guidance, 2 C.F.R Part 200, Subpart F?	Unitorm	. 3a		Х		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit	dit					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3b				
BAA	TEEA0112L 09/01/22		Form	990	(2022)		

SCHEDULE A (Form 990)

Total

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047 2022

Open to Public

Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number The Wildlands Conservancy 33-0676450 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 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.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 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 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations **g** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E)

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									
begi	ndar year (or fiscal year nning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	10671009.	751,262.	4,045,449.	19412620.	4,582,042.	39,462,382.		
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		,				0.		
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.		
	Total. Add lines 1 through 3 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)	10671009.	751,262.	4,045,449.	19412620.	4,582,042.	39,462,382.		
6	Public support. Subtract line 5 from line 4						39,462,382.		
Sec	tion B. Total Support						<u> </u>		
	ndar year (or fiscal year nning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total		
7	Amounts from line 4	10671009.	751,262.	4,045,449.	19412620.	4,582,042.	39,462,382.		
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	40,119.	33,036.	7,789.	79,541.	213,421.	373,906.		
9	Net income from unrelated business activities, whether or not the business is regularly carried on	,	,	,	, , ,		0.		
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) See Part VI.	9,890,097.	4,863,663.	4,881,497.	5,844,579.	5,106,973.	30,586,809.		
	Total support. Add lines 7 through 10						70,423,097.		
12	Gross receipts from related activ	rities, etc. (see ins	structions)			12	0.		
13	First 5 years. If the Form 990 is organization, check this box and	for the organization stop here	on's first, second,	third, fourth, or f	ifth tax year as a	section 501(c)(3)			
Sec	tion C. Computation of Pu	blic Support P	ercentage						
	Public support percentage for 20						56.04%		
	Public support percentage from					<u> </u>	55.50 %		
	33-1/3% support test—2022. If t and stop here. The organization	qualifies as a pul	olicly supported o	rganization			X		
b	33-1/3% support test—2021. If the and stop here. The organization	e organization did qualifies as a pu	d not check a box blicly supported o	on line 13 or 16a or 16a or 16a	a, and line 15 is 3	3-1/3% or more, o	check this box		
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the facts	meets the facts-a	nd-circumstances	s test, check this	box and stop here	e. Explain in Part	VI how		
b	10%-facts-and-circumstances te or more, and if the organization organization meets the facts-and	meets the facts-a	nd-circumstances	s test, check this	box and stop here	e. Explain in Part	VI how the		
18	Private foundation. If the organization	zation did not che	ck a box on line	13, 16a, 16b, 17a	, or 17b, check th	is box and see in	structions		

Schedule A (Form 990) 2022

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

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

Sec	tion A. Public Support	Section A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	(a) 2010	(5) 2513	(0) 2020	(a) 2321	(C) ZOZZ	(i) Total	
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.							
3	Gross receipts from activities that are not an unrelated trade or business under section 513.							
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.							
5	The value of services or facilities furnished by a governmental unit to the organization without charge							
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons							
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.							
С	Add lines 7a and 7b							
8	Public support. (Subtract line 7c from line 6.)							
	tion B. Total Support				1	T		
	dar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
	Amounts from line 6							
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
	Add lines 10a and 10b. Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on							
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
	Total support. (Add lines 9, 10c, 11, and 12.)							
	First 5 years. If the Form 990 is organization, check this box and	stop here						
	tion C. Computation of Pul							
	Public support percentage for 20	•	.,,		•		<u> </u>	
	Public support percentage from 2					16	%	
	tion D. Computation of Inv							
17		•		-	* * * *		<u> </u>	
	Investment income percentage f						% 	
	33-1/3% support tests—2022. If t is not more than 33-1/3%, check	this box and sto	p here. The organ	ization qualifies a	as a publicly supp	orted organization		
	33-1/3% support tests—2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
	the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>	9b		
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .	9с		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Par	t IV	Supporting Organizations (continued)			
11	Hac	the organization accepted a gift or contribution from any of the following persons?		Yes	No
	A pe	erson who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below,			
		governing body of a supported organization?	11a		
		imily member of a person described on line 11a above?	11b		
		% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .	11c		
Sec	tion	B. Type I Supporting Organizations		Yes	No
1	or moffice organization	the governing body, members of the governing body, officers acting in their official capacity, or membership of one more supported organizations have the power to regularly appoint or elect at least a majority of the organization's ters, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported anization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers		les	NO
2	Did that ben	the tax year. the organization operate for the benefit of any supported organization other than the supported organization(s) operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such effit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the porting organization.	2		
٠					
sec	tion	C. Type II Supporting Organizations		Yes	No
1	of e	e a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ach of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the porting organization was vested in the same persons that controlled or managed the supported organization(s).	1	103	
Sec	tion	D. All Type III Supporting Organizations			
1	orga year	the organization provide to each of its supported organizations, by the last day of the fifth month of the anization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax r, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the anization's governing documents in effect on the date of notification, to the extent not previously provided?	1	Yes	No
2	orga	e any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported anization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	voic all ti	eason of the relationship described on line 2, above, did the organization's supported organizations have a significant e in the organization's investment policies and in directing the use of the organization's income or assets at imes during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played his regard.	3		
Sec	tion	E. Type III Functionally Integrated Supporting Organizations			
1	Che	ck the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
á		The organization satisfied the Activities Test. Complete line 2 below.			
ŀ	\equiv	The organization is the parent of each of its supported organizations. Complete line 3 below.			
ď	\equiv	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see	instru	uctions	s).
2	Acti	vities Test. Answer lines 2a and 2b below.		Yes	No
ā	supp orga resp	substantially all of the organization's activities during the tax year directly further the exempt purposes of the ported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported anizations and explain how these activities directly furthered their exempt purposes, how the organization was ponsive to those supported organizations, and how the organization determined that these activities constituted stantially all of its activities.	2a		
ŀ	mor reas	the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or e of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the sons for the organization's position that its supported organization(s) would have engaged in these activities for the organization's involvement.	2b		
3	Pare	ent of Supported Organizations. Answer lines 3a and 3b below.			
ā	Did each	the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of h of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>	3a		
ŀ		the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its ported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

	the nilatinae competition			,,0100
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	niza	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust instructions. All other Type III non-functionally integrated supporting organization	t on N ns mu	ov. 20, 1970 (explain ir st complete Sections A	n Part VI). See through E.
Sec	tion A — Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
_ 7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B — Minimum Asset Amount			(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
ā	Average monthly value of securities	1a		
ŀ	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
•	e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

BAA Schedule A (Form 990) 2022

Pai	$\mathbf{t} \mathbf{V} = \mathbf{I} \mathbf{y} \mathbf{p} \mathbf{e}$ III Non-Functionally integrated 509(a)(3) Supporting Organizations (cont	inuea)			
Sec	ection D — Distributions				
1	Amounts paid to supported organizations to accomplish exempt purposes	1			
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3			
4	Amounts paid to acquire exempt-use assets	4			
5	Qualified set-aside amounts (prior IRS approval required — provide details in Part VI)	5			
6	Other distributions (describe in Part VI). See instructions.	6			
7	Total annual distributions. Add lines 1 through 6.	7			
8	Distributions to attentive supported organizations to which the organization is responsive (provide details				
	in Part VI). See instructions.	8			
9	Distributable amount for 2022 from Section C, line 6	9			
10	Line 8 amount divided by line 9 amount	10			

To Line 8 amount divided by line 9 amount			
Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required — <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

BAA Schedule A (Form 990) 2022

Part VI

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

Part II, Line 10 - Other Income

Nature and Source	2022	2021	2020	2019	2018
Filming Income, School E	vent Fees, (Other			
Sale of Easement		\$2,223,797.	\$ 84,183.	\$ 166,243. 4,275,316.	
Life Insurance Proceeds Paycheck Protection Prog	ram				9,697,446.
1			202,096.	422,104.	
Fire Insurance Proceeds Property Tax Refund	\$ 133,689. 23,618.	161,917.	4,340,537. 254,681.		
Other Sales of Assets	4,109,128.	2,504,780.	·		
Sale of Livestock	368,908.	183,857.			
Extension Payments	233,333.	750,000.			
Other Income	238,297.	20,228.	14 001 405	+4 060 660	+ 0 000 000
Total	\$5,106,973.	\$5,844,579.	\$4,881,497.	\$4,863,663.	\$ 9,890,097.

BAA TEEA0408L 09/09/22 Schedule A (Form 990) 2022

Schedule B (Form 990)

Schedule of Contributors

2022

Employer identification number

2022

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

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

The Wildlands Conservancy 33-0676450 Organization type (check one): Filers of: Section: X 501(c)(3) Form 990 or 990-EZ (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year. Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it

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

2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Schedule B (Form 990) (2022)

must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line

Employer identification number

\sim	$\sim c - c$	CAEA
~ ~ —	116 1	6/15/1
\mathcal{L}	001	6450

The Wildlands Conservancy Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (d) Type of contribution (b) Name, address, and ZIP + 4 (c) Total contributions (a) No. Person **Payroll** 334,521 Noncash (Complete Part II for noncash contributions.) (b) Name, address, and ZIP + 4 (c) Total contributions (d) Type of contribution (a) No. Person 2__ **Payroll** 500,000. Noncash (Complete Part II for noncash contributions.) (b) Name, address, and ZIP + 4 (c)
Total contributions (a) No. (d) Type of contribution Person 3__ **Payroll** 118,514. Noncash (Complete Part II for noncash contributions.) (b) Name, address, and ZIP + 4 (d) Type of contribution (a) No. (c) Total contributions Person <u>4</u>__ **Payroll** 1,000,000. Noncash (Complete Part II for noncash contributions.) (a) No. (c) Total contributions (d) Type of contribution (b) Name, address, and ZIP + 4 Person 5_ **Payroll** 100,000. Noncash (Complete Part II for noncash contributions.) (a) No. (c) Total contributions (d) Type of contribution (b) Name, address, and ZIP + 4 Person 6 **Payroll** 700,000. Noncash (Complete Part II for noncash contributions.)

Employer identification number

ıe	Wildlands	Conservancy	J	33-067645	50
	"TTTGTGTG	COLLECT VALLE		00 00 010	, ,

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional sp	pace is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ <u>125,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$315,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		.\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)

Name of organization Employer identification number 33-0676450 The Wildlands Conservancy

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	Vacant Land		
		\$334,521.	6/30/23
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-	
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		-	
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
BAA	TEEA0703L 07/22/22	Schedule E	3 (Form 990) (2022

Name of organization Employer identification number The Wildlands Conservancy 33-0676450 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000** or less for the year. (Enter this information once. See instructions.)..... Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I N/A (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

BAA

SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

•	Section 501(c)(4), (5), or (6) (organizations: Complete Part III.			
	of organization	. 3		Employer identific	ation number
The	e Wildlands Conserv	vancy		33-067645	50
		rganization is exempt under secti			zation.
1	Provide a description of the See instructions for definitio	organization's direct and indirect political on of "political campaign activities."	campaign activities in	Part IV.	
2	Political campaign activity e	xpenditures. See instructions		¢	5
3	Volunteer hours for political	campaign activities. See instructions			
Par	t I-B Complete if the o	rganization is exempt under secti	on 501(c)(3).		
1	Enter the amount of any exc	cise tax incurred by the organization under	section 4955		0.
2	Enter the amount of any exc	cise tax incurred by organization managers	under section 4955.		0.
3	If the organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4a	Was a correction made?				· · · · · Yes No
	If "Yes," describe in Part IV.				
Par		rganization is exempt under secti			
1	Enter the amount directly ex	spended by the filing organization for section	on 527 exempt function	n activities \$	S
2	Enter the amount of the filin 527 exempt function activities	g organization's funds contributed to other	organizations for sec	tion \$	<u> </u>
3	Total exempt function exper line 17b	nditures. Add lines 1 and 2. Enter here and	on Form 1120-POL,	\$	<u> </u>
4	Did the filing organization fil	e Form 1120-POL for this year?			Yes No
5	Enter the names, addresses organization made payment amount of political contribution segregated fund or a political	s and employer identification number (EIN) s. For each organization listed, enter the ans received that were promptly and directly deal action committee (PAC). If additional spaces	of all section 527 pol mount paid from the livered to a separate po ace is needed, provid	itical organizations to viling organization's fun blitical organization's such e information in Part IV	which the filing ds. Also enter the n as a separate
	(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
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Schedule C (Form 990) 2022

Part II-A Complete if section 501	the organizatior (h)).	is exempt under se	ction 501(c)(3) and	filed Form 5768 (el	lection under
A Check if the filir address,	ng organization belong , EIN, expenses, and	s to an affiliated group (and share of excess lobbying d box A and "limited contro	g expenditures).	ated group member's name	e,
	Limits on Lobby	ing Expenditures		(a) Filing organization's totals	(b) Affiliated group totals
(The term 1a Total lobbying expendit	•	ns amounts paid or incu	·	organization's totals	group totals
b Total lobbying expendit	·				
		nd 1b)			
	•				
		es 1c and 1d)			
		ount from the following ta			
If the amount on line 1e, col	lumn (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		\$100,000 plus 15% of the excess			
Over \$1,000,000 but not over \$		\$175,000 plus 10% of the excess			
Over \$1,500,000 but not over \$		\$225,000 plus 5% of the excess	over \$1,500,000.		
Over \$17,000,000		\$1,000,000.			
•	•	of line 1f)			
_		enter -0-			
		onto: o			
		line 1h or line 1i, did the or			Yes No
section 4911 tax for this	s year? ne organizations tha		Under Section 501(h) lection do not have to c	complete all of the five	···· Yes No
section 4911 tax for this	s year? ne organizations tha columns bel	4-Year Averaging Period t made a section 501(h) e	Under Section 501(h) lection do not have to c tructions for lines 2a th	complete all of the five rough 2f.)	···· Yes No
section 4911 tax for this	s year? ne organizations tha columns bel	1-Year Averaging Period t made a section 501(h) e ow. See the separate ins	Under Section 501(h) lection do not have to c tructions for lines 2a th	complete all of the five rough 2f.)	Yes No (e) Total
section 4911 tax for this (Som	s year? ne organizations tha columns bel	1-Year Averaging Period t made a section 501(h) e ow. See the separate ins ying Expenditures During	Under Section 501(h) lection do not have to c tructions for lines 2a th J 4-Year Averaging Peri	complete all of the five rough 2f.)	
Calendar year (or fiscal year beginning in) 2a Lobbying nontaxable	s year? ne organizations tha columns bel	1-Year Averaging Period t made a section 501(h) e ow. See the separate ins ying Expenditures During	Under Section 501(h) lection do not have to c tructions for lines 2a th J 4-Year Averaging Peri	complete all of the five rough 2f.)	
Calendar year (or fiscal year beginning in) 2a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line	s year? ne organizations tha columns bel	1-Year Averaging Period t made a section 501(h) e ow. See the separate ins ying Expenditures During	Under Section 501(h) lection do not have to c tructions for lines 2a th J 4-Year Averaging Peri	complete all of the five rough 2f.)	
Calendar year (or fiscal year beginning in) 2a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying	s year? ne organizations tha columns bel	1-Year Averaging Period t made a section 501(h) e ow. See the separate ins ying Expenditures During	Under Section 501(h) lection do not have to c tructions for lines 2a th J 4-Year Averaging Peri	complete all of the five rough 2f.)	
Calendar year (or fiscal year beginning in) 2a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures d Grassroots nontaxable	s year? ne organizations tha columns bel	1-Year Averaging Period t made a section 501(h) e ow. See the separate ins ying Expenditures During	Under Section 501(h) lection do not have to c tructions for lines 2a th J 4-Year Averaging Peri	complete all of the five rough 2f.)	
Calendar year (or fiscal year beginning in) 2a Lobbying nontaxable amount b Lobbying ceiling amount (150% of line 2a, column (e)) c Total lobbying expenditures d Grassroots nontaxable amount e Grassroots ceiling amount (150% of line 2mount (150% of line 2m	s year? ne organizations tha columns bel	1-Year Averaging Period t made a section 501(h) e ow. See the separate ins ying Expenditures During	Under Section 501(h) lection do not have to c tructions for lines 2a th J 4-Year Averaging Peri	complete all of the five rough 2f.) od (d) 2022	

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

_		(a	1)	(b)
	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed cription of the lobbying activity.	Yes	No	Amount
1	See Part IV 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:			
	Volunteers?		X	
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
С	Media advertisements?		X	
d	Mailings to members, legislators, or the public?		Χ	
е	Publications, or published or broadcast statements?		X	
f	Grants to other organizations for lobbying purposes?		X	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Χ		106,147.
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Χ	·
i	Other activities?		Χ	
j	Total. Add lines 1c through 1i			106,147.
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		Х	, i
b	If "Yes," enter the amount of any tax incurred under section 4912			
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
	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
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3		

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

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

Part IV | Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Part II-B - Description of Lobbying Activity

The Conservancy hired two firms which provided consultation and advocacy in support of funding projects through multiple funding sources, as well as regional conservation investment strategies. They provided lobbying for legislation that provides grant funding for Rana Creek, Eel River Canyon Preserve, Santa Ana River

Trail, and others.

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Attach to Form 990.

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

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection
Employer identification number

The	Wildlands Conservancy			33-06	76450	
Par			er Similar F	unds or Account	S.	
	Complete if the organization answered	d "Yes" on Form 990, Part IV, line 6.				
		(a) Donor advised fund	ds	(b) Funds and	d other acco	ounts
1	Total number at end of year					
2	Aggregate value of contributions to (during year)					
3	Aggregate value of grants from (during year)					
4	Aggregate value at end of year					
5	Did the organization inform all donors and do are the organization's property, subject to the				Yes	No
6	Did the organization inform all grantees, don for charitable purposes and not for the bene impermissible private benefit?	nors, and donor advisors in writing t fit of the donor or donor advisor, or	hat grant fun for any othei	ds can be used only r purpose conferring	Yes	No
Par	t II Conservation Easements.				<u></u>	
	Complete if the organization answered	d "Yes" on Form 990, Part IV, line 7.				
1	Purpose(s) of conservation easements held	by the organization (check all that a	apply).			
	X Preservation of land for public use (for exar	mple, recreation or education)	Preservat	ion of a historically im	nportant lan	d area
	X Protection of natural habitat		Preservat	ion of a certified histo	ric structure	9
	X Preservation of open space					
2	Complete lines 2a through 2d if the organization last day of the tax year.	n held a qualified conservation contribu	ution in the for			
					e End of th	e Tax Year
	Total number of conservation easements			- 0		
	Total acreage restricted by conservation eas			<u> </u>		
	Number of conservation easements on a cer					
	Number of conservation easements included historic structure listed in the National Regis	ter		2d		
3	Number of conservation easements modified, tratax year	-	erminated by t	the organization during	the	
4	Number of states where property subject to o			<u>1</u>		
5	Does the organization have a written policy r				Yes	V No
6	and enforcement of the conservation easemed Staff and volunteer hours devoted to monitoring					X No ear
7	Amount of expenses incurred in monitoring, insp	pecting, handling of violations, and en	forcing conser	vation easements durin	g the year	
8	Does each conservation easement reported and section 170(h)(4)(B)(ii)?	on line 2(d) above satisfy the requir	rements of se	ection 170(h)(4)(B)(i)	Yes	No
9	In Part XIII, describe how the organization reinclude, if applicable, the text of the footnote conservation easements. See Part X	e to the organization's financial stat	s revenue an ements that o	d expense statement describes the organiza	and balance ation's acco	e sheet, and unting for
Par		ollections of Art, Historical 1	Treasures,	or Other Similar	Assets.	
1 a	If the organization elected, as permitted und historical treasures, or other similar assets he Part XIII the text of the footnote to its finance	neld for public exhibition, education,	or research	tatement and balance in furtherance of publ	sheet work ic service, p	s of art, provide in
ŀ	If the organization elected, as permitted und historical treasures, or other similar assets held following amounts relating to these items:	for public exhibition, education, or res	search in furth	erance of public service	, provide the	art,
	(i) Revenue included on Form 990, Part VII					
	(ii) Assets included in Form 990, Part X					
	If the organization received or held works of art, amounts required to be reported under FASE	3 ASC 958 relating to these items:			ollowing	
	Revenue included on Form 990, Part V	ne 1			\$ 	
L						

Part III O	rganizations Main	taining Co	llectio	ns of Art, Hi	storio	cal Treasures,	or Other Similar	Assets	(contii	าued)_
	organization's acquisition eck all that apply):	, accession, a	nd other	records, check	any of	the following that m	nake significant use of	its collecti	on	
a Public	exhibition			d Loar	or exc	change program				
b Schola	arly research			e Othe	r					
c Prese	rvation for future gener	ations		_						
4 Provide a Part XIII.	description of the organiz	zation's collect	ions and	explain how the	ey furth	er the organization'	s exempt purpose in			
	year, did the organiza to raise funds rather the									No
Part IV E	scrow and Custod ported an amount on Fo	lial Arrange orm 990, Part	ements X, line 2	s. Complete if 1 1.	the orga	anization answered	d "Yes" on Form 990, 1	Part IV, lir	ie 9, or	
1 a Is the orga	anization an agent, trus	stee, custodia	n or oth	er intermediar	y for co	ontributions or oth	er assets not include	d	_	_
	90, Part X?							. Yes	; <u> </u>	No
b If "Yes," ex	xplain the arrangement in	n Part XIII and	complete	e the following	able:					
								Amour	nt	
	balance									
	during the year									
	ns during the year									
-	lance							П.,		٦
	ganization include an a						-		_	No
b IT "Yes," e	explain the arrangemen	t in Part XIII.	Спеск г	iere it the expi	anatio	n nas been provid	ed on Part XIII		L	
Part V E	ndowment Funds.	Complete if t	he organ	ization answer	ad "Vac	" on Form 990 Pa	rt IV ling 10			
rait V L	ildowillelle i dilus.	(a) Current		(b) Prior ye		(c) Two years back		ck (a)	Four years	e hack
1 a Beginning	of year balance	(a) Guileill	yeai	(D) FIIOL ye	aı	(C) TWO years back	(u) Tillee years ba	υν (ε)	Tour year.	s Dack
	ons									
	ment earnings, gains,									
	scholarships									
	enditures for facilities									
	ams									
f Administra	ative expenses									
•	ar balance									
	e estimated percentag		nt year	end balance (l	ine 1g,	column (a)) held	as:			
	ignated or quasi-endov			%						
	it endowment	%								
c Term end										
The percer	ntages on lines 2a, 2b, a	nd 2c should e	qual 100	%.						
	endowment funds not in t	the possession	of the o	rganization that	are he	ld and administered	for the			
organizati	-							2 (2)	Yes	No
• • •	ated organizations ed organizations									
` '	n line 3a(ii), are the rel									
	n Part XIII the intended	_		•				3b		
				ation's endown	ient iu	ius.				
	and, Buildings, an Implete if the organizati			Form 990, Par	t IV, lir	ie 11a. See Form 9	90, Part X, line 10.			
	escription of property		(a) Cost (in	or other basis vestment)	(b	Cost or other basis (other)	(c) Accumulated depreciation	(d)	Book va	alue
1 a Land			154	,533,243.				154	1,533,	243.
b Buildings.			11	,136,785.			5,516,360		5,620	
c Leasehold	improvements			,250,481.			7,765,394		1,485	
d Equipmen	t			,641,054.			1,303,433		L,337	
				213,254.			183,174			,080.
Total. Add lines	1a through 1e. (Colum	nn (d) must e	qual For	m 990, P art X,	colum	n (B), line 10c.)		166	5,006	,456.

Schedule D (Form 990) 2022

N/A O, Part IV, line 11b. See Form 990, Part X, line 12. (c) Method of valuation: Cost or end-of-year market value N/A O, Part IV, line 11c. See Form 990, Part X, line 13. Sook value (c) Method of valuation: Cost or end-of-year market value
N/A 90, Part IV, line 11c. See Form 990, Part X, line 13.
90, Part IV, line 11c. See Form 990, Part X, line 13.
90, Part IV, line 11c. See Form 990, Part X, line 13.
90, Part IV, line 11c. See Form 990, Part X, line 13.
90, Part IV, line 11c. See Form 990, Part X, line 13.
90, Part IV, line 11c. See Form 990, Part X, line 13.
90, Part IV, line 11c. See Form 990, Part X, line 13.
90, Part IV, line 11c. See Form 990, Part X, line 13.
90, Part IV, line 11c. See Form 990, Part X, line 13.
90, Part IV, line 11c. See Form 990, Part X, line 13.
90, Part IV, line 11c. See Form 990, Part X, line 13.
90, Part IV, line 11c. See Form 990, Part X, line 13.
90, Part IV, line 11c. See Form 990, Part X, line 13.
90, Part IV, line 11c. See Form 990, Part X, line 13.
(c) Welliod of Valuation. Gost of Grid of year market value
NO Port IV line 11d Con Form 000 Port V line 15
00, Part IV, line 11d. See Form 990, Part X, line 15. (b) Book value
2,664,52
6,091,25
530,07
1,560,37
171,77
5.)
90, Part IV, line 11e or 11f. See Form 990, Part X, line 25.
liability (b) Book value
he organization's financial statements that reports the organization's liability for uncertain
9

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per I	≀eturn.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total revenue, gains, and other support per audited financial statements	1	12,194,163.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments	•	
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2 e	-38,374.
3 Subtract line 2e from line 1	3	12,232,537.
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		
b Other (Describe in Part XIII.)		
c Add lines 4a and 4b.	4 c	
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	12,232,537.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per	r Retur	'n.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1 Total expenses and losses per audited financial statements	1	9,825,345.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		· · · · · · · · · · · · · · · · · · ·
a Donated services and use of facilities		
b Prior year adjustments	_	
c Other losses		
d Other (Describe in Part XIII.)		
e Add lines 2a through 2d.	2 e	
3 Subtract line 2e from line 1	3	9,825,345.
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		
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b.		
c Add lines 4a and 4b. 5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.). Part XIII Supplemental Information.		9,825,345.

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

Part II, Line 9 - Organization Reporting Of Conservation Easements

The easements are recorded as revenue when sold. El Dorado Park in San Bernardino County and potential easements at Blue Sky Meadow in San Bernardino County and Irvine Mesa (Silverado) in Orange County.

Part X - FASB ASC 740 Footnote

Management has considered its tax positions and believes that all of the positions taken by the Conservancy are more likely than not to be sustained upon examination.

BAA Schedule D (Form 990) 2022

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

| Employer identification number

The Wildlands Conservancy 33-0676450

Part I Questions Regarding Compensation

				Yes	No
1a	Check the appropriate box(es) if the organization provided any of the VII, Section A, line 1a. Complete Part III to provide any relevant	following to or for a person listed on Form 990, Part			
		_ rait iii			
		Housing allowance or residence for personal use			
	Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	Discretionary spending account	Personal services (such as maid, chauffeur, chef)			
ŀ	If any of the boxes on line 1a are checked, did the organization follow	a written policy regarding payment or			
_	reimbursement or provision of all of the expenses described above		1b	Χ	
2	Did the organization require substantiation prior to reimbursing of trustees, and officers, including the CEO/Executive Director, rega		2	Х	
	, , , , , , , , , , , , , , , , , , , ,	, and the second		Λ	
3	Indicate which, if any, of the following the organization used to establi Executive Director. Check all that apply. Do not check any boxes establish compensation of the CEO/Executive Director, but explain	ish the compensation of the organization's CEO/ is for methods used by a related organization to in in Part III.			
	Compensation committee	Written employment contract			
	Independent compensation consultant X	Compensation survey or study			
	Form 990 of other organizations	Approval by the board or compensation committee			
		-			
4	During the year, did any person listed on Form 990, Part VII, Secondarization or a related organization:	ction A, line 1a, with respect to the filing			
а	Receive a severance payment or change-of-control payment?		4a		Χ
b	Participate in or receive payment from a supplemental nonqualifi	ied retirement plan?	4b		Χ
C	: Participate in or receive payment from an equity-based compens	<u>-</u>	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable	le amounts for each item in Part III.			
	Out	t			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations m	·			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the or contingent on the revenues of:	organization pay or accrue any compensation			
а	The organization?		5a		X
b	Any related organization?		5b		X
	If "Yes" on line 5a or 5b, describe in Part III.				
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the or contingent on the net earnings of:	organization pay or accrue any compensation			
-	The organization?		6a		v
	Any related organization?	<u> </u>	6b		X X
	If "Yes" on line 6a or 6b, describe in Part III.				Λ
7	For persons listed on Form 990, Part VII, Section A, line 1a, did	the organization provide any ponfived			
,	payments not described on lines 5 and 6? If "Yes," describe in P	Part III	7		Χ
8	Were any amounts reported on Form 990, Part VII, paid or accrue	led pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section ! If "Yes," describe in Part III.	53.4958-4(a)(3)?	8		v
	II 165, UCSCHUC III FAILIII		0		Х
9	If "Yes" on line 8, did the organization also follow the rebuttable presu	umption procedure described in Regulations	0		

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

Schedule J (Form 990) 2022

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

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

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

		(B) Breakdown of W-2 a	nd/or 1099-MISC and/o	r 1099-NEC compensation		(D) Nontaxable benefits	(E) Total of columns(B)(i)-(D)	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	benefits	columns(B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
David Myers	(i)	144,723.	0.	0.	0.	57,168.	201,891.	0.
1 President	(ii)	0.	0.	0.	$\frac{1}{0}$.	0.	0.	0.
Frazier Haney	(i)	138,858.	0.	0.	0.	27,331.	166,189.	0.
2 Executive Dir.	(ii)	0.	0.	0.	$\frac{1}{0}$.	0.	$\overline{0}$.	0.
3	(i) (ii)							
_ <u></u>	(i)							
4	(ii)							
5	(i)						 	
6	(i) (ii)							
0	(i)							
7	(ii)							
8	(i)				 		 	
· <u> </u>	(i)							
9	(ii)							
10	(i)				 		<u> </u>	
	(i)							
11	(ii)							
	(i)							
12	(ii)							
13	(i)							
	(i)							
14	(ii)						<u> </u>	
	(i)							
15	(ii)							
10	(i)		 				 	
16 BAA	(ii)		TFFA4102L 07/2F	100				(Form 990) 2022

BAA

Schedule J (Form 990) 2022

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Part 1, Line 1a - Relevant Information Regarding Compensation Benefits

The personal living quarters are offered to provide a 24-hour presence at the preserve, as well as for security and assistance to hikers.

TEEA4103L 07/25/22

SCHEDULE L (Form 990)

Total

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Employer identification number The Wildlands Conservancy 33-0676450 **Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (b) Relationship between disqualified person and (d) Corrected? (c) Description of transaction 1 (a) Name of disqualified person organization Yes No (1) (2) (3)(4) (5) (6) 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22. (e) Original principal amount (b) Relationship with organization (c) Purpose of (d) Loan to or (a) Name of interested person (f) Balance due (a) In default? (h) Approved (i) Written from the organization? То From Yes No Yes No Yes No (1) (2)(3) (4) (5) (6) (7) (8) (9) (10)

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

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
·				
	(a) Name of interested person	(a) Name of interested person (b) Relationship between interested person and the organization	(a) Name of interested person (b) Relationship between interested person and the organization (c) Amount of assistance	(a) Name of interested person (b) Relationship between interested person and the organization (c) Amount of assistance (d) Type of assistance

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

Schedule L (Form 990) 2022

Part IV Business Transactions Involving Interested Persons.

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

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	organiz	aring of zation's nues?
				Yes	No
(1) Outward Bound Adventures	Board member	106,750.	Program support		X
(2) AEA Remodeling	Husband HR Dir.	414,953.	Construction		X
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information.

Provide additional information for responses to questions on Schedule L (see instructions).

Supplemental Information

Charles Thomas is a Director at Outward Bound Adventures and a board member of the Conservancy. The Conservancy paid OBA \$106,750 for sponsorships, general operations, and for program support during the year. Also, Anthony Malone, the owner of AEA Remodeling, is the husband of the Human Resource Director and was paid \$414,953 for construction services during the year.

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

The Wildlands Conservancy

Employer identification number

33-0676450

(a) (b) Number of contributions or items contributed on Form 990, Part VIII, line 1g 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 10 Securities — Closely held stock			
2 Art — Historical treasures	(d Method of d ncash contrib	etermin	iing mounts
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.			
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.			
5 Clothing and household goods. 6 Cars and other vehicles. 7 Boats and planes. 8 Intellectual property. 9 Securities – Publicly traded.			
6 Cars and other vehicles			
7 Boats and planes			
8 Intellectual property			
9 Securities - Publicly traded			
10 Securities – Closely held stock			
11 Securities – Partnership, LLC, or trust interests .			
12 Securities – Miscellaneous			
13 Qualified conservation contribution — Historic structures			
14 Qualified conservation contribution — Other			
15 Real estate – Residential			
16 Real estate – Commercial			
17 Real estate - Other. X 1 334,521. FMT	V		
18 Collectibles			
19 Food inventory.			
20 Drugs and medical supplies			
21 Taxidermy			
22 Historical artifacts			
23 Scientific specimens			
24 Archeological artifacts.			
25 Other ()			
26 Other ()			
27 Other ()			
28 Other ()			
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement			
organization completed Form 6263, Fait V, Donee Acknowledgement		Yes	No
		163	NO
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that			
it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30 а		Х
b If "Yes," describe the arrangement in Part II.	Jou		<u> </u>
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?.	31		Х
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash			71
contributions?	32 a		Х
b If "Yes," describe in Part II.			
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

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

Schedule M (Form 990) 2022

Part II Supplemental Information. 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.

BAA TEEA4602L 07/12/22 Schedule M (Form 990) 2022

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

The Wildlands Conservancy

Employer identification number

33-0676450

Form 990, Part III, Line 4a - Program Service Accomplishments

Preserve Management: Stewarding nature preserves that are open to over 1,500,000 visitors annually. The Conservancy has established the largest nonprofit nature preserve system on the West Coast, comprising 23 preserves encompassing nearly 200,000 acres of diverse mountain, valley, desert, river and coastal landscapes. Ecological restoration and species rewilding are an emphasis in the Conservancy's approach to land management. Since the Conservancy believes that access to nature is a birthright, preserves are open to the public free of charge for passive recreation, including camping, hiking, picnicking, birding, field studies, and more. The Conservany's motto "Behold the Beauty" is also the name of the program that seeks to engage visitors and supporters to be inspired by these magnificent landscapes. The Conservancy employs a staff of friendly and knowledgeable rangers and stewards, who engage with visitors while stewarding the land and maintaining outdoor education sites. Each year they work side-by-side with hundreds of volunteers who log thousands of hours restoring and maintaining these unique and important properties.

Form 990, Part III, Line 4b - Program Service Accomplishments

Providing outdoor, environmental education: For more than two decades, the Conservancy has been Southern California's nonprofit leader in providing free outdoor education programs to underserved youth. Since the inception of city life, people have sought refuge from its commotion by retreating to nature and the great outdoors. An educational journey begins the moment a child steps outdoors and begins to wonder and think far beyond the textbook. Nature holds a mirror to our human sympathies - reflecting the kind, just, and loving qualities that elevate the human mind. After a quality outdoor learning experience, children return home with a new understanding and indelible memory of their place in the world. From day-long

Form 990, Part III, Line 4b - Program Service Accomplishments

outdoor education experience provided by the Conservany since 1995. Annually, more than 60,000 youth participate in educational opportunities at a Conservancy preserve, from self-guided exploratation through interactive interpetive signage to naturalist-guided field trips and programs. Since the pandemic, new preserve-based programs focus on providing visiting families and individuals with educational opportunities.

Form 990, Part III, Line 4c - Program Service Accomplishments

Land Acquisition and Land Conservation: TWC has acquired more than 750,000 acres for conservation using a blend of private and public funding, and still owns and manages nearly 200,000 acres as nature preserves. The preserves serve as outposts for land-based advocacy to support larger conservation efforts including the 154,000-acre Sand to Snow National Monument, named after the Conservancy's Sand to Snow Wilderness Interface Project, and the 1.6 million-arce Mojave Trails National Monument, the second largest national monument in the lower 48 states, of which more than 560,000 acres were acquired by the Conservancy with private funding, and was donated to the American people for conservation. The Conservancy is also the primary nonprofit organization advocating on behalf of the Santa Ana River Trail to complete the vision of a continuous 110-mile trail from the San Bernardino Mountains to the Pacific Ocean, which passes through the urban core of Orange, Riverside, and San Bernardino counties and is a passport to nature for millions of urban Southern California residents.

Form 990, Part VI, Line 2 - Business or Family Relationship of Officers, Directors, Etc.

Director Emily Gelbaum is the niece of Director Daniel Gelbaum

Form 990, Part VI, Line 11b - Form 990 Review Process

The tax return is reviewed by the Executive Director, CFO and Board of Directors.

	<u> </u>
Name of the organization	Employer identification number
The Wildlands Conservancy	33-0676450

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

Directors, CEO, President and CFO must annually sign a statement that affirms they have received and understand the conflict of interest policy, and disclose financial interests and family relationships that could give rise to conflicts of interest.

These statements are subsequently analyzed by TWC's Human Resource Director.

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

The Board of Directors reviews and approves any changes to the compensation and benefits paid to the CEO and CFO when those changes are more than what was given to other staff. Comparability data is used as part of the review process.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

TWC makes available to the public the most recent three years of Form 990's and audited financial statements. They are available on the Wildlands website under the Transparency tab.

BAA Schedule O (Form 990) 2022

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service
Name of the organization

The Wildlands Conservancy

Employer identification number 33-0676450

(a) Name, address, and EIN (if applicable) of disregarded entity		(b) Primary activity		(c) Legal domicile (state or foreign country)		(d) Total income		(e) End-of-year assets		(f) Direct controlling entity		olling		
(1) Remnant Ranch, LLC		39611 Oak Glen Road, Unit 12 Oak Glen, CA 92399 87-3546171		Holding Property Conserva Purpos	y for ation	C	CA		0.		171,533.		Wildl nserva	
Part II Identification of Related Tax-Exempt Organization of more related tax-exempt organization.		ons. Complete	e if the org	ganization	answere	d "Yes	s" on Form 99	90, Pai	t IV, line 34	, beca	use it			
(a) Name, address, and EIN of related organization					(c) (d) nicile (state Exempt 0		(e) Public charity (if section 501	status Direct con			Sec 512 controller	(b)(13) d entity?		
<u>(1)</u>											165	NO		
(2)														
(3) 														
(4)														

Part III	Identification of Related Organizations	Γaxable as a Partnership.	Complete if the organization a	inswered "Yes" on	Form 990, Part IV, line
artin	Identification of Related Organizations 7 34, because it had one or more related o	rganizations treated as a	partnėrship during the tax year		

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	mana	ral or	(k) Percentage ownership
		country)		512-514)			Yes	No	1065)	Yes	No	
<u>(1)</u>												
<u>(2)</u>												
(3)												

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	Sec 512 controlled) (b)(13) d entity?
		country)	entity	or trust)				Yes	No
(1)									
	Ī								
	Ī								
(2)									
	Ī								
	Ī								
(3)									
	†								
	†								1
	1			I		1			

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

Yes No

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Rece	eipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1 a	X							
b Gift,	grant, or capital contribution to related organization(s)	1 b	X							
c Gift,	grant, or capital contribution from related organization(s).	1 c	X							
d Loan	ns or loan guarantees to or for related organization(s).	1 d	X							
e Loan	ns or loan guarantees by related organization(s)	1 e	X							
		1 f	X							
g Sale	of assets to related organization(s)	1 g	X							
h Purcl	hase of assets from related organization(s)	1 h	X							
i Exch	nange of assets with related organization(s)	1i	X							
j Leas	se of facilities, equipment, or other assets to related organization(s)	1j	X							
k Leas	se of facilities, equipment, or other assets from related organization(s)	1 k	X							
I Perfo	ormance of services or membership or fundraising solicitations for related organization(s)	11	Х							
m Perfo	ormance of services or membership or fundraising solicitations by related organization(s)	1 m	X							
n Shar	ring of facilities, equipment, mailing lists, or other assets with related organization(s)	1 n	Х							
o Sharing of paid employees with related organization(s)										
p Reim	nbursement paid to related organization(s) for expenses	1 p	Х							
q Reim	nbursement paid by related organization(s) for expenses	1 q	Х							
r Othe	er transfer of cash or property to related organization(s)	1r	Х							
s Othe	er transfer of cash or property from related organization(s)	1 s	Х							
2 If the	answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.		*							
	(a) (b) (c) Name of related organization Transaction Amount involved Method	(d)	ermining							
	Name of related organization Transaction Amount involved Method type (a-s)	a of aet ount inv	ermining olved							
	ι (γρο (α 3)	ourit iiiv	01100							
1\										
1)										
2)										
3)										
4)										
5)										
•										
6)										
AA	TEEA5003L 07/21/22 Schedule R ((Form 9	90) 2022							
~~~	TELANOSE VIZIEZ SCHEUREN	(, (), (), ()	JU) 2022							

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unre- lated, excluded from tax under	section 501(c)(3) organizations?		Are all partners		Are all partners		Are all partners		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			from tax under sections 512-514)	Yes	No	•		Yes	No	(1 01111 1 0 0 0 )	Yes	No	+						
(1)																			
	_																		
	_																		
(2)																			
	]																		
	_																		
(2)																			
(3)	-																		
	1																		
<u>(4)</u>	-																		
	+																		
	-																		
(5)																			
	<u> </u>																		
	1																		
(6)																			
	]																		
	<u> </u>																		
(7)																			
32	†																		
	]																		
	-																		
	-																		

Schedule R (Form 990) 2022 The Wildlands Conservancy 33-067645

Part VII Provide additional information for responses to questions on Schedule R. See instructions.